

PSYCHOGENIC EXCORIATIONS: A CASE REPORT

*J. Carvalho*¹, *D. Freitas*¹, *L. Silva*¹, *P. Morgado*^{1,2,3}, *S. Azenha*¹

¹Hospital de Braga, ²Life and Health Sciences Research Institute (ICVS), School of Health Sciences, University of Minho, Braga, ³ICVS/3B's - PT Government Associate Laboratory, Braga/Guimarães, Portugal

Introduction: Psychogenic excoriations are also called neurotic excoriations, dermatillomania or skin picking syndrome. Psychogenic excoriations are lesions caused by scratching, picking, lancing, rubbing or squeezing, usually, in areas that patient can easily reach (face, upper back and upper and lower extremities). They are initiated because an urge to excoriate an irregularity of the skin or by a disturbing sensation in the skin. The classic lesions are characterized by clean, linear erosions, scabs and scars that can be hypopigmented or hyperpigmented and are usually similar in size and shape. Association with psychiatric comorbidities are common, particularly mood and anxiety disorders. It is estimated to occur in 2% of dermatology clinic patients and is associated with functional impairment, medical complications (e.g. infection) or substantial distress. Psychotropic medications (e.g. SSRIs) and appropriate counseling can be effective treatments.

Objectives/aims: The purpose of the poster is to highlight the existence and characteristics of psychogenic excoriations. A condition that can be chronic, causes significant impairment and is believed to be common but unreported.

Methods: Here we report the case of a 27 year-old woman, with a 10 years history of self-inflicted excoriations, associated to high anxiety levels, treated with an SSRI with good response.

Conclusions/results: Although it does not appear as a diagnostic category in DSM- IV, psychogenic excoriations is indeed a treatable condition that, isolated or associated with psychiatric comorbidity can cause marked distress, impairment and psychological suffering.