## Medical Mystery — The Answer

**TO THE EDITOR:** The medical mystery in the September 25 issue[1] involved a 48-year-old woman who had a 30-year history of dermatomyositis treated with prednisolone and who was admitted for depression and nausea. An abdominal radiograph was obtained. The diagnosis is calcinosis universalis, shown here by the ectopic calcification (Fig. 1B). This is a rare complication of dermatomyositis resulting from dystrophic calcification within the affected tissue. There was also skin pressure necrosis, as seen in Figure 1A.

Nicholas Magee, M.R.C.P.
Rory Convery, M.R.C.P.

Craigavon Area Hospital
Portadown BT63 5QQ, Northern Ireland

1. Magee N, Convery R. A medical mystery. N Engl J Med 2003; 349:1246.

*Editor's note:* We received 683 responses to this medical mystery, 48 percent from physicians in practice, 29 percent from physicians in training, and 10 percent from medical students. Sixty-six percent of the respondents gave explanations that were consistent with dystrophic calcifications. Other explanations included cancer (9 percent) (e.g., lymphoma; sarcoma; and pancreatic, gastric, colon, and ovarian carcinoma) and infection (6 percent) (e.g., tuberculosis, onchocerciasis, cysticercosis, trichinosis, and syphilis). We received answers from 67 countries, including Armenia, Brazil, China, Cuba, Iran, Israel, Oman, Syria, Taiwan, Thailand, and Russia. It is impressive to see that the "art of medicine" transcends boundaries. We encourage all to respond to future medical mysteries.

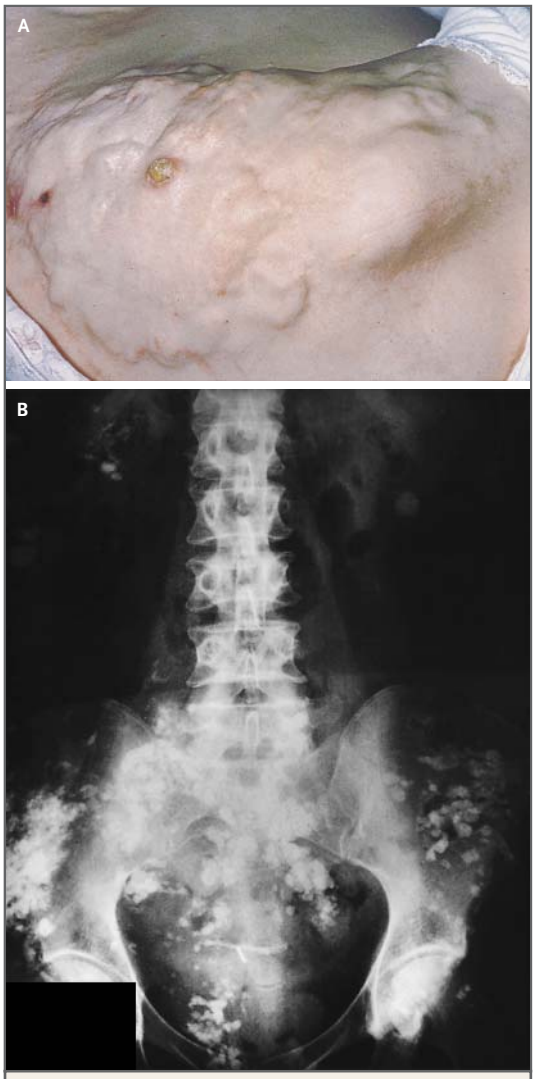


**Figure 1. A 48-Year-Old Woman with Calcinosis Universalis.**

Panel A shows multiple skin nodules and skin pressure necrosis of the right flank, and Panel B ectopic calcification.

## Drug-Induced Hepatotoxicity

**TO THE EDITOR:** In his otherwise excellent review of drug-induced liver injury, Lee asserts that N-acetylcysteine reliably prevents liver injury if treatment is begun within 12 to 24 hours after the ingestion of acetaminophen. This is incorrect.

N-acetylcysteine is almost universally effective when given within 8 to 10 hours after an acute overdose of acetaminophen, but its antidotal efficacy decreases substantially thereafter.[1,2] Most patients presenting after a delay should still receive the anti-