Cutaneous manifestation of decompression sickness: cutis marmorata

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A 39-year-old male commercial diver, who developed neurologic symptoms after diving, was transferred to our department 5 hours after the onset of the symptoms. The diver performed two repetitive dives to a depth of 27 metres (90 feet); 50 minutes bottom time for each dive. He had omitted the usual surface interval (resting near the surface) between the dives; the dive profile was otherwise unremarkable.

On examination, he had sharp joint pain, hypoesthesia and weakness of his lower limbs, hearing loss and a widespread marbling rash (cutis marmorata) on his epigastrium, thighs and lower limbs (Figures 1 & 2).

He was diagnosed as Type II Decompression Sickness and treated with United States Navy Treatment Table 6. Joint pain and hearing loss resolved and the rash significantly faded after the recompression therapy.

Figures 1 & 2. Widespread marbling rash on his back and legs

Cutis marmorata is a distinct cutaneous manifestation of decompression sickness. It is easily recognised by its typical mottled, marbling violaceous appearance. It may start as an intense multifocal itching that is followed by a generalised hyperaemia which in turn progresses to irregular dark violet or purple patches.

Although not fully established, it is accepted that cutis marmorata is caused by vascular congestion which in turn is thought to be triggered by vascular inflammation secondary to the development of intravascular gas bubbles.¹
Cutis marmorata is usually transient and does not require any means of treatment in itself; however, because it is a warning sign of a more severe manifestation of decompression sickness it needs close follow-up.²

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