

General Approach to Nasal Dermatitis

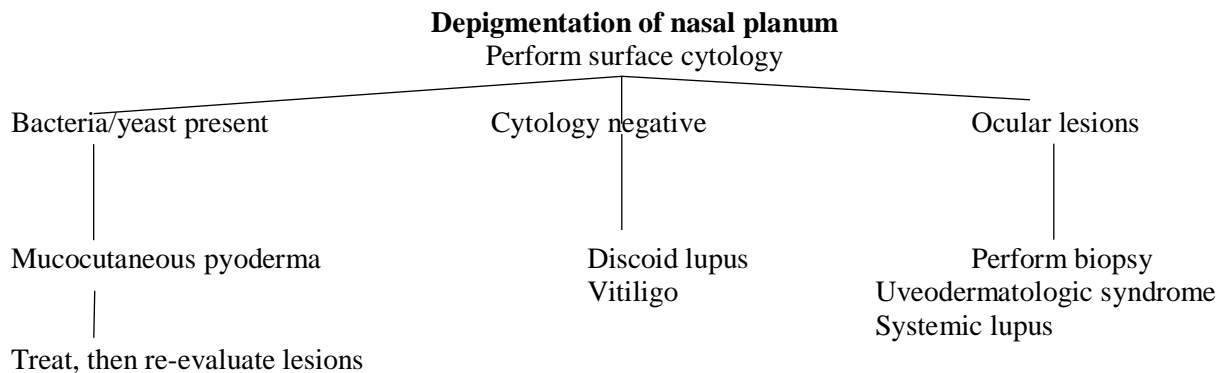
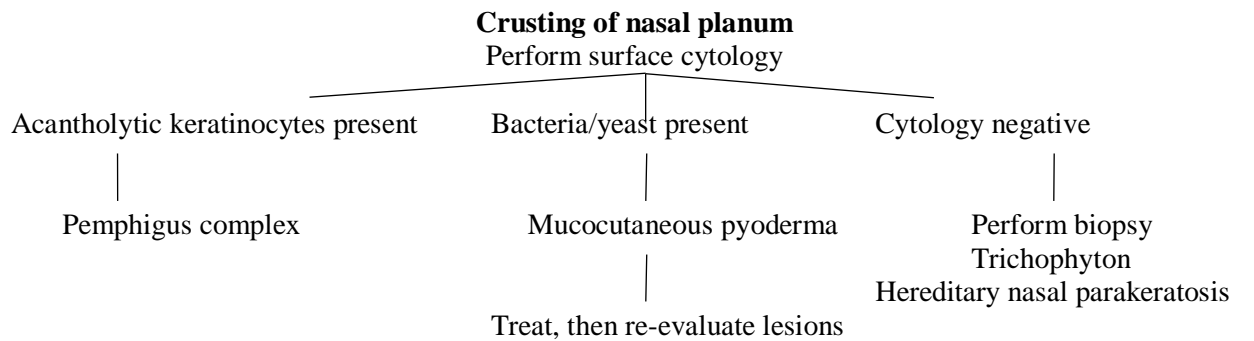
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The first step in evaluating nasal dermatitis is to perform a tape preparation and/or impression smear of the lesion. Treat bacteria or yeast if it is present. Topical therapy is typically more effective than systemic therapy when treating infections on the surface of the nose. Re-evaluate the nose after treating the infection to see if lesions remain. Biopsies are important to do if the nose appears swollen, if ocular lesions are present or if systemic signs are present. The best histopath results will typically be obtained if the biopsy is obtained from crusted, erythematous, infiltrated, haired skin adjacent to the nasal planum. Keep in mind that infection can skew histopath results.



Swelling or infiltrative lesions of nasal planum

Perform biopsy
Epitheliotropic cutaneous lymphoma
Cryptococcosis
Squamous cell carcinoma

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Differentials such as trauma, mosquito bite dermatitis and nasal hyperkeratosis can often be diagnosed or ruled out based on history and physical exam. Consider nasal arteritis if the philtrum is affected.