
VisualDX

臨床診斷決策工具

- 精準辨識，圖解真相

飛資得醫學資訊



資源介紹



visualDX®

VisualDx 鑑別診斷工具

VisualDx 是一款基於網頁的臨床決策支援系統，經證實可提升診斷準確性、輔助治療決策，並增強患者安全性。

使用 VisualDx 可以：

- 獲取專科級醫學專業知識
- 識別疾病變異
- 辨識藥物不良反應
- 強化患者教育
- 促進資訊透明、快速且準確臨床決策

- VisualDx 提供簡單明瞭且經同行審查的內容，專為臨床現場設計。
- 所有醫學內容均由專科專家撰寫，並經醫學圖書館員與編輯審核，以確保資訊的準確性與時效性。
- 擁有超過 5,000 種疾病與 42,000 張醫學影像，打造最全面的疾病、症狀與醫學影像資料庫，展現疾病變異，提供具挑戰性案例的解決方案。

開啟VisualDx 首頁

VISUALDX

- > Start Over
- Visit VisualDx.com
- Diagnosis List

ABOUT VISUALDX

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HELP

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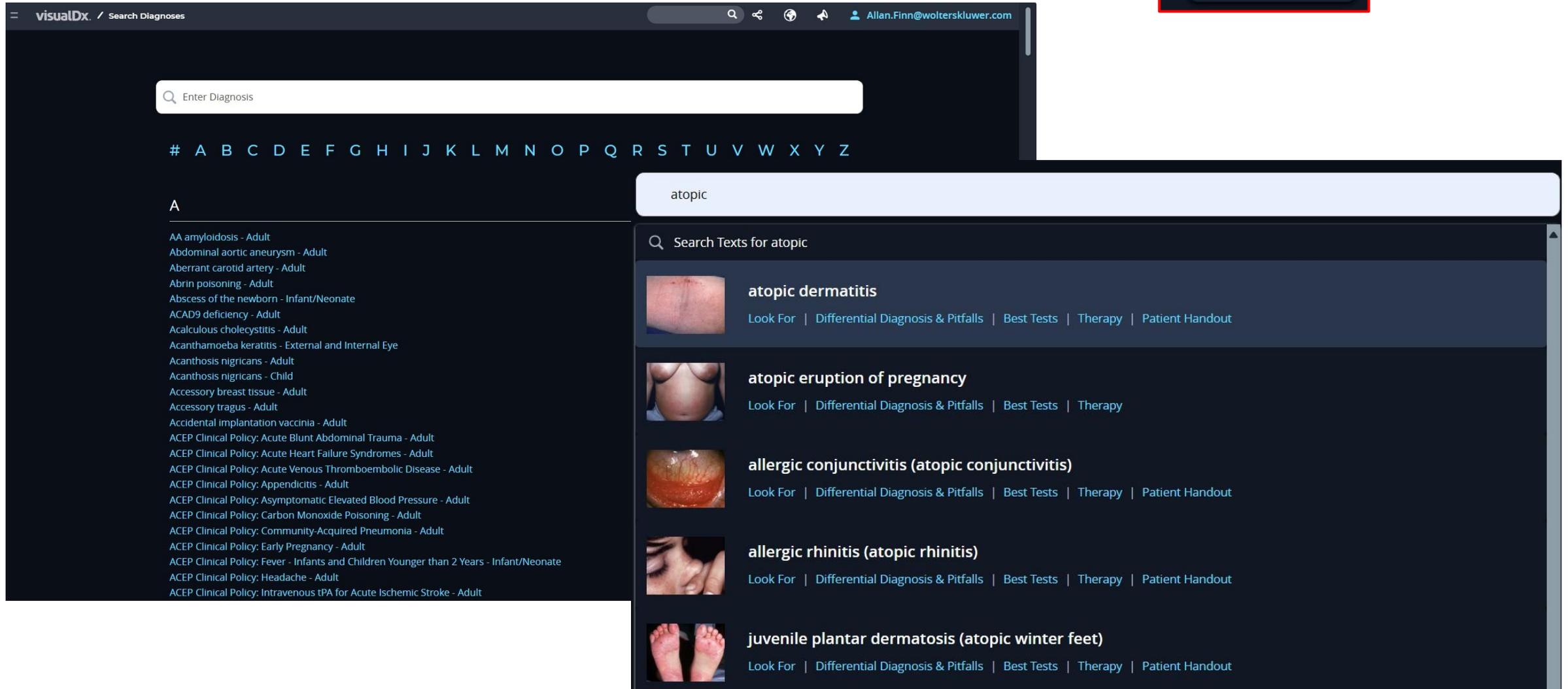
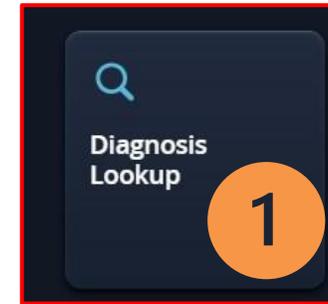
Version: release-26.1850.1733927338 (build 96c22e8c5)

The screenshot shows the VisualDx homepage with a dark theme. At the top, there is a navigation bar with the VisualDx logo and user icons. The main content area is divided into two primary sections: 'Clinical Tools' and 'My VisualDx'. The 'Clinical Tools' section contains two cards: 'Diagnosis Lookup' (marked with a large orange '1') and 'Build a Differential' (marked with a large orange '2'). The 'My VisualDx' section contains two cards: 'Recent Activity' and 'Saved Items'. Below these sections is a featured case study titled 'What's the Diagnosis?' which includes a skin lesion image and a description of a 35-year-old pregnant woman's symptoms. A 'Read more' link is provided for the case study. A red arrow points to the top-left corner of the main content area. The VisualDx logo is also present in the bottom right corner of the page.



1. 診斷查詢 Diagnosis Lookup

在現有的診斷資料庫中查找特定疾病資訊。

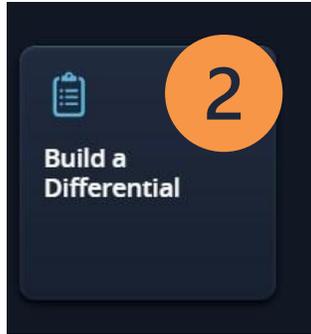


The screenshot shows the visualDx website interface. At the top, there is a search bar with the text "Enter Diagnosis". Below the search bar, there is a navigation bar with letters A through Z. The search results are displayed in a list format, with each result including a small image, the condition name, and a set of links: "Look For", "Differential Diagnosis & Pitfalls", "Best Tests", "Therapy", and "Patient Handout".

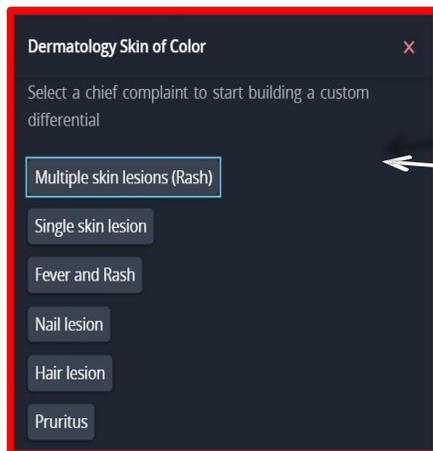
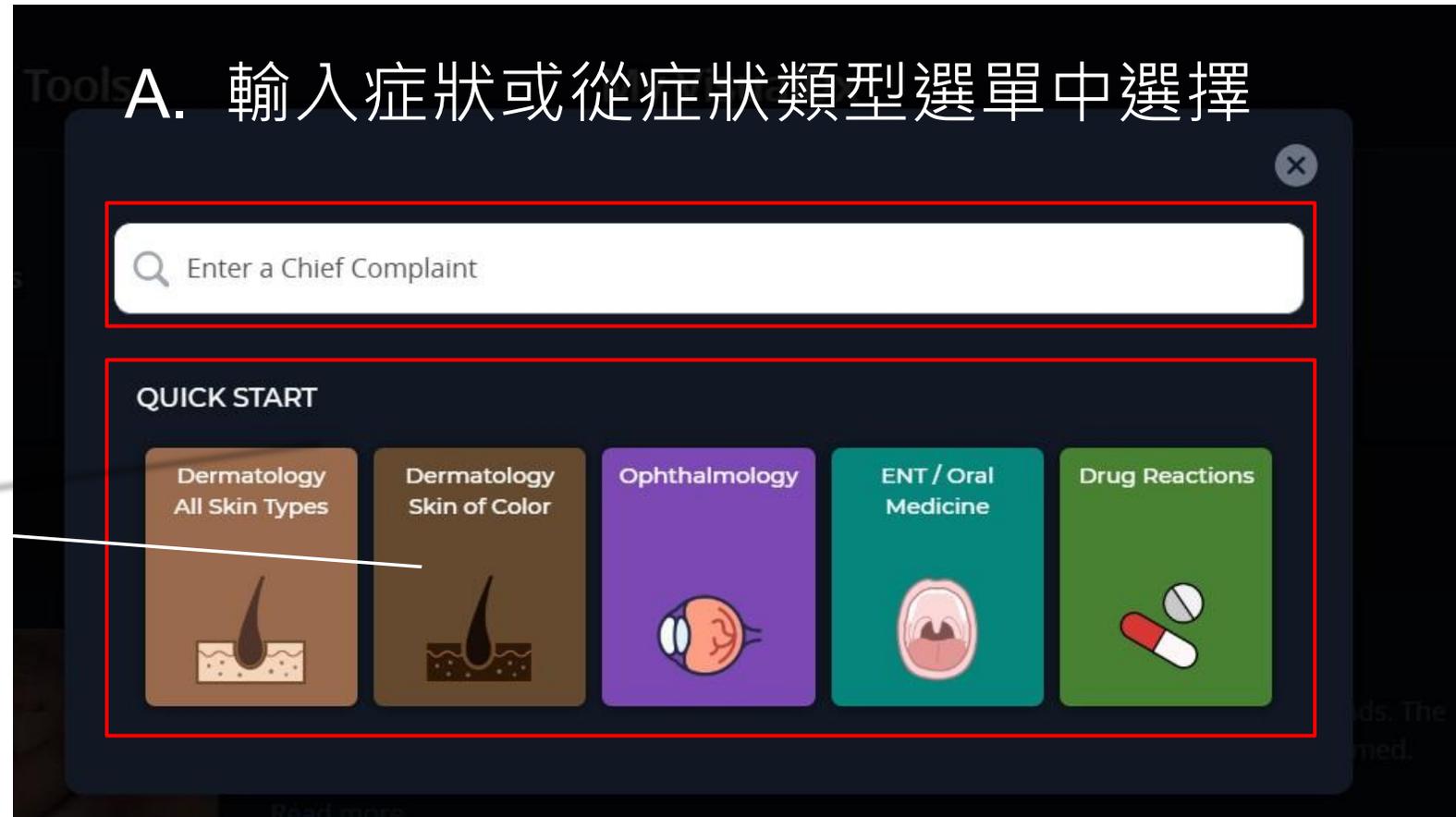
Condition	Links
atopic dermatitis	Look For Differential Diagnosis & Pitfalls Best Tests Therapy Patient Handout
atopic eruption of pregnancy	Look For Differential Diagnosis & Pitfalls Best Tests Therapy
allergic conjunctivitis (atopic conjunctivitis)	Look For Differential Diagnosis & Pitfalls Best Tests Therapy Patient Handout
allergic rhinitis (atopic rhinitis)	Look For Differential Diagnosis & Pitfalls Best Tests Therapy Patient Handout
juvenile plantar dermatosis (atopic winter feet)	Look For Differential Diagnosis & Pitfalls Best Tests Therapy Patient Handout

2. 建立鑑別診斷 Build Differential

以逐步的方式，輸入症狀、病史或臨床特徵，系統將提供鑑別診斷結果。



A. 輸入症狀或從症狀類型選單中選擇



B. 患者症狀篩選畫面

Workup for Fever

View this Differential

Enter additional findings and/or use the workup questions below

- Appearance of patient
- Onset of findings
- Symptoms
- Relevant medical history
- Risk factors
- Physical exam
- Skin findings
- Laboratory
- Negative findings
- Travel history
- Additional Findings

General ▾

HEENT ▾

- Cardiovascular ▾
- Respiratory ▾
- Digestive/abdominal ▾
- Genitourinary ▾
- Musculoskeletal ▾
- Neurologic ▾

- Dysphagia ⓘ
- Hearing loss
- Hoarseness ⓘ
- Mouth pain
- Nasal congestion
- No sore throat
- Ocular pain
- Otagia ⓘ
- Rhinorrhea ⓘ
- Sore throat
- Tinnitus ⓘ

PATIENT AGE

50-59 year old ▾

ASSIGNED SEX AT BIRTH ?

Female ▾

FINDINGS

- Fever ×
- Patient appears ill ×
- Developed acutely ×

Toggle the to make the finding required ?

實例：依序輸入患者的主訴，以及患者的病史與臨床徵狀

1. 患者主訴

- 1) Fever 發燒
- 2) Short of Breath 呼吸急促
- 3) Fast Heart Rate 心跳加快
- 4) Chest Pain 胸痛
- 5) 我們可以詢問那些問題？

2. 臨床所見

- 1) 病史：患者正在戒菸
- 2) 臨床徵狀：患者因手臂和腿部疼痛而必須坐下

The screenshot shows a medical workup interface titled "Workup for Fever". The interface is dark-themed and includes a sidebar on the left with categories like "Appearance of patient", "Onset of findings", "Symptoms", "Relevant medical history", "Risk factors", "Physical exam", "Skin findings", "Laboratory", "Negative findings", "Travel history", and "Additional Findings". The main area is divided into sections: "General", "HEENT", "Cardiovascular", "Respiratory", "Digestive/abdominal", "Genitourinary", "Musculoskeletal", and "Neurologic". A green circle with the number "1" is overlaid on the "Digestive/abdominal" section, which contains a list of symptoms: "Abdominal pain", "Constipation", "Diarrhea", "Nausea", and "Vomiting". On the right side, there are fields for "PATIENT AGE" (50-59 year old) and "ASSIGNED SEX AT BIRTH" (Female). Below these are "FINDINGS" which include "Fever", "Patient appears ill", "Developed acutely", "Dyspnea", "Heart palpitations", and "Chest pain". A green circle with the number "2" is overlaid on the "Additional Findings" input field at the top right. A "View this Differential" button is located in the top right corner. At the bottom right, there is a toggle for "Toggle the [dot] to make the finding required".

1. 患者主訴：依照患者主訴和身體狀態顯示可能的鑑別診斷結果

Search Results

Fever, Patient appears ill, Developed acutely, Dyspnea, Heart palpitations, Chest pain, 50-59 year old Female

23 CONSIDER 1st37 UNCOMMON23 EMERGENCIES32 INFECTIOUS27 DRUG INDUCED60 VIEW ALL

All Skin Types Skin of ColorEdit FindingsDEFAULT VIEW

Hypertensive emergency ▲

Renal

↑ Markedly elevated BP

5

Pulmonary embolism ▲

RR ↑

☑ Prolonged immobility ☑ Oral contraceptives

19

Multisystem inflammatory syndro...

↓ Fever > 24 hrs

☑ Extrapulmonary organ dysfunction
☑ Increased inflammatory markers ☑ COVID-19

1

COVID-19

Severe Disease

☑ Fever may be absent

Bilateral patchy shadows, Ground glass opacities

48

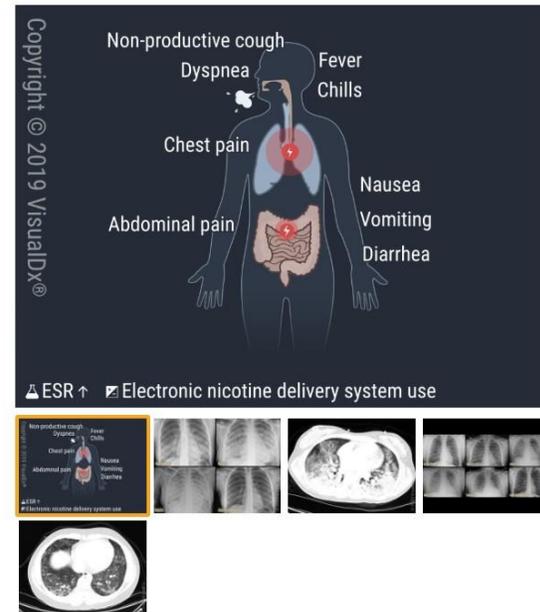
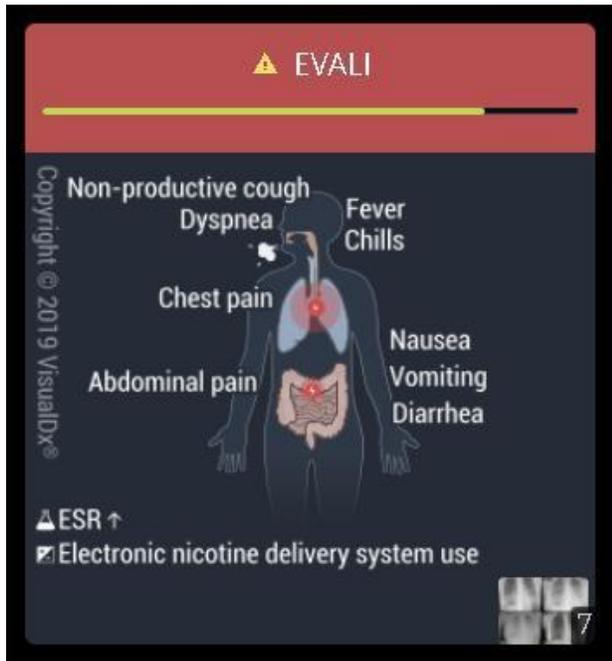
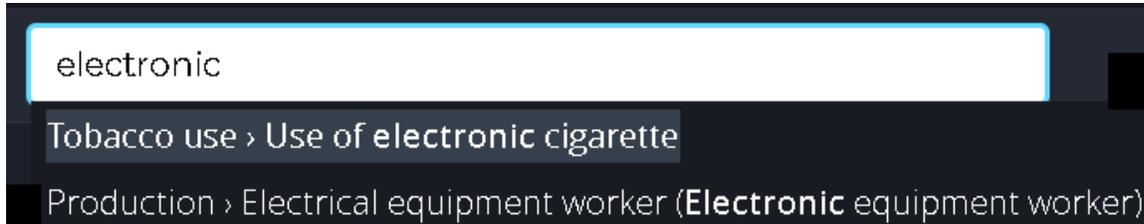
Legionellosis ▲

↓ Fever

14

2. 臨床所見 (Additional Finding)

在更多條件中輸入電子菸



EVALI [↗](#)

▲ POTENTIALLY LIFE-THREATENING EMERGENCY

E-cigarette or vaping product use-associated lung injury (EVALI) is the name given by the Centers for Disease Control and Prevention to the vaping-related condition that has sickened people nationwide. The condition is characterized by a wide range of clinical symptoms that mimic many acute pulmonary diseases, with 95% of patients reporting more of the following: cough, shortness of breath, chest pain, dyspnea, or tachypnea. Gastrointestinal symptoms are reported in 77% of patients, including abdominal pain, nausea, or vomiting, and up to 85% of patients report symptoms of fatigue, fevers, chills, weight loss, or malaise. Many reported THC use in e-cigarette devices. More symptoms of vaping products and devices were reported. [More](#)

[See Full Article](#)

Other Resources:

[UpToDate](#) [PubMed](#)

Matches 6 of 7 findings: [Edit findings](#)

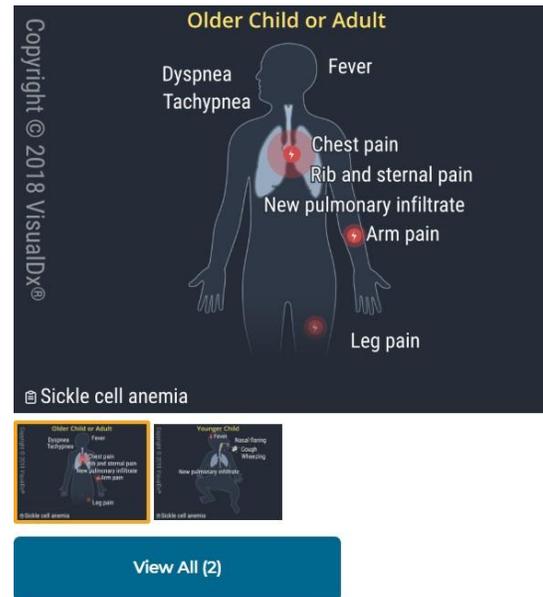
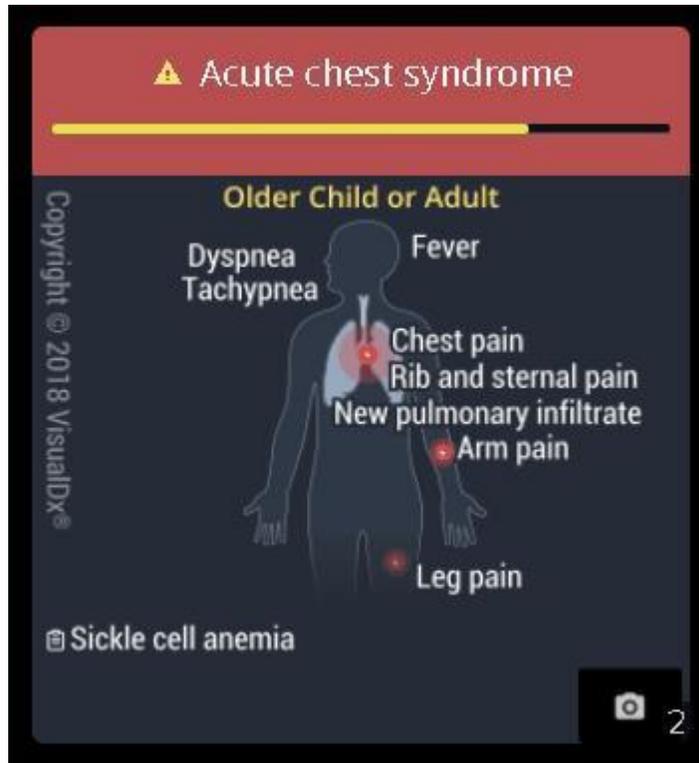
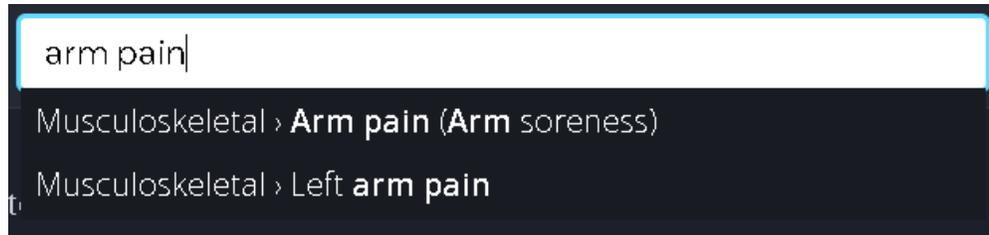
Fever Patient appears ill Developed acutely (days to weeks) Dyspnea Heart-palpitations

Matches 5 of 7 findings

Fever
Patient appears ill
Developed acutely (days to weeks)
Dyspnea
Heart-palpitations
Chest pain
Use of electronic cigarette

2. 臨床所見 (Additional Finding)

在更多條件中輸入手臂和腿部疼痛



Acute chest syndrome [↗](#)

▲ POTENTIALLY LIFE-THREATENING EMERGENCY

A potentially life-threatening complication of sickle cell disease characterized by lung infiltrates, fever, and respiratory symptoms. Management in children and adults is similar, although the disease is often more severe in adults and associated with bone marrow and fat emboli. It can be triggered by an underlying infection or vaso-occlusive crisis, although in the majority of cases, an identifiable trigger is not determined. Sickle cell disease is the primary risk factor. Within this population, additional risk factors include young age, low fetal hemoglobin, leukocytosis, certain genotypes, asthma, tobacco exposure, recent surgery, or 3 or more severe vaso-occlusive crises in the past year. Management requires hospitalization. [More](#)

[See Full Article](#)

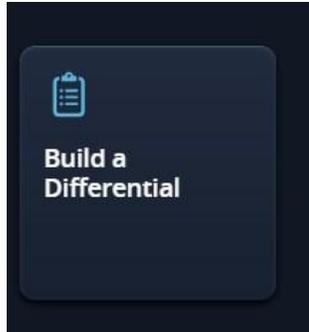
Other Resources:

[UpToDate](#) [PubMed](#)

Matches 6 of 7 findings: [Edit findings](#)

- Fever ✓
- Patient appears ill ✓
- Developed acutely (days to weeks) ✓
- Dyspnea ✓
- Heart palpitations
- Chest pain ✓
- Arm pain ✓

VisualDX使用步驟1：輸入症狀或診斷，系統會依此提供適合的條件供篩選



hyperpig

Search Texts for "hyperpig"

Build a differential diagnosis

- hyperpigmented patch
- hyperpigmented macule
- gingival-alveolar hyperpigmentation

Diagnoses

- post-inflammatory hyperpigmentation

1

Workup for Hyperpigmented patch View this Differential

Enter additional findings and/or use the workup questions below

Additional Findings

- Skin lesion type
- Number of skin lesions
- Distribution of skin findings
- Location of skin finding
- Symptoms/signs
- Onset of findings
- Appearance of patient
- Medical history
- Negative findings
- Additional Findings

- Scalp
 - Scalp
 - Frontal scalp
 - Occipital scalp
 - Parietal scalp
 - Post auricular scalp
 - Temporal scalp
 - Vertex scalp
- Face
- Neck
- Arm
- Hands
- Trunk
- Anogenital
- Leg - skin of
- Foot or toes

PATIENT AGE

30-39 year old

ASSIGNED SEX AT BIRTH ?

Female

FINDINGS

- Hyperpigmented patch
- Occipital scalp

Toggle the to make the finding **required** ?

VisualDX使用步驟2：依左邊選單項目依序進行徵狀篩選

The screenshot displays the VisualDX Patient Findings interface. At the top left, a yellow circle with the number '2' indicates the current step. A red box highlights the title 'Workup for Hyperpigmented patch'. Below this, a search bar for 'Additional Findings' is present. The main area is divided into a left sidebar with a menu, a central grid of body diagrams, and a right sidebar with patient information and findings.

Left Sidebar Menu:

- Skin lesion type
- Number of skin lesions
- Distribution of skin findings
- Symptoms/signs
- Onset of findings
- Appearance of patient
- Medical history
- Negative findings
- Additional Findings

Central Grid (Distribution selected):

- Scattered Few
- Scattered Many
- Widespread** (checked)
- Intertriginous
- Symmetric Extremities
- Photodistributed
- Acral
- Lymphangitic
- Dermatomal
- Choose Body Locations

Right Sidebar:

- PATIENT AGE:** 30-39 year old
- ASSIGNED SEX AT BIRTH:** Female
- FINDINGS:**
 - Hyperpigmented patch
 - Widespread
- Toggle the to make the finding **required**



VisualDX使用步驟2：可就膚色進行篩選

visualDx / Patient Findings

Workup for Hyperpigmented patch [View this Differential](#)

Enter additional findings and/or use the workup questions below

SKIN LESION TYPE

Number of skin lesions

Distribution of skin findings

Symptoms/signs

Onset of findings

Appearance of patient

Medical history

Negative findings

Additional Findings

PATIENT AGE
30-39 year old

ASSIGNED SEX AT BIRTH
Female

FINDINGS
● Hyperpigmented patch
● Widespread

Light Skin Dark Skin

Smooth Papule / Plaque
Scaly Papule / Plaque
Eschar

Erythema / Erythroderma
Purpura / Petechiae
Flat / Macula

Vesicular / Pustular
Erosion / Ulcer / Atrophy
Gangrene

Refine Lesion type

Erythema / Erythroderma

Blanching Macule
Blanching Patch
Erythroderma
Telangiectasia

VisualDX使用步驟2：可以排除臨床上沒有發現的徵狀

The screenshot shows the VisualDX Patient Findings interface for a "Workup for Hyperpigmented patch". The interface is dark-themed and includes a top navigation bar with the VisualDX logo, "Patient Findings", and utility icons (search, share, globe, speaker). On the right of the top bar are links for "Return to Ovid" and "Sign Out of Ovid".

The main content area is titled "Workup for Hyperpigmented patch" and includes a "View this Differential" button. Below the title is a text input field for "Additional Findings".

The interface is divided into several sections:

- Left sidebar:** A vertical list of categories for filtering findings: "Skin lesion type", "Number of skin lesions", "Distribution of skin findings", "Symptoms/signs", "Onset of findings", "Appearance of patient", "Medical history", "Negative findings", and "Additional Findings".
- Center:** A list of checkboxes for "Negative findings" to be excluded:
 - No neurologic findings
 - No HEENT findings
 - No respiratory findings
 - No cardiovascular findings
 - No gastrointestinal findings
 - No musculoskeletal findings
 - No dysmorphic/malformation features
 - No medication use (prescription or OTC)
- Right sidebar:** Fields for patient information and a list of findings:
 - PATIENT AGE:** 30-39 year old (dropdown)
 - ASSIGNED SEX AT BIRTH:** Female (dropdown)
 - FINDINGS:** A list of findings with radio buttons and close buttons (X):
 - Hyperpigmented patch
 - Widespread distribution
 - Smooth papule/plaque
 - Rash or multiple lesions
 - Pruritus
 - Fever
 - Developed chronically (months to years)
 - Toggle the to make the finding **required** (help icon)

VisualDX使用步驟3：顯示可能結果，可選擇圖示顯示方式

The screenshot displays the VisualDX Search Results interface. At the top, the navigation bar includes 'visualDx', 'Patient Findings', and 'Search Results'. A yellow circle with the number '3' highlights the search results section. The search criteria are: 'Hyperpigmented patch, Widespread distribution, Rash or multiple lesions, Pruritus, Fever, Developed chronically, 30-39 year old Female'. Below this, there are filter tabs: 'CONSIDER 1st' (17), 'CONSIDER 2nd' (43), 'EMERGENCIES' (2), 'INFECTIOUS' (3), 'DRUG INDUCED' (21), and 'VIEW ALL' (60). A button labeled 'Edit Findings' is also present.

The main content area shows a grid of skin condition images. The first row includes: Urticaria pigmentosa (8 images), Cutaneous Rosal-Dorfman disease (14 images), Cutaneous T-cell lymphoma (215 images), Arsenic poisoning (11 images), Ashy dermatosis (32 images), and Epidermolysis (41 images). The second row includes: Alopecia mucinosa (48 images), Lichen planus pigmentosus (23 images), Tinea nigra (15 images), Addison disease, Nephrogenic systemic fibrosis, and Hemochromatosis.

A settings menu is open on the right side, enclosed in a red box. It contains the following options: 'PHOTOS' (selected with a checkmark), 'DEFAULT VIEW', 'PHOTOS' (with a checkmark), 'SYMPTICONS', 'LIST', and 'IMAGE SIZE: MEDIUM'. A hand cursor is pointing at the 'PHOTOS' option.

At the bottom, a zoomed-in view of three images is shown, also enclosed in a red box. These are: Atopic dermatitis (5/5 images), Drug-induced pigmentation (5/5 images), and Lichen planus (5/5 images).

VisualDX使用步驟4：瀏覽結果，若有年齡差異，會顯示不同年齡層結果

The screenshot displays the VisualDX interface for a search on 'Atopic dermatitis'. The main content area shows the search results for 'Atopic dermatitis in Adult', with a large '4' in a black circle indicating the number of results. Below the title, it says 'See also in: Cellulitis DDX, External and Internal Eye'. There are buttons for 'Print', 'Patient Handout', 'Save Diagnosis', and 'Images (115)'. A dropdown menu is open, showing options for 'Infant/Neonate', 'Child', and 'Adult'. The 'Child' option is highlighted. The left sidebar contains navigation links for 'Contents', 'Information for Patients', and 'Other Resources'. The right sidebar shows a grid of images related to atopic dermatitis, with a legend for 'All Skin Types' and 'Older Children and Adolescents'.

visualDX / Atopic dermatitis

Atopic dermatitis in Adult **4**

See also in: Cellulitis DDX, External and Internal Eye

Print Patient Handout Save Diagnosis Images (115)

Contributors: Azeen Sadeghian MD, Ryan Fan BA, Jeffrey M. Cohen MD, Susan Burgin MD

Synopsis

Atopic dermatitis (eczema) is a chronic, relapsing, pruritic condition that is often associated with allergic rhinitis and/or asthma. Infants and children are most often affected, with 85% of cases appearing in the first year of life and 95% of cases appearing by 5 years. Uncommonly, the condition may persist into, or even arise in, adulthood. Less than 1% of adults are affected by atopic dermatitis. With increased understanding of immunosenescence, atopic dermatitis is increasingly being recognized in the older adult population.

In infants, the disease involves primarily the face, scalp, torso, and extensor aspects of extremities. In children and adults, the disease usually involves chiefly the flexural aspects of extremities, but it may be more generalized. In adults, flexural skin may be clear and disease may be focal or widespread. Follicular patterns of atopic dermatitis (ie, follicular eczema) are more common in persons with darker skin colors.

Atopic dermatitis may be categorized as follows:

- Acute – erythema, vesicles, bullae, weeping, crusting
- Subacute – scaly plaques, papules, round erosions, crusts
- Chronic eczema – lichenification, scaling, hyper- and hypopigmentation

The cause of atopic dermatitis is unknown. Genetic and environmental predisposing factors exist. Multiple loci have been associated with atopic dermatitis. A family history of atopic dermatitis is common.

All Skin Types

Atopic dermatitis in Infant/Neonate

See also in: Cellulitis DDX, External and Internal Eye

Print Patient Handout Save Diagnosis Images (115)

Child Adult

Older Children and Adolescents

Hyperkeratosis of neck
Hyperpigmentation of neck

Erythema
Pruritus
Hyperlinear palms

Lichenified plaques
Dry skin

Flexural distribution Antecubital fossa
Popliteal fossa Face Neck Extremities
Atopy Extensor distribution Face Scalp Arms
Legs Atopy Seborrheic dermatitis

Flexural distribution Antecubital fossa
Popliteal fossa Wrists Ankles Neck
Keratosis pilaris Atopy

VisualDX使用步驟5：依左邊選單瀏覽所需文字內容

visualDX / Atopic dermatitis

5

Contents

- Synopsis
- Codes
- Look For
- Diagnostic Pearls
- Differential Diagnosis & Pitfalls
- Best Tests**
- Management Pearls
- Therapy
- References

Information for Patients

[View all Images \(115\)](#)

Other Resources

- [UpToDate](#)
- [PubMed](#)

Best Tests

A careful history, to include an appropriate temporal course and family history of atopy, coupled with the appropriate clinical appearance, are keys to diagnosis. Serum immunoglobulin E (IgE) level is elevated in 80% of patients, although in routine cases, IgE levels usually are not necessary.

Bacterial culture should be sent if lesions appear impetiginized. A Tzanck smear, viral culture, and/or viral polymerase chain reaction (PCR) should be performed if eczema herpeticum is considered.

Skin scrapings for scabies should be performed on any lesion that resembles a burrow.

In a few select cases, the following investigations may help rule out imitators:

- Skin biopsy
- Oral food challenges, radioallergosorbent test (RAST), or patch testing
- HIV test

Management Pearls

Counsel patients on avoiding triggers. Factors that are known to exacerbate atopic dermatitis include stress, inappropriate bathing habits (eg, prolonged, hot showers), infection, irritants (eg, detergents), sweating, and environmental allergens.

Appropriate skin care is critical. Gentle nonsoap cleansers should be utilized. The liberal use of bland emollients is essential. These products should be free of fragrances and dyes.

Patients are prone to bacterial, fungal, or viral superinfections, which can further exacerbate dermatitis flares. Evidence of hemorrhagic crusts (scabs) may be indicative of staphylococcal colonization or viral superinfection.

Sleep disturbance and depression may be seen in this population and should be adequately assessed for.

There has been an association between atopic dermatitis and osteoporotic fractures, although the

VisualDX使用步驟5：依左邊選單瀏覽所需文字內容

Synopsis	概要說明
Codes	疾病代碼
Look For	觀察重點 / 臨床特徵
Diagnostic Pearls	診斷要訣 / 診斷重點提示
Differential Diagnosis & Pitfalls	鑑別診斷與陷阱
Best Tests	最佳檢查項目
Management Pearls	處置要訣 / 治療重點提示
Therapy	治療方式
References	參考文獻
Information for Patients	病患衛教資訊

visualDx. / Atopic dermatitis

Contents

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- [Diagnostic Pearls](#)
- [Differential Diagnosis & Pitfalls](#)
- [Best Tests](#)
- [Management Pearls](#)
- [Therapy](#)
- [References](#)

Information for Patients

[View all Images \(115\)](#)

Other Resources

- [UpToDate](#)
- [PubMed](#)

Best Tests

A careful history, to include an appropriate clinical appearance, are key. 80% of patients, although in routine cases.

Bacterial culture should be sent if lesions are present. Polymerase chain reaction (PCR) should be used to detect scabies.

Skin scrapings for scabies should be performed.

In a few select cases, the following investigations are indicated:

- Skin biopsy
- Oral food challenges, radioallergo
- HIV test

VisualDX使用步驟6：右邊選單瀏覽收錄的所有臨床圖像

visualDX / Atopic dermatitis

Atopic dermatitis in Adult

See also in: [Cellulitis DDX](#), [External and Internal Eye](#)

Print Patient Handout Save Diagnosis Images (115)

Contributors: Azeen Sadeghian MD, Ryan Fan BA, Jeffrey M. Cohen MD, Susan Burgin MD

Synopsis

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In infants, the disease involves primarily the face, scalp, torso, and extensor aspects of extremities. In children and adults, the disease usually involves chiefly the flexural aspects of extremities, but can be more generalized. In adults, flexural skin may be clear and disease may be focal or widespread. Patterns of atopic dermatitis (ie, follicular eczema) are more common in persons with darker skin.

Atopic dermatitis may be categorized as follows:

- Acute – erythema, vesicles, bullae, weeping, crusting
- Subacute – scaly plaques, papules, round erosions, crusts
- Chronic eczema – lichenification, scaling, hyper- and hypopigmentation

The cause of atopic dermatitis is unknown. Genetic and environmental predisposing factors and environmental triggers have been associated with atopic dermatitis. A family history of atopic dermatitis is common.

6 View all Images (115)

Atopic dermatitis in Adult

See also in: [Cellulitis DDX](#), [External and Internal Eye](#)

Filter Images Print Captions

Adult

- Scaly, erythematous papules and plaques
- Dry skin
- Pruritus
- Lichenified plaques
- Excoriated skin lesions

Flexural distribution Antecubital fossa Popliteal fossa Face Neck Extremities Atopy

Infants and Young Children

- Alopecia
- Dry skin
- Vesicles
- Erythematous scale
- Pruritus
- Lichenified plaques
- Crusted plaques

Extensor distribution Face Scalp Arms Legs Atopy Seborrheic dermatitis

Older Children and Adolescents

- Hyperkeratosis of neck
- Hyperpigmentation of neck
- Erythema
- Pruritus
- Hyperlinear palms
- Lichenified plaques
- Dry skin

Flexural distribution Antecubital fossa Popliteal fossa Wrists Ankles Neck Keratosis pilaris Atopy

VisualDX使用步驟7：連結外部資源

The screenshot displays the VisualDX interface for 'Atopic dermatitis in Adult'. The left sidebar contains a 'Contents' menu with items like 'Synopsis', 'Codes', and 'Look For'. Below it is 'Information for Patients' and 'View all Images (115)'. A red box highlights the 'Other Resources' section, which includes 'UpToDate' and 'PubMed'. A yellow circle with the number '7' is overlaid on this section. The main content area shows the title 'Atopic dermatitis in Adult' and a 'Synopsis' section. The synopsis text describes atopic dermatitis (eczema) as a chronic, relapsing, pruritic condition. An 'UpToDate' search overlay is visible on the right side of the page, showing search results for 'Atopic dermatitis' with various filters and a list of related articles.

Contents

- Synopsis
- Codes
- Look For
- Diagnostic Pearls
- Differential Diagnosis & Pitfalls
- Best Tests
- Management Pearls
- Therapy
- References

Information for Patients

View all Images (115)

Other Resources

- UpToDate
- PubMed

7

Atopic dermatitis in Adult

See also in: [Cellulitis DDX](#), [External and Internal Eye](#)

Print Patient Handout Save Diagnosis Images (115)

Contributors: Azeen Sadeghian MD, Ryan Fan BA, Jeffrey M. Cohen MD, Susan Burgin MD

Synopsis

Atopic dermatitis (eczema) is a chronic, relapsing, pruritic condition that is often associated with allergic rhinitis and/or asthma. Infants and children are most often affected, with 85% of cases appearing in the first year of life and 95% of cases appearing by 5 years. Uncommonly, the condition may persist into, or even arise in, adulthood. Less than 1% of adults are affected by atopic dermatitis. With increased understanding of immunosenescence, atopic dermatitis is increasingly being recognized in the older adult population.

In infants, the disease involves primarily the face, scalp, torso, and extensor aspects of extremities. In children and adults, the disease usually involves chiefly the flexural aspects of extremities, but it may be more generalized. In adults, flexural skin may be clear and disease may be focal or widespread. Follicular patterns of atopic dermatitis (ie, follicular eczema) are more common in persons with darker skin colors.

Atopic dermatitis may be categorized as follows:

- Acute – erythema, vesicles, bullae, weeping, crusting
- Subacute – scaly plaques, papules, round erosions, crusts
- Chronic eczema – lichenification, scaling, hyper- and hypopigmentation

The cause of atopic dermatitis is unknown. Genetic and environmental predisposing factors exist. Multiple loci have been associated with atopic dermatitis. A family history of atopic dermatitis is common.

UpToDate® Atopic dermatitis

Why UpToDate? Product Editorial Subscription Options

All Adult Pediatric Patient Graphics

Showing results for **Atopic dermatitis**

Search instead: [Eczema herpeticum](#), [Acute palmoplantar eczema](#), [Nummular dermatitis](#)

Treatment of atopic dermatitis (eczema)

...= moderate, and 4 = severe) The joint-reported Scoring of **Atopic Dermatitis** (SCORAD; 0 to 103) The patient-reported Patient-Oriented **Eczema Measure** (POEM; 0 to 28) The Peak Pruritus Numerical Rating ...

Atopic dermatitis (eczema): Pathogenesis, clinical manifestations, and diagnosis

... **Atopic dermatitis** (AD) is a chronic, pruritic, inflammatory skin disease that commonly affects both children and adults. AD is often associated with an elevated serum level of immunoglobulin E (IgE) and ...

Overview of dermatitis (eczematous dermatoses)

...dermatitis . **Atopic dermatitis (eczema)** is a chronic, pruritic, inflammatory skin disease that occurs most frequently in children but also affects adults. The hallmarks of **atopic dermatitis** are dry skin ...

Management of severe, refractory atopic dermatitis (eczema) in children

...severity of AD, such as the Investigator Global Assessment (IGA), the Scoring of **Atopic Dermatitis** (SCORAD) index, and the **Eczema Area and Severity Index** (EASI) . Although such scales are useful for standardizing ...

VisualDX使用步驟8：提供患者衛教資訊

visualDX / Atopic dermatitis

Contents

- Synopsis
- Codes
- Look For
- Diagnostic Pearls
- Differential Diagnosis & Pitfalls
- Best Tests
- Management Pearls
- Therapy
- References

Information for Patients

View all Images (115)

Other Resources

- UpToDate
- PubMed

Patient Information for Atopic dermatitis in Adult

Print E-Mail English

8 Images (115)

Contributors: Medical staff writer

Overview

Eczema (atopic dermatitis) is a common, chronic skin condition associated with dry skin that begins with itching or irritation that is further aggravated by scratching followed by a red, flaky rash. This condition often runs in families and frequently occurs with other allergic-related conditions such as asthma, hives (urticaria), food allergies, skin sensitivity, and hay fever (allergic rhinitis). Eczema commonly waxes and wanes in response to various environmental factors. Skin infections, excessive heat, winter (or cold, dry climates), fragrances, detergents / soaps, abrasive clothing (eg, scratchy wools), chemicals, smoke, and stress may trigger eczema to flare up or worsen. Scratching increases the chances of developing an infection because it increases breaks in the skin. While these environmental triggers may worsen eczema, they are not the cause of the skin condition.

The primary cause of eczema is an overactive immune system that results in skin inflammation, changes in the normal skin bacteria, and breaks (fissures) in the skin barrier that make individuals more susceptible to bacterial, viral, and fungal infections. The redness, scaling, and thickening of the skin in eczema is a direct result of the increased inflammation in these individuals.

Who's At Risk

Infants and children are most frequently affected by eczema, although this condition may present for the first time in adulthood. Approximately one-third of children with eczema may have disease that persists into their adult years, and their skin lesions in adulthood may be different than what they experienced in childhood. There is no cure for eczema, and it is not contagious.

All Skin Types Skin of Color View all Images (115)

Adult

- Scaly, erythematous papules and plaques
- Dry skin
- Pruritus
- Lichenified plaques
- Excoriated skin lesions

Infants and Young Children

- Alopecia
- Pruritus
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Flexural distribution Antecubital fossa Popliteal fossa Face Neck Extremities Atopy Extensor distribution Face Scalp Arms Legs Atopy Seborrheic dermatitis

Hyperkeratosis of neck Hyperpigmentation of neck Erythema Pruritus Hyperlinear palms Lichenified plaques Dry skin

Flexural distribution Antecubital fossa Popliteal fossa Wrists Ankles Neck Keratosis pilaris Atopy

VisualDX特色功能：Compare Diagnoses

visualDX / Atopic dermatitis

Differential Diagnosis & Pitfalls

To perform a comparison, select diagnoses from the classic differential

- Allergic contact dermatitis
- Irritant contact dermatitis
- Nummular dermatitis (nummular eczema)
- Eczema craquelé
- Psoriasis
- Pityriasis rosea
- Seborrheic dermatitis
- Lichen simplex chronicus
- Ichthyosis vulgaris
- Tinea corporis
- Tinea incognito (tinea corporis inadvertently treated with a steroid)
- Scabies
- Infectious eczematoid dermatitis

Rarer conditions:

- Glucagonoma syndrome
- Pellagra
- Mycosis fungoides (cutaneous T-cell lymphoma) "eczema" that is not adequately responding to therapy

Compare Diagnoses:

Atopic dermatitis, Allergic contact dermatitis, Irritant contact dermatitis

Add Diagnosis to Compare

- Atopic dermatitis
- Allergic contact dermatitis
- Irritant contact dermatitis

Synopsis

Atopic dermatitis
Atopic dermatitis (eczema) is a chronic, relapsing, pruritic condition that is often associated with allergic rhinitis and/or asthma. Infants and children are most often affected, with 85% of cases appearing in the first year of life and 95% of cases appearing by 5 years. The condition may persist into, or even arise in, adulthood. Intense pruritus is a hallmark of atopic dermatitis. Scratching leads to lichenification (skin thickening). Impaired barrier function increases transepidermal water loss and the risk of bacterial and viral cutaneous infections. Patients with atopic dermatitis have difficulties in retaining skin moisture

Allergic contact dermatitis
Allergic contact dermatitis is a delayed hypersensitivity reaction (type IV cell-mediated reaction). The most frequent sensitizers in the general population are fragrance, nickel, neomycin, formaldehyde, chromates, rubber chemicals, lanolin, other common environmental chemicals, and poison ivy and other plants. Workers in certain occupations, such as hair dressing, are at high risk for developing irritant as well as allergic contact dermatitis. In acute cases, lesions tend to be vesicular or bullous. Subacute cases are papular, erythematous, and scaly.

Irritant contact dermatitis
A common skin reaction secondary to direct physical or chemical injury to the epidermis. Patients often complain of burning or stinging early on and present with erythema, edema, and scaling. It may be difficult to distinguish from true allergic contact dermatitis (an immune-mediated delayed type-IV hypersensitivity reaction), but unlike the latter, it can present within hours of exposure to a strong irritant. Over time, pruritus may become the predominant symptom.

Cancel **Compare**

VisualDX特色內容：常見藥物不良反應

visualDx / Text Search - "ibuprofen" Sign Out

38 results for "ibuprofen"

Start Over Results 1 - 10 of 38

Fixed Drug Eruption

Matching Findings: **ibuprofen**
... and other sulfonamides), naproxen, **ibuprofen**, tetracyclines, other ... Read more

visualDx / Fixed drug eruption Allan.Finn@wolterskluwer.com

Fixed drug eruption in Infant/Neonate

See also in: [Cellulitis DDX](#), [Anogenital, O](#)

[Print](#) [Patient Handout](#) [Save Diagnosis](#) es (147)

Contributors: Rajini Murthy MD, Elizabeth B. Wallace MD, Belinda Tan MD, PhD, Susan Burgin MD

Synopsis

Fixed drug eruption (FDE) is a cutaneous adverse drug reaction that recurs at the same body site each time the individual is re-exposed to the culprit drug. One or more sharply demarcated, red or violaceous patches that are typically round develop within minutes to hours of exposure to the inciting drug. These may vary from 0.5 to several centimeters in size. They are usually asymptomatic, although burning, pain, or pruritus may occur. While any cutaneous surface may be affected, the oral and anogenital mucosa are most frequently involved.

FDE is most commonly solitary, but some individuals may develop multiple patches. There may be an increasing number of patches seen with each exposure. Healing with [postinflammatory hyperpigmentation](#) is common. Atypical variants include nonpigmenting and generalized blistering forms.

[View all Images \(147\)](#)

Medication use Anogenital Hands Feet Lips Tongue

VisualDX特色功能：查詢歷程

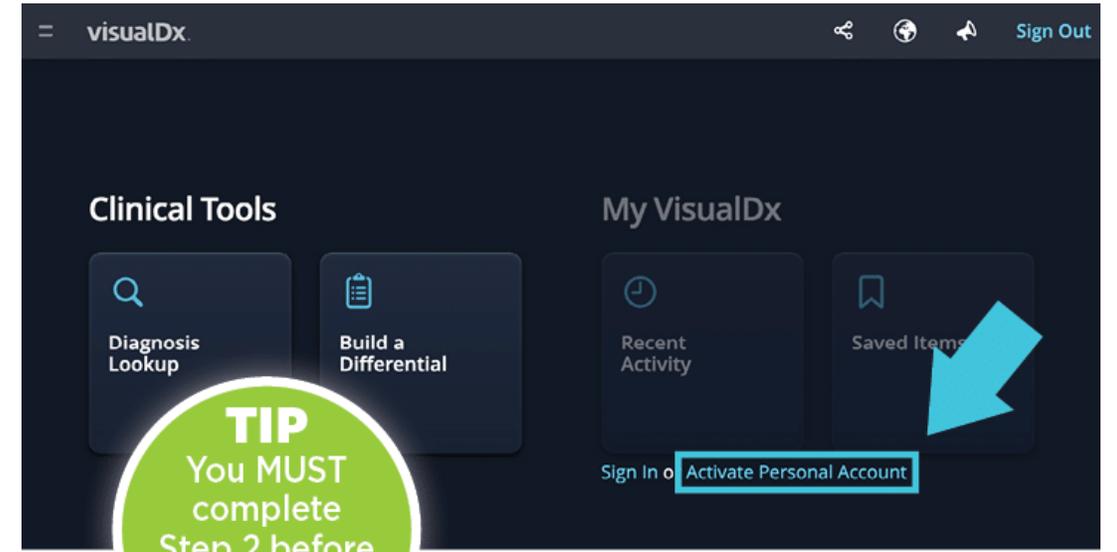
The screenshot displays the 'History' section of the VisualDX interface. At the top, there is a search bar labeled 'Search History' with a magnifying glass icon on the left and a close 'X' icon on the right. Below the search bar, the date 'Today, January 29, 2025' is shown. The main content area contains a list of five search results, each with a checkbox on the left, a time stamp, an icon representing the search type (document or filter), the search text, and a close 'X' icon on the right.

Time	Search Type	Search Text
10:45 am	Document	Atopic dermatitis
10:45 am	Filter	Fever, Hyperpigmented patch, 50-59 year old Female
10:28 am	Document	Fixed drug eruption
10:12 am	Document	Atopic dermatitis
10:12 am	Filter	Fever, Patient appears ill, Developed acutely , Dyspnea, Heart palpitations, Chest pain, Arm pain, 50-59 year old Female

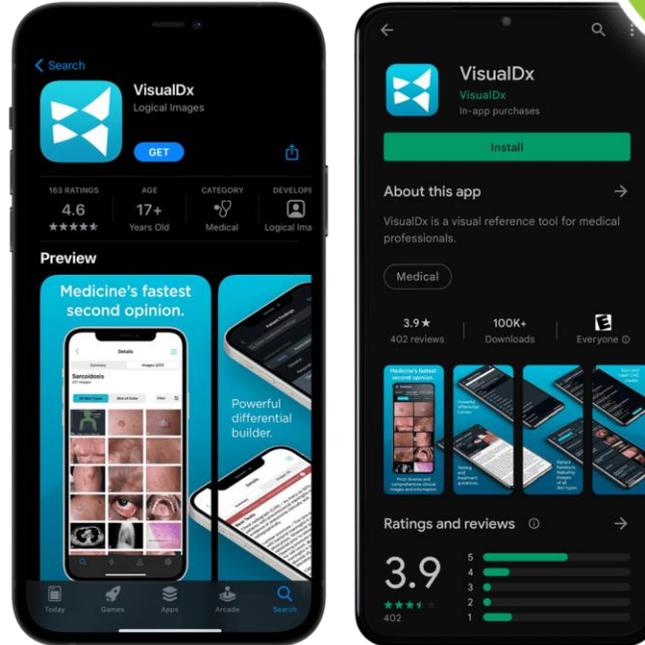
安裝VisualDX APP

必須**完成步驟1及步驟2**之後再下載APP：

1. 在院內IP範圍內登入VisualDX網站
2. **建立個人帳號**
3. 在手機下載APP，輸入步驟2申請的帳號密碼，完成安裝。

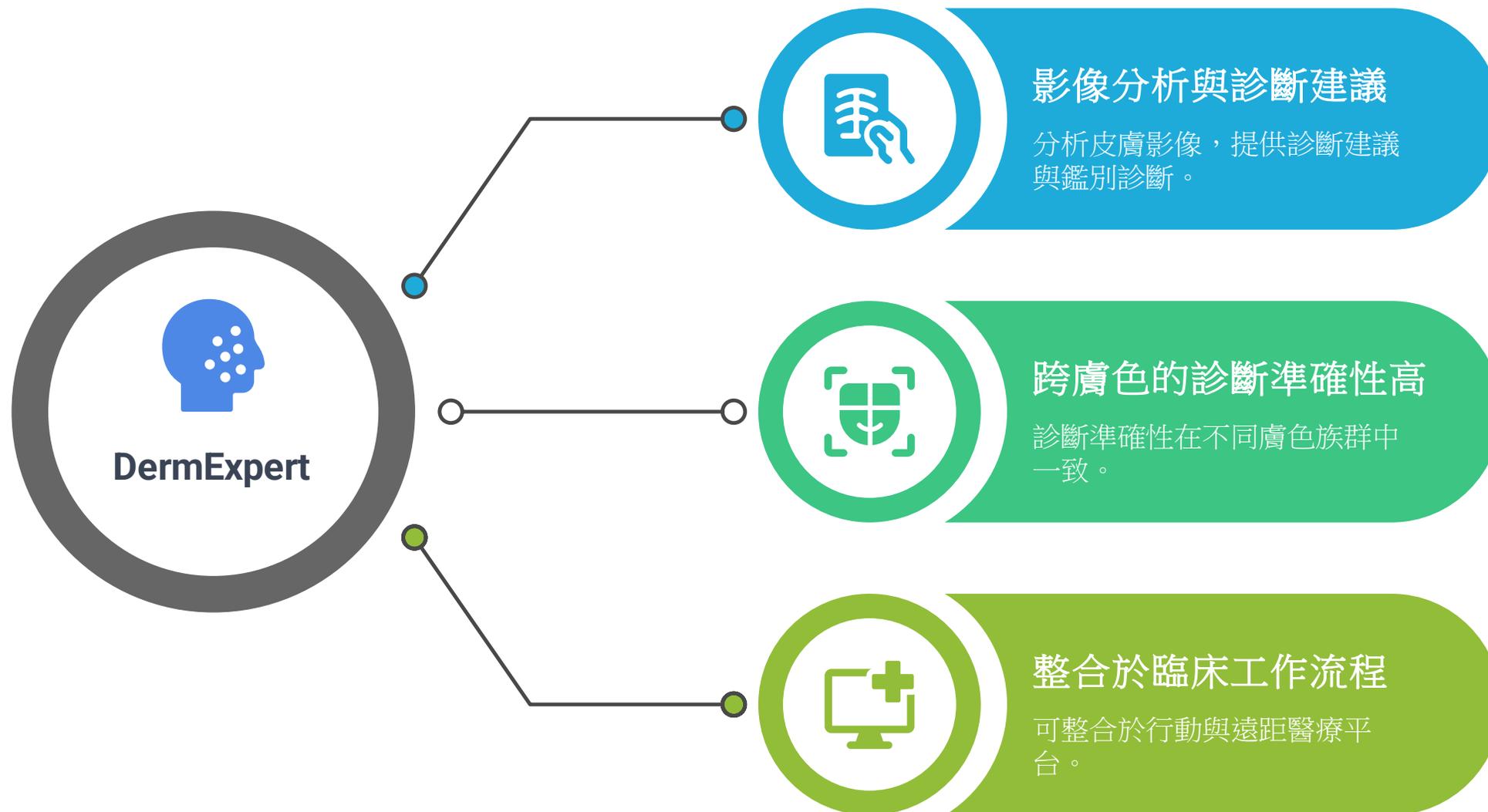


App Store (iPhones)



Google Play
(Androids)

DermExpert™ of VisualDX



開始使用DermExpert™

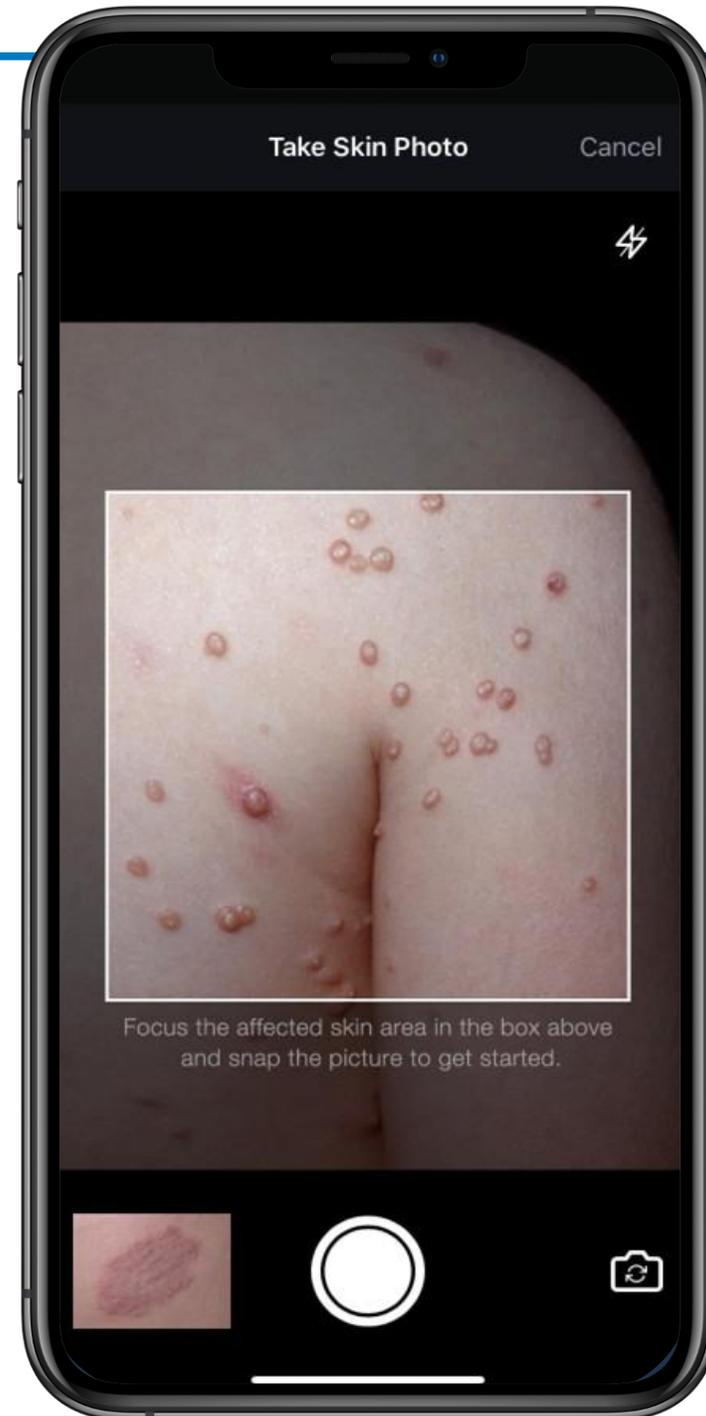
拍攝照片

照片分析

確認或編輯病變類型

回覆相關問題

提供診斷參考



開始使用DermExpert™

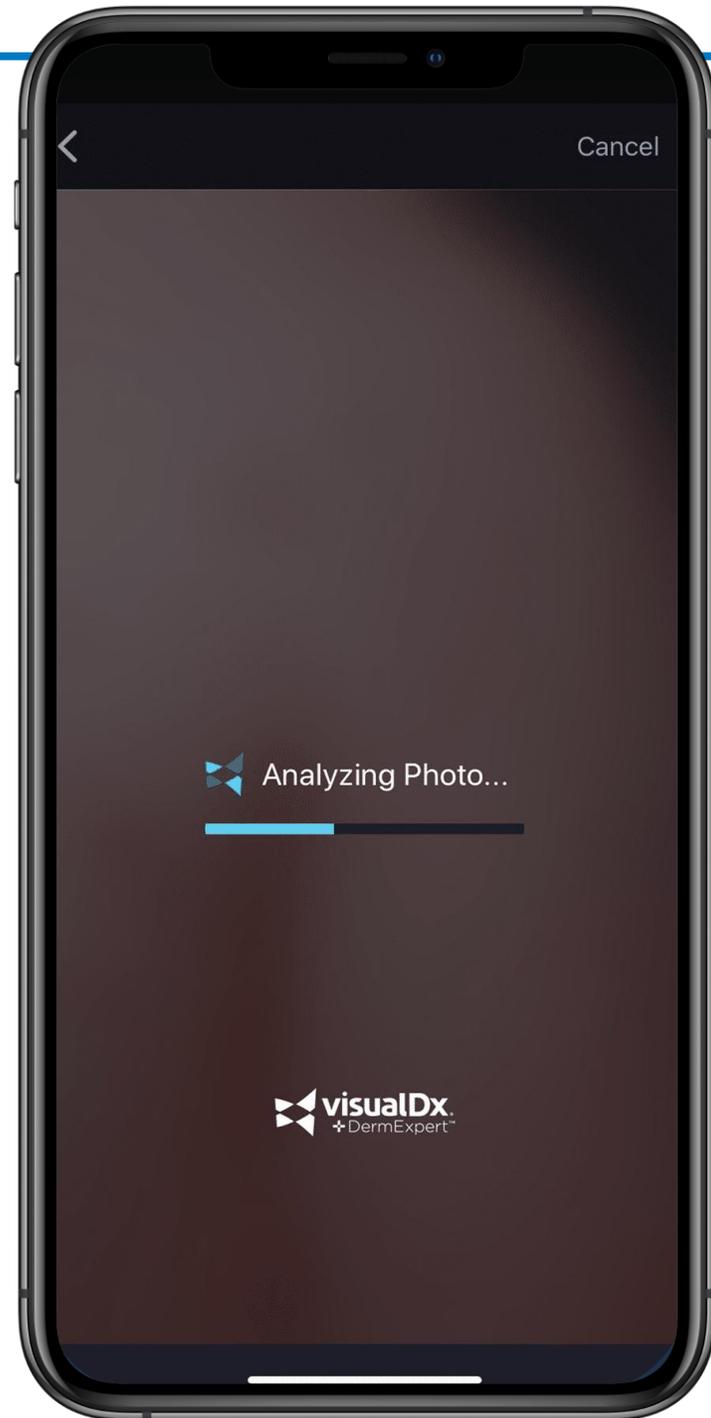
拍攝照片

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開始使用DermExpert™

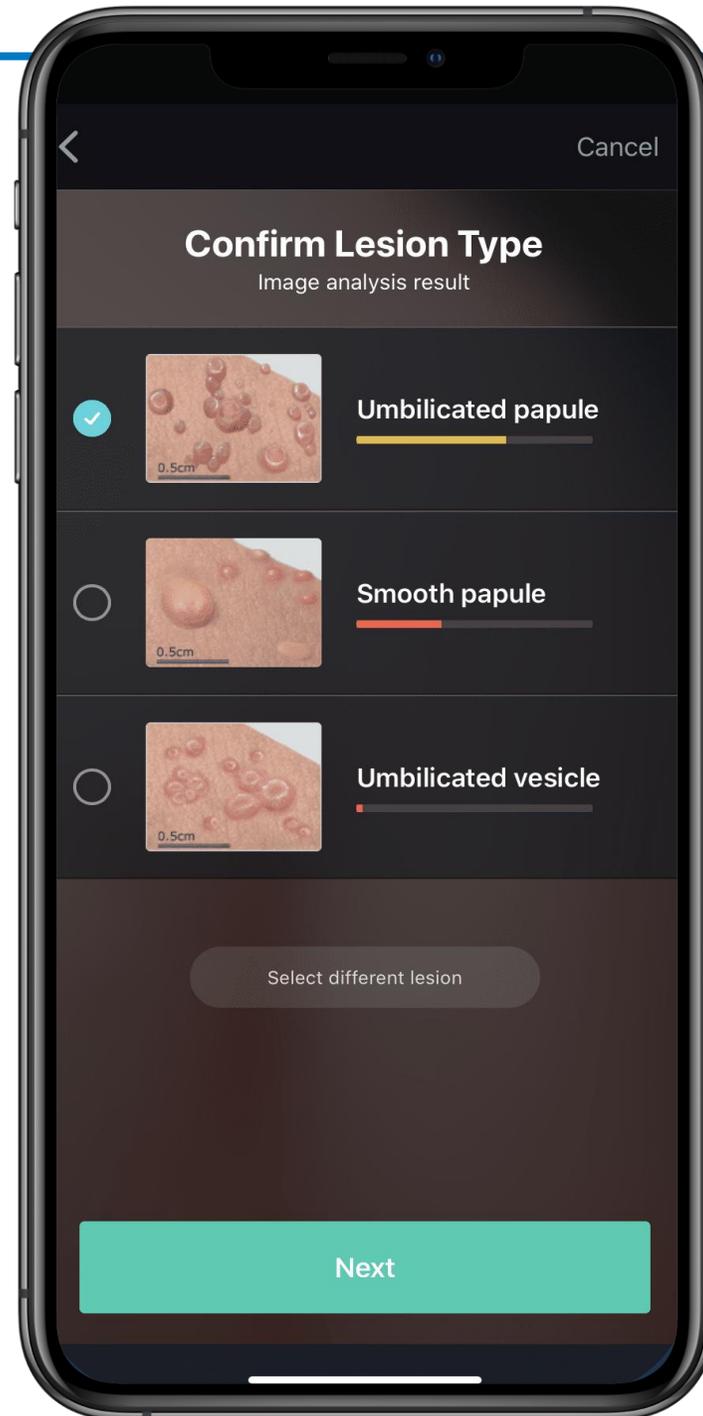
拍攝照片

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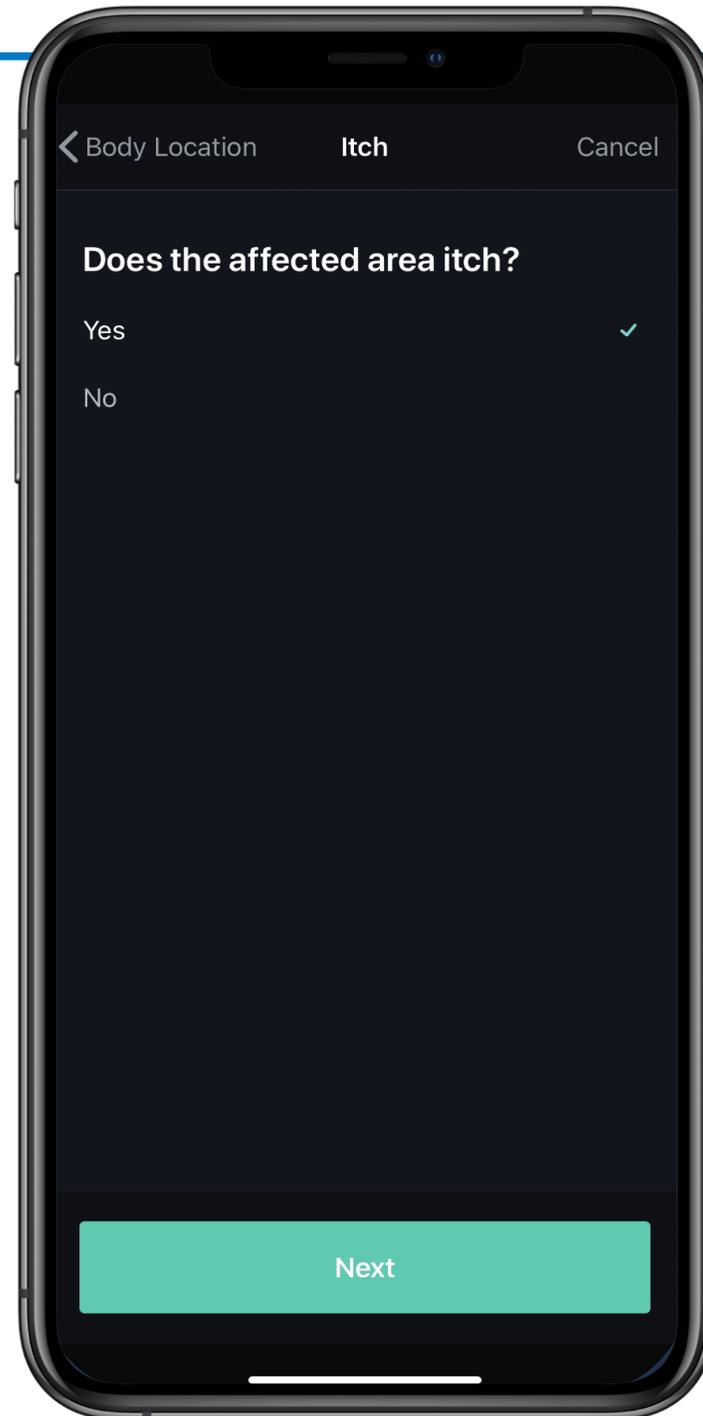
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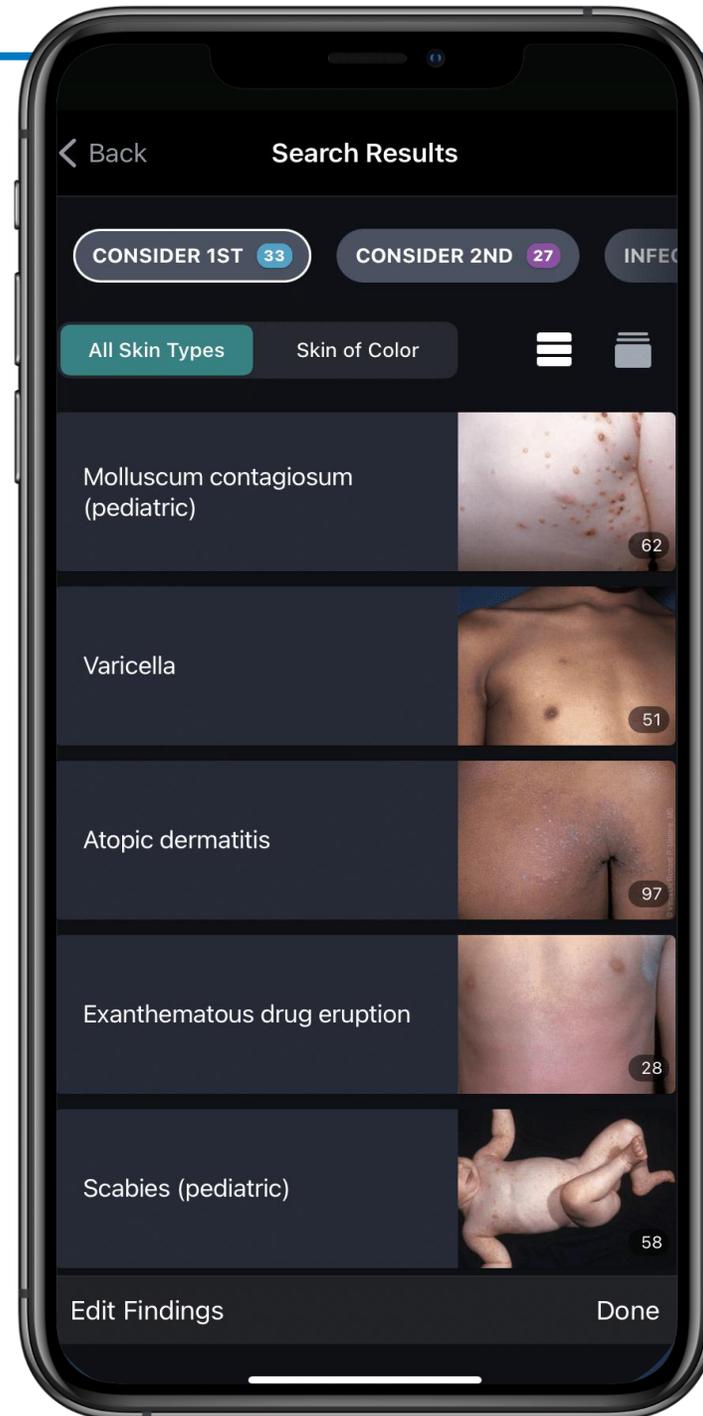
拍攝照片

照片分析

確認或編輯病變類型

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實例演練

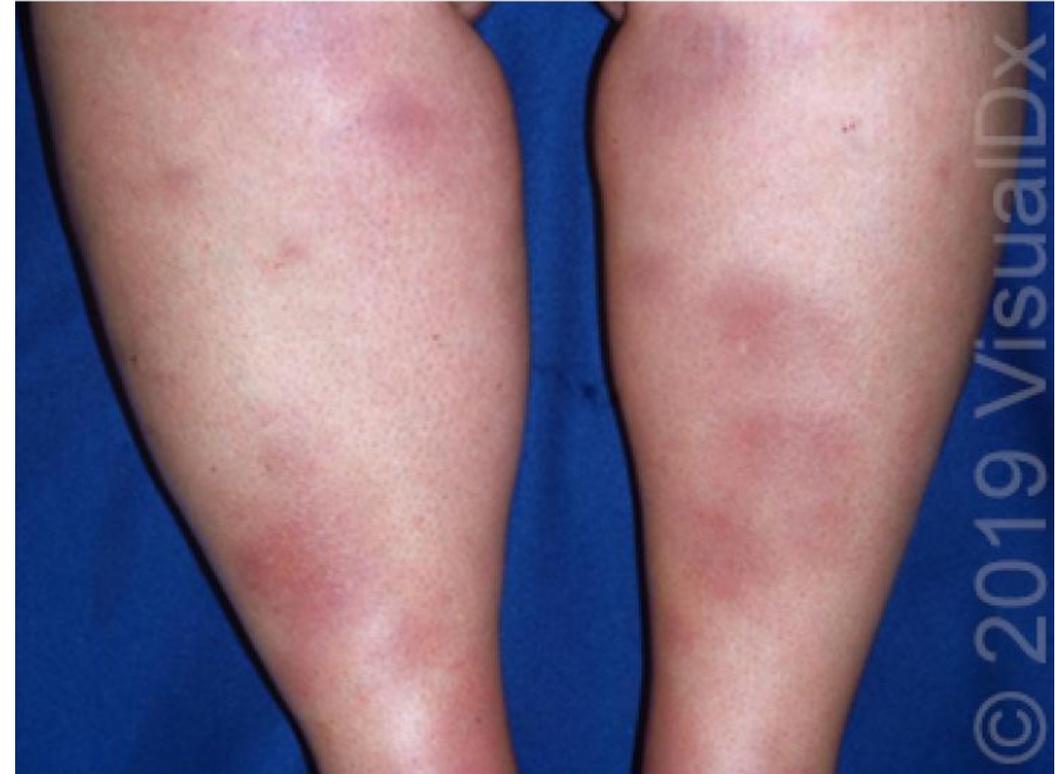
- A 15-month-old infant came in on her **third day** of illness with a **fever**. She was coughing a little and had **diarrhea**. The **rash** was generalized confluent **over her hands, feet, groin area, and back**.
- It looked very much like hives, which can happen with just such a viral illness. So I sent her home with antihistamines and close follow up.
- **The next day** she came in again, this time her mom said the **rash was worse** and her **lips were a bit swollen**.



實例演練

A 33-year-old woman went to her doctor after she developed multiple **blanching patches** on her **lower legs** over the course of 2 weeks. The lesions were **round and tender**. She had also been fighting a **fever and fatigue** over the same period. Her only current prescription was for **oral contraceptives**.

 **visualDx**. What's the diagnosis?



- A. Erythema nodosum
- B. Erythema multiforme
- C. Erysipelas
- D. Cellulitis

謝謝

