

Clinical Images of Interest

When the Face Tells a Tale

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A 46-year-old woman presented with weight loss, generalized weakness, and progressive alopecia over two years. Examination revealed pallor, scarring alopecia, and a striking loss of subcutaneous fat over the cheeks, resulting in sunken cheeks with prominent zygomatic arches and masseter muscles. A discoid rash was evident on the face and right arm. Laboratory investigations showed anaemia, thrombocytopenia, an elevated Erythrocyte Sedimentation Rate with normal C-reactive protein, mild renal impairment with proteinuria, and high-titre anti-nuclear antibodies

(1:640, speckled nuclear pattern) with negative anti-dsDNA and ENA profiles. Echocardiography revealed sterile mitral vegetations suggestive of Libman-Sacks endocarditis. The overall features were consistent with systemic lupus erythematosus (SLE) associated autoimmune lipodystrophy.

A and B images show loss of subcutaneous fat in cheeks (blue arrows) and a healing discoid lesion (orange arrow).

Lipodystrophies are a group of very rare disorders characterized by partial or complete loss of adipose tissue, resulting in abnormal fat distribution. It may be congenital or acquired and can affect localized regions or the entire body. The acquired form is typically caused by immune-mediated destruction of adipocytes. This condition is frequently associated with other autoimmune diseases such as systemic lupus erythematosus. Clinically, patients present with symmetrical loss of subcutaneous fat, which may be localized or generalized. Metabolic complications are common and include severe insulin resistance, diabetes mellitus, hypertriglyceridemia, hepatic steatosis, and increased cardiovascular risk. The management focuses on correcting the above metabolic

abnormalities through lifestyle changes, exercise and pharmacological therapies. The specific treatment is metreleptin, a recombinant leptin agonist; however, it is astronomically expensive and not available in Sri Lanka. Cosmetic surgeries and procedures such as autologous adipose tissue transplantation, facial reconstruction with free flaps and silicone or other implants in areas where fat tissue is missing will improve the appearance.

Consent statement

Informed written consent was obtained from the patient for publication of clinical details and images.