Careful consideration must be given to the possibility of occult neoplasms in dermatomyositis in middle-aged to elderly patients. The most common cancers found in association with dermatomyositis are ovarian, pancreatic, and lung cancers.

We have presented a case of dermatomyositis associated with cancer of the lung and presenting livedo reticulated ulcers due to livedoid vasculopathy. We wish to stress the importance of screening for occult neoplasms in elderly patients with dermatomyositis, particularly when they have extensive skin manifestations.

References

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Curettage for the Treatment of Molluscum Contagiosum: A Descriptive Study
Tratamiento mediante curetaje de moluscos contagiosos: estudio descriptivo

To the Editor:

Molluscum contagiosum (MC) is a viral skin infection and a frequent reason for consultation. The condition mainly affects children, sexually active individuals, and immunosuppressed patients. In immunocompetent patients, MC is a self-limiting infection and usually resolves spontaneously within 6 months to 4 years, hence treatment is not always necessary.

Multiple therapeutic options are available: a) surgical techniques (physical destruction of the lesions by cryotherapy or curettage), b) topical agents that produce a local inflammatory response by causing irritation (eg, 0.7%-0.9% cantharidin or 5%-20% salicylic acid), and c) topical immune-response modifiers (0.3%-3% imiquimod or cidofovir gel or cream). The choice of treatment depends on the patient (age, number of lesions, lesion sites, complications, history of atopic dermatitis or immunosuppression, fear, occupation, recreational activities, distance to medical center, etc), and on physician expertise (this can improve cure rates with the different therapeutic modalities).

Few studies have investigated more commonly used or suggested treatments such as curettage and cryotherapy. The purpose of this study was to evaluate MC cases treated by curettage in our department and the factors associated with a higher rate of therapeutic failure.

A descriptive study was conducted. Patients who consulted for MC between June 16, 2008 and March 15, 2009 were recruited and underwent treatment of all lesions by curettage in our department and the factors associated with a higher rate of therapeutic failure.

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In our study the factors related to the highest rates of therapeutic failure were the presence of lesions on the trunk, the number of anatomic areas affected, and the number of lesions at the initial visit. In contrast to other series, atopic dermatitis was not found to be associated with recurrence.\textsuperscript{10}

In conclusion, it seems reasonable to consider or associate therapeutic options other than curettage in patients with multiple MC lesions in several areas of the body, particularly when the trunk is involved.

### Table 1

<table>
<thead>
<tr>
<th></th>
<th>Cured</th>
<th>Not Cured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient age</td>
<td>11.34</td>
<td>8.78</td>
</tr>
<tr>
<td>Number of MC lesions</td>
<td>10.07</td>
<td>12.13</td>
</tr>
<tr>
<td>Number of anatomic areas affected</td>
<td>1.38</td>
<td>1.70</td>
</tr>
</tbody>
</table>

### References


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