

The “leopard man” sign in sarcoidosis

Evangelos Balis¹, MD, PhD
Emmanouil Panagiotidis², MD,
Kotsifas Konstantinos¹, MD,
Georgios Tatsis¹, MD, PhD,
Chariklia Giannopoulou², MD

¹Pneumology Department,

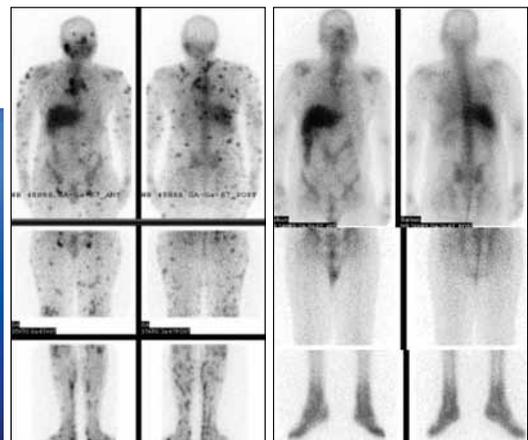
²Nuclear Medicine Department,

“Evangelismos” General Hospital of Athens,
Greece

Key words:

- sarcoidosis
- Ga 67-scintigraphy
- systemic

A 33 year-old Caucasian male with an unremarkable medical history presented with a maculopapular eruption and pink nodular skin lesions distributed all over his body (image A). He was suffering from mild dyspnoea, fatigue, malaise and a low grade fever. High resolution chest computed tomography (CT) demonstrated hilar and mediastinal lymphadenopathy. The serum level of angiotensin converting enzyme (ACE) was elevated (75units/ml). Biopsy from a subcutaneous nodule demonstrated non-caseating granulomatous dermatitis and panniculitis consistent with cutaneous and subcutaneous sarcoidosis. Whole-body gallium-67 (Ga-67) scintigraphy revealed multiple foci of Ga-67 uptake in the skin and muscles, and in the lacrimal and parotid glands in a specific pattern, known as the “leopard-man sign” (image B). Bilateral hilar uptake was also noted. The patient was treated with corticosteroids. After three months the clinical manifestations and cutaneous lesions were in remission and Ga-67 scintigraphy was normal (image C).



Correspondence to:

Evangelos Balis, MD, PhD
Pneumology Department, “Evangelismos” General
Hospital of Athens, Greece
39 Vaktrianis street, 157 72 Athens, Greece
Tel.: 2132041615, Mobile: 6977257375
e-mail: evanbalis@yahoo.co.u