

## Chapter 8

# Health Professional ‘Web Based Conversational Learning’ on Unusual Forms of Lupus

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### **ABSTRACT**

*This article illustrates a web-based conversational learning system termed, “Virtual Grand Rounds in Dermatology” (VGRD), that was developed by two dermatologist colleagues from the United States and Malaysia, respectively, over the past decade. Two blog posts discussing the diagnostic uncertainty around possible dermatological manifestations of lupus are highlighted along with a few conversational comments from other health professionals. The posts, as they appear on VGRD are presented verbatim and illustrate a health professional narrated website that relies heavily on images and pattern recognition. We show that health professional learning may thrive on feedback from colleagues, even if minimal.*

### **INTRODUCTION**

Every day we see unique patients -- mostly, we don't learn much from them, because they get better or go elsewhere. For the past decade, we have been trying to develop a web based conversational learning system termed, “Virtual Grand Rounds in Dermatology” (VGRD), What we've noticed is that most dermatologists are reluctant to comment. There are a number of reasons: shyness,

worry about being wrong, defensive of private time. Non-North American health professionals seem more willing to contribute. It may even be that U.S. health professionals are more unwilling to do anything they do not get paid for!!

The concept of VGRD is a powerful one -- we need to work on identifying cases where an opinion is really needed and then identify people willing to make constructive comments. The VGRD concept can be expanded such that patients can present their own cases if they live in underserved areas or if they are not getting the

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kind of care they require. Additionally, patients may be able to comment on what has helped them with their disorders.

In the current article we present two patients where the diagnostic uncertainty seemed to hover around the diagnosis of Lupus.

### **CASE 1 (REF TO VGRD SITE)**

Posted by author DJE

*Evolving Lupus Variant?*

*Your thoughts are most welcome with regards to this patient. I don't have a firm diagnosis yet, but suspect this will turn out to be a form of lupus -- possibly subacute or acute LE.*

HPI: A 47 year old woman was seen on June 11th, 2007 with a one month history of two 8 cm. plaques on her legs, KOH negative. Did not look like panniculitis. Initially thought to be Lyme disease, the lesions did not respond to doxycycline.

Because of progression of lesions and question of hypersensitivity disorder per biopsy the patient was treated with prednisone and the eruption subsided over a few weeks.

On 10 mg of pred a day, around 5 weeks after starting prednisone, the patient experienced a marked flare. This was during a long weekend at the beach. She said the weather was overcast and she wasn't out that much. Initial lesions recurred and there were some new papules and plaques on arms and legs. She has marked facial erythema and erythema of neck and upper chest. Other than pruritus, she feels well. No new meds.

Late August to Sept. 2007. Patient's eruption flared on legs and arms. On September 4, for the first time a definite butterfly rash on malar eminences. She feels well other than pruritus and has no arthralgias or constitutional symptoms. Sept. 5th, butterfly rash gone.

O/E: Erythematous plaques on legs. Facial erythema. Flushing of neck. Scattered papules and plaques legs and to a lesser extent arms. See photographs in Figures 1 and 2.

Lab: 7/4/07 CBC and chemistries normal. ESR 24

*Figure 1. Erythematous plaques on case 1*



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