

Hyperpigmentaion in a 50-Year-Old Male

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Fig 1. Hyperpigmentation of face



Fig 2. Hyperpigmentation of hands



Fig 3. Face after improvement of pigmentation



Fig 4. Hands after improvement of pigmentation

A 50-year-old man with long standing diabetes mellitus presented with oliguria and preceding history of progressive anorexia, weakness and gradually worsening nausea and vomiting for 2 months. His blood pressure was 85/50 mm Hg. Hyperpigmentation of face (Fig 1), oral mucosa and hands (Fig 2) were noticed. Biochemical profile revealed raised creatinine (1.6 mg/dL [reference range 0.4–1.2 mg/dL]) and urea (60 mg/dL [reference range 15–45 mg/dL]), serum sodium 129 mmol/L (reference range 136–148 mmol/L), potassium 5.8 mmol/L (reference range 3.8–5.2 mmol/L) and chloride 95 mmol/L (reference range 95–107 mmol/L). Complete blood count revealed hemoglobin 13.8 gm/dL and white blood cell 10300/cu mm (neutrophils 54%, lymphocytes 33%, monocytes 3%, eosinophils 10%). Following fluid resuscitation and symptomatic treatment urine output improved and blood pressure raised up to 95/70 mm of Hg. Biochemical profile also became normal, except sodium level which was in lower limit of reference range and potassium in higher normal limit. Eosinophilia did not improve. Weakness and postural dizziness also remained same. Standing

systolic blood pressure was 85 mm Hg which was 95 mm Hg in supine position and diastolic blood pressure in standing position dropped to 60 mm Hg which was 70 mm Hg in supine position. Intravenous dexamethasone was started. On the next day, morning blood for cortisol was sent which was 1.5 µg/dL (reference range 4.458–22.689 µg/dL). Short synacthen test was not done. Serum ACTH (adrenocorticotrophic hormone) was >1250 pg/mL (reference range 5.00–46.00 pg/mL). Primary adrenal insufficiency (Addison's disease) was diagnosed. Laboratory investigations to exclude other causes of adrenal insufficiency were unremarkable. Following glucocorticoid and mineralocorticoid replacement, patient improved clinically. Pigmentation of face (Fig 3) and hands (Fig 4) improved 6 months after starting treatment.

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