

Preface

Although dermatomyositis is a rare disorder, it is of interest to different medical specialists such as rheumatologists, pediatricians, dermatologists, neurologists, and general practitioners, because of the diversity of clinical syndromes, the difficulties in diagnosis and therapeutic management, and the severe prognosis. The interdisciplinary disposition also complicates the diagnostic approach.

Sometimes the patient endures the long journey from one physician to another, and exact diagnosis takes a long period of time. The patient's saga becomes even more complicated following the definition of amyopathic dermatomyositis and drug-induced skin eruption resembling dermatomyositis. The author is one of the first clinicians who coined the possibility of the existence of "drug-induced dermatomyositis". It is true that dermatomyositis is difficult to diagnose if the physician does not expect it, or misdiagnoses it for another disease of connective tissue, for example lupus erythematosus, or even disregards its existence.

In my long practice, I have met many dermatomyositis patients, with unusual cases of disease, with different clinical manifestations and with variation in the diagnostic process. For example, a 46-year-old woman with breast cancer was removed from the operating table because the surgeon recognized a skin rash of face and extremities as "allergy" against anesthesia. In fact, the lady had paraneoplastic dermatomyositis.

This advanced monograph gives a description of the clinical symptoms of dermatomyositis and a methodology for diagnosis preparation, as well as new diagnostic immunological and photobiological methods and treatment modalities. The authors have personal experience with diagnoses, treatment, and management control of many dermatomyositis patients.

I hope that this book will be interesting and useful for many colleagues.

Sofia

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Dermatomyositis

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