



## **Introduction:**

Welcome to CUGH's bi-weekly clinical case-series, "Reasoning without Resources," by Prof. Gerald Paccione of the Albert Einstein College of Medicine. These teaching cases are based on Prof. Paccione's decades of teaching experience on the medical wards of Kisoro District Hospital in Uganda. They are designed for those practicing in low resource settings, Medicine and Family Medicine residents, and senior medical students interested in clinical global health. Each case is presented in two parts. First comes a case vignette (presenting symptoms, history, basic lab and physical exam findings) along with 6-10 discussion questions that direct clinical reasoning and/or highlight diagnostic issues. Two weeks later CUGH will post detailed instructors notes for the case along with a new case vignette. For a more detailed overview to this case-series and the teaching philosophy behind it, see [Introduction to "Reasoning without Resources"](#). Comments or question may be sent to Prof. Paccione at: [gpaccion@montefiore.org](mailto:gpaccion@montefiore.org)

**Note:** If you would like to be notified when a new case is posted (along with instructor notes for the previous one), send your e-mail to Katherine Unger at [kunger@CUGH.org](mailto:kunger@CUGH.org).

## **About the Author:**

Dr. Gerald Paccione is a Professor of Clinical Medicine at the Albert Einstein College of Medicine in the Bronx, New York. His career has centered on medical education for the past 35 years – as a residency Program Director in Primary Care and Social Internal Medicine at Montefiore Hospital, and director of the Global Health Education Alliance at the school. He has served on the Boards of Directors of Doctors for Global Health, Doctors of the World USA, and the Global Health Education Consortium. Dr. Paccione spends about 3 months a year in Uganda working on the Medicine wards of Kisoro District Hospital where he draws examples for the case studies.

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## **CASE 43 – The Ulcer that Won't Go Away**

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A 15 year old boy presents with a gradually increasing non-healing ulcer of his skin. He was well until 3 months ago when he fell off his bike into a muddy puddle of water, scraping his right knee and lower leg. The scrape healed, but about 2 weeks later a small lump appeared over the inner part of his lower right leg just above the ankle. The lump was not tender; he had no fever and was able to work, bike, and play normally. Over the next 1-2 weeks the lump increased in size to about 2 cm, with surrounding swelling and overlying shiny skin with some scaling.

About 2 months ago, the skin opened and liquid oozed out. His mother wrapped the wound with a bandage and he went to work in the fields. The wound gradually increased in size, and continued to drain fluid. He went to the health center where the wound was washed and cleaned, covered with a purple liquid (gentian violet), and dressed with clean bandages. Over the next 1-2 weeks it didn't go away but didn't hurt either, and he was able to continue his activities. When it continued to increase in size, he went back to the health center where the wound was again cleaned, new bandages applied, and antibiotics (?name) were prescribed to take for 2 weeks.

When the antibiotics didn't help, he came to the hospital accompanied by his father.

He hasn't had fever, weight loss, decreased appetite, or anything like this before.

**Physical Exam:** Looks well, normally thin, in no distress.

V.S: BP 100/70, HR 82, T: 98.5, R: 14

Mouth: no thrush

Neck: no lymphadenopathy

Lungs: clear; Heart: normal S1, S2;

Abdomen: no hepatosplenomegaly or masses;

Extremities: right lower leg, above medial malleolus, 12 cm oval ulcer, ½ to 1 cm deep, with white-yellow base and sharply delineated thickened margins with undermined edges (in places), with surrounding induration, hyperpigmentation; non-tender.

Otherwise, extremities and skin normal.

**1. What's the "frame" of this case (the *key* clinical features the final diagnosis must be consistent with), and the clinical significance of each item in your frame?**

**2. What is the differential diagnosis of the leg ulcer in this boy, the pros and cons of each disease mentioned vis-à-vis this case, and the most likely diagnosis?**

**3. What complications can be seen with this disease?**

**4. How should this patient be treated?**