



# Mimickers of syphilitic alopecia

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# Syphilitic Alopecia: Case Reports and Trichoscopic Findings

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# Syphilis – Background

- Syphilis has become widespread worldwide in the last decade
- Caused by the spirochete *Treponema Pallidum*
- Primary, secondary, latent and tertiary stages
- Alopecia is uncommon: 3-7% in secondary or latent stages, typically 3-10 weeks after the appearance of the primary chancre <sup>(1)</sup>

(1)Vafaie J, Weinberg JM, Smith B, et al. *Cutis* 2005.

# Syphilitic alopecia – Clinical presentation

- Asymptomatic: “essential syphilitic alopecia” <sup>(1)</sup>
- Symptomatic: associated with other symptoms of secondary syphilis
- Patchy, diffuse or both <sup>(2)</sup>
- Alopecia may affect other hair-bearing areas such as the eyebrows, eyelashes, chest, legs, axilla, or pubis
- Non-inflammatory and non-scarring
- Main differentials: alopecia areata and telogen effluvium

*(1) Cuozzo DW, Benson PM, Sperling LC, et al. JAAD, 1995.*

*(2) Lee JW, Jang WS, Yoo KH, et al. Int J Dermatol, 2012.*

# Syphilitic alopecia – Diagnosis

- Histopathologic features rarely described in the literature
- Most frequent finding is perifollicular lymphocytic infiltrate
- Diagnosis based on either direct detection of treponemes or treponemal DNA or serologic tests
- Non-treponemal tests, such as the RPR and VDRL are good for screening purposes and treatment follow up
- Treponemal tests, such as the FTA-ABS, are used for confirmation of a reactive non-treponemal test. These tests remain positive indefinitely

# Syphilitic alopecia – Treatment

- The primary treatment includes Penicillin G benzathine (dosage depends on the stage of the disease)
- In patients allergic to penicillin, alternative therapy includes doxycycline 100mg bid x 14 days or tetracycline 500mg qid x 14 days or ceftriaxone 1 g daily IM/IV x 8-10 days
- Alopecia usually resolves within 3 months of treatment

# Main differentials

**ALOPECIA  
AREATA**

**TELOGEN  
EFFLUVIUM**

**ANDROGENETIC  
ALOPECIA**

**DISSECTING  
CELLULITIS  
(EARLY STAGE)**

**TRICHOTILLOMANIA**

**TINEA  
CAPITIS**

**SYSTEMIC  
LUPUS**

**LEPROSY**

**EYEBROWS**

**FRONTAL  
FIBROSING  
ALOPECIA**

# Take home message

- Moth-eaten pattern is the most common type of syphilitic alopecia
- Alopecia can be the only sign of syphilitic infection
- Alopecia areata and telogen effluvium are the main differentials: both in clinical and histopathological examination
- Always remember that the incidence of syphilis is increasing again and it can be the great mimicker!