

IMAGE CHALLENGE

Rash following a round of golf

CLINICAL INTRODUCTION

A 68-year-old man presents to the emergency department with a sudden-onset rash affecting both lower legs. He is otherwise well, with no fever, systemic symptoms or new medications. The rash appeared a few hours after walking 18 holes of golf in warm, humid conditions. He denies trauma, bites or recent illness.

On examination, he is afebrile and haemodynamically stable. A symmetrical, non-blanching, purpuric rash is observed on the lower legs, sparing the feet and upper thighs. There is no oedema, tenderness or mucosal involvement (figure 1).

QUESTION

What is the most likely diagnosis?

- A. Meningococcal septicaemia
- B. Leucocytoclastic vasculitis
- C. Golfer's vasculitis (exercise-induced purpura)
- D. Drug-induced purpura

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Figure 1 Rash to patients lower limbs bilaterally.

IMAGE CHALLENGE

Rash following a round of golf

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ANSWER

C. Golfer's vasculitis (exercise-induced purpura)

Golfer's vasculitis is a benign, exercise-induced small-vessel vasculitis triggered by prolonged walking in warm weather, typically in older adults. It presents with symmetrical purpuric or erythematous patches on the gaiter region, sparing the feet and thighs. Also called *hiker's* or *Disney vasculitis*, it resolves spontaneously within days and requires no specific treatment. Laboratory tests are usually normal, and systemic features are absent. The name '*Disney vasculitis*' reflects its occurrence in tourists who develop the rash after long hours walking in hot weather at theme parks, where heat, exertion and leg dependency combine to trigger the reaction.¹

INCORRECT OPTIONS

(A) *Meningococcal septicaemia* is life-threatening, with fever, hypotension and widespread petechiae—all absent here. (B) *Leucocytoclastic vasculitis* often has systemic involvement and broader rash distribution; it is not exertion-related. (D) *Drug-induced purpura* requires recent medication exposure and usually involves widespread rash or systemic features.

Emergency clinicians should recognise this pattern to avoid unnecessary investigations or treatment.

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