

HIGH-YIELD DERMATOLOGY NOTES

FOR USMLE STEP 1 AND STEP 2

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Dear IMG

High-Yield Notes for USMLE Step 1 & Step 2 CK

STEP 1 — PATHOPHYSIOLOGY & BASIC SCIENCE

ACNE

- Androgens → ↑ Sebum → *P. acnes* overgrowth → IL-1/TNF inflammation → Comedones → Acne

PSORIASIS

- Th1/Th17 → IL-17 + IL-23 → Keratinocyte hyperproliferation → Transit time: 28 days → 3-4 days
- Histology: Acanthosis + Parakeratosis + Munro microabscesses + Elongated rete ridges

Dear IMG

- Auspitz sign: Pinpoint bleeding when scale removed → Dilated papillary dermal vessels

ATOPIC DERMATITIS

- Filaggrin mutation → ↓ Skin barrier → Th2 response → ↑ IgE + Eosinophilia → Type I + IV hypersensitivity

BLISTERING DISEASES — STEP 1

- Pemphigus vulgaris → Anti-desmoglein 3 (±1) IgG → Intraepidermal split → Acantholysis → Nikolsky POSITIVE
- Paraneoplastic pemphigus → Anti-desmoplakin → Malignancy (NHL/CLL/Castleman)

- Bullous pemphigoid → Anti-BP180/BP230
→ Subepidermal split → No acantholysis →
Nikolsky NEGATIVE
- Dermatitis herpetiformis → Anti-tTG IgA →
Granular IgA in papillary dermis →
Subepidermal → Celiac

SKIN CANCER — STEP 1 PATHOLOGY

- BCC → Basal keratinocytes → Palisading
nuclei + Stromal retraction → NEVER
metastasizes → PTCH1/Hedgehog
- SCC → Keratinocytes → Keratin pearls +
Dysplastic cells → CAN metastasize → p53
mutation
- Melanoma → S100+ → BRAF V600E (50%)
→ Breslow = Most important prognostic
factor

- Superficial spreading = Most COMMON
Nodular = Most AGGRESSIVE
Acral lentiginous = Palms/Soles/Nails (dark skin)
Lentigo maligna = Elderly sun-damaged face (least aggressive)
- Merkel cell → CK20+ + Neuroendocrine + Polyomavirus

DRUG REACTIONS — STEP 1

- Morbilliform/Exanthematous → Most COMMON reaction → T cell (Type IV) → Amoxicillin + EBV

Dear IMG

- Fixed drug eruption → Same site every time
→ NSAIDs + Tetracycline + TMP-SMX
- SJS (<10% BSA) → Epidermal necrosis +
Mucous membranes → Sulfa +
Anticonvulsants + Allopurinol
- TEN (>30% BSA) → Diffuse sloughing →
Same drugs → Mortality 30-50%
- DRESS → Rash + Fever + Eosinophilia +
Organ damage 2-8 weeks → HHV-6
reactivation → Anticonvulsants + Allopurinol
- Warfarin skin necrosis → Day 3-5 → Fatty
areas → Protein C/S deficiency

Dear IMG

- Drug-induced lupus → Anti-histone → Hydralazine + Procainamide + INH → Spares kidneys/CNS

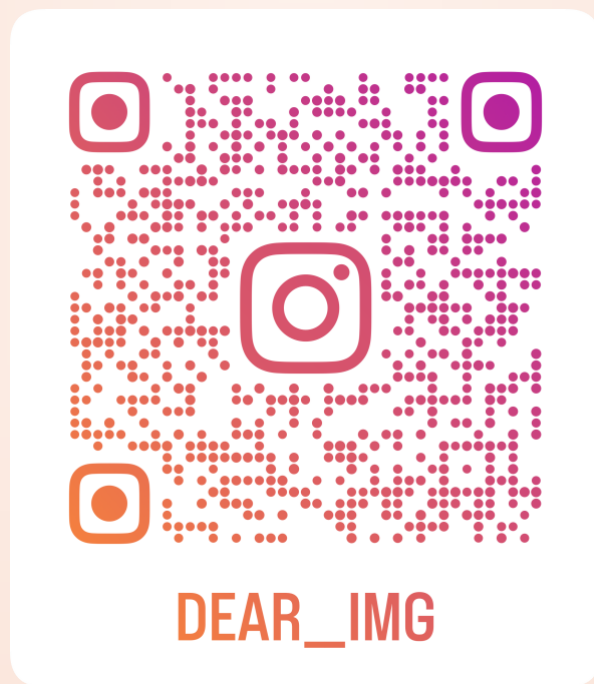
PORPHYRIAS

- PCT → ↓ Uroporphyrinogen decarboxylase → ↑ Uroporphyrins → Most common porphyria
- AIP → ↓ PBG deaminase → NO skin findings → Triggers: Sulfonamides + OCPs + Barbiturates + Fasting
- EPP → ↓ Ferrochelatase → Immediate burning with sun exposure → Child → NO blisters



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