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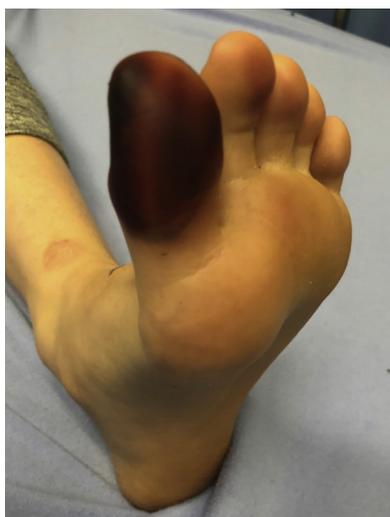
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**Figure 1.** Hyperpigmentation of the left great toe.



**Figure 2.** Hyperpigmentation of the plantar aspect of the left great toe.



**Figure 3.** Hyperpigmentation of the left great toe.

[Ann Emerg Med. 2019;74:333.]

A 13-year-old girl presented to an outside emergency department (ED) 1 day before presenting to our ED because her left great toe turned purple, without any pain, weakness, numbness, or trauma reported. Physical examination result was significant in regard to the left great toe's plantar surface, which showed a deep-purple hue (Figure 1) without tenderness or sensory or motor deficits, and with normal palpable pulses (Figures 2 and 3). The outside ED records revealed venous ultrasonography, computed tomographic angiography, CBC count, complete metabolic profile, and coagulation studies, with all results within normal limits. A radiograph and arterial ultrasonography also showed no abnormalities. The patient finally revealed that before her initial ED visit, she noted a millipede in her shoe.

*For the diagnosis and teaching points, see page 364.*

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(continued from p. 333)

### DIAGNOSIS:

*Millipede staining.* Millipedes lack fangs but have lateral glands that secrete a fluid containing cyanides and quinones, with the resulting injury to humans typically being a painless hyperpigmentation.<sup>1</sup> Contact with the toxic fluids can cause an acute inflammatory reaction and various forms of pigmentation or discoloration.<sup>2</sup> Injuries most often occur when victims put on their shoes, and the lesions may persist for months without sequelae.<sup>1</sup> The immediate use of alcohol or ether on the skin should be encouraged because it can dissolve toxins.<sup>1</sup> Treatment includes the use of soap and water, as well as application of tape to remove any leftover millipede hairs, and steroids with diphenhydramine for systemic symptoms.<sup>3</sup>

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