

# Atypical Presentation of Pretibial Myxoedema in Graves' Disease

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A 26-year-old man presented with gradual swelling of both legs for the last 5 years (Figure 1). The skin over the legs are thickened, with irregular nodular swelling. He also complained of significant weight loss in past few months, together with frequent passage of loose

stool, sweating and palpitation. Patient was previously treated by Diethylcarbamazine as a case of Filariasis. His thyroid profile revealed TSH - 0.00 mIU/L, F-T4 - 30.27 pmol/L, F-T3 - 16.51 pmol/L, Anti-Thyroglobulin Ab - 1.66 IU/ml

The patient was diagnosed with Thyrotoxicosis due to Graves disease with Thyroid acropachy with Dermopathy. This atypical nodular dermatopathy is a rare presentation in Graves diseases.



Fig.-1:



Fig.-2:

stool, sweating and palpitation. Patient was previously treated by Diethylcarbamazine as a case of Filariasis.

On examination the patient was anxious with a staring look and mildly anaemic. There was clubbing (Figure: 2) in digits of hands and feet, tachycardia, irregular nodular non tender and firm goitre with no bruit or retrosternal extension, warm and moist palm, fine tremor.

There was bilateral non pitting oedema of the legs (Figure: 3) and overlying skin is thick, irregular, nodular. There is no organomegaly, ascites or lymphadenopathy. There was exophthalmus, but no diplopia, ophthalmoplegia, lid lag or lid retraction.



Fig.-3:

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## ***FROM THE DESK OF EDITOR in CHIEF***

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Dear Fellows,

Seasons Greetings and Happy New Year.

I take the opportunity to thank all my Authors, Reviewers, Editors and Office Bearers for their fabulous support throughout 2016. You have made the last year a very successful year for JBCPS. We have been able to publish numerous wonderful articles that has been well appreciated here and

abroad. Now we look forward to take our beloved journal to a higher level in 2017.

Your all out support is my strength.

Thank you

**Prof. Khan Abul Kalam Azad**

Editor-in-Chief

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