Clinical Medicine

Image Diagnosis: A Curious Case of Causeless Clubbing

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A 22-year-old woman was referred for evaluation of protuberance of terminal parts of all her fingers (Figure 1), which had been apparent since childhood. She had no other symptoms like breathlessness, cyanosis, loose stools, bleeding per rectum, abdominal distension, or jaundice. None of her family members had any similar findings. Her evaluation with routine hemogram and liver and kidney function tests, chest roentgenogram, electrocardiogram, echocardiography, and abdominal ultrasonography was normal. A diagnosis of idiopathic clubbing was made.

Clubbing is the bulbous enlargement of terminal area of digits of hands and feet. The causes may include pulmonary disorders (bronchogenic carcinoma, mesothelioma, bronchiectasis, lung abscess), cardiovascular disease (cyanotic congenital heart disease, infective endocarditis, cardiac tumors, pulmonary arteriovenous fistula), or gastroenterologic disorders (cirrhosis, inflammatory bowel disease), among others. On occasion, clubbing may be associated with a genetically inherited rare disorder called pachydermoperiostosis, which is associated with thickening of skin and periostitis. Our patient had none of these features and was diagnosed to have idiopathic clubbing.

References

Figure 1. Idiopathic clubbing.