A 24-year-old woman presented with episodic painful tingling, numbness, and discoloration in her fingers on both hands upon exposure to cold for the past 6 years. Her medical history included infrequent migraines managed with 200 mg of ibuprofen as needed. She did not smoke tobacco or drink alcohol. Physical examination was negative for any skin ulcerations, calcinosis, or fibrosis. She voluntarily reproduced her symptoms by running her fingers under cold water, which resolved after 10 minutes, and Raynaud disease was diagnosed. She was referred to rheumatology to evaluate for secondary causes such as systemic lupus erythematosus, scleroderma, and connective tissue disease.

Diagnosis of primary Raynaud disease was made based on the 3-step criteria of cold insensitivity, dermal color changes, and severity of symptoms. Raynaud disease is characterized by cold-induced arteriolar vasospasm, which causes sequential pallor, cyanosis, and rubor. Symptoms typically occur bilaterally on the extremities, but they can occur on the nose, ears, and areolas.

This patient was counseled to avoid direct contact with cold objects and to keep her extremities warm. If symptoms persist, nifedipine or sildenafil may be considered.

References

Keywords: Raynaud disease, Raynaud phenomenon