
JUNE IOTADERMA (#304)

We all commonly encounter the “chicken skin” of dermatoheliosis on the neck (aka, poikiloderma of Civatte), and many of us even remember the “goose skin” findings seen in pellagra. Do you happen to know what a “turkey ear” is, and in what diseases it can sometimes be noted?

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Answer will appear in the *JAAD* Online section of the July issue of the Journal.

MAY IOTADERMA (#303)

Question: We all know that vipers and their envenomations are painful and dangerous. On the other hand, do you know what a “VIPoma” is and what its main dermatologic manifestation happens to be?

Answer: A VIPoma is a member of the **Pancreatic Neuroendocrine Tumors (PNET)** category of neoplasms. **PNETs** include vasoactive intestinal peptideomas (a.k.a. VIPomas), insulinomas, gastrinomas, glucagonomas, and somatostatinomas, and are categorized as either functional or nonfunctional depending on whether they actually release their protein products.¹ The various clinical manifestations of each of these tumors are the result of production and secretion of their specific tumoral hormones. In the case of VIPomas copious amounts of vasoactive intestinal peptide (VIP) are made and released into the circulation, and one of this protein’s many physiologic effects is to cause profound vasodilation of cutaneous vessels (ie, produce a florid flush).^{2,3} In this respect it is like its cousin the carcinoid tumor. These two neuroendocrine neoplasms, in fact, can have very similar clinical presentations and manifestations. Other neoplastic peptide producing causes of flushing which have to be considered in a patient with severe prolonged flushing episodes are medullary thyroid cancer, mastocytosis, renal cell carcinoma, and pheochromocytoma.^{2,3}

REFERENCES

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3. Izikson L, English JC 3rd, Zirwas MJ. The flushing patient: differential diagnosis, workup, and treatment. *J Am Acad Dermatol.* 2006;55(2):193-208.

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