

# Unraveling

Category: Awaiting a Diagnosis

written by Pam Adelstein | September 1, 2025

A certain patient and I had always enjoyed an easy rapport at his annual exams and occasional acute care appointments.

Then one morning he presented with an itchy skin rash. The skin findings were minimal; he had tried over-the-counter creams to no avail. I prescribed a more potent topical medication, and he left satisfied. Two weeks later he called again, this time asking for an urgent visit. The rash had spread and the itch was keeping him up at night. He sent photos via the portal, but their blurriness made them difficult to decipher.

At his appointment later that day, his frenetic anxiety choked the air out of the exam room. In an urgent tone, he detailed the evolution of his ailment. New hair-like fronds had erupted from his skin, he said, leaving welts behind. He'd picked them out and brought several in a small jar, hoping I could identify them. They were nondescript, and his skin findings were still minimal. He left the visit disappointed.

Over the ensuing weeks, he sent messages via the portal almost daily, at odd hours, as he tried to puzzle out the root cause of his symptoms. He was plagued by a horrible crawling sensation on his skin. He emailed photos of spindles protruding from the walls of his house, reminiscent of the *Amityville Horror*. Dismayed that his landlord refused to tear down the walls to get rid of whatever was growing inside them, he asked me to write the housing authorities about his toxic living quarters.

At his next visit, deep, dark circles dominated his face. He said he spent his nights plucking out and collecting these foreign bodies. Jumbo trash bags filled with fluffy material crowded the exam room—he'd brought them for me to see. His face fell as I explained that I couldn't send the entire contents to the lab for identification. He requested referrals—but rejected consultants who dismissed his symptoms as psychological in nature. Dermatology biopsied his skin where his scratching had left deep excoriations. No pathology was identified. Adamantly he rejected any hints of his true diagnosis: delusional parasitosis, or a fixed, false belief that one is infected with parasites, worms, mites, or other living organisms.

So he could keep a vigilant watch over the substance oozing from his walls, he stopped leaving home for work or errands. The loss of human contact and the sleepless nights tragically untethered him from reality. He remains desperate for someone to understand his predicament, convinced that someday someone will discover his true diagnosis.

*Pam Adelstein*

*Newton, Massachusetts*