Atrophoderma of Pasini and Pierini (APP) is a disease that causes thinning in a layer of skin called the dermis. Usually presenting with single or multiple oval or circular hyper-pigmented depressions with a well-defined border and a characteristic ‘cliff drop’ border. Normally it spreads slowly in a bilateral symmetrical distribution and can involve any area of the skin, but primarily affects the back and lumbosacral region. This disorder affects females more than males and usually begins during adolescence or early adulthood. There have been a few reported cases of APP at birth. It’s important to understand that this is a benign disorder and will eventually stop progressing.

The cause of Atrophoderma of Pasini and Pierini is unknown. In some cases it’s thought to be due to a bacterial infection because of an association with a positive Borrellia burgdorferi antibody titer. There has also been debate on its association with morphea, either being a variant or a separate entity all together.

These patients typically present with pigmented depressions, usually violet or brownish in color, that has been progressing for many years. However, because of its benign nature and lack of symptoms it often goes undiagnosed. There is no irritation, itchiness, or discomfort involved with this condition.

The diagnosis is typically made by clinical findings; however, biopsy is commonly used to help differentiate other possibilities.

Definitive treatment currently is not established, however there has been some positive results reported with hydroxychloroquine, retinoids, and topical steroids. In cases with positive B. burgdorferi antibody titer, treatment with antibiotics may help improve atrophy. Sun precautions are warranted as it can lead to darkening of lesions. Unfortunately current data has not pinpointed one particular effective treatment.