Dermatomyositis (DM) is a progressive acquired inflammatory disorder of muscle that also affects the skin. It can afflict both adults and children and typically more females than males. The disease is caused by inflammation of blood vessels in the skin and muscle. The weakness involves muscles closest to the trunk including neck, shoulder, and hip muscles. Uncommonly, swallowing can be affected. Sometimes there is associated pain. The rash of DM is found on the eyelids, cheeks, nose, back, upper chest, elbows, knees and knuckles and can be patchy and reddish or purplish in color. Calcium deposits can also form under the skin. Sometimes the skin rash can occur without weakness, called amyopathic DM. The diagnosis is made by detecting elevations of elevated muscle enzymes in the blood (creatine phosphokinase, i.e. CPK, or aldolase), autoantibodies in the blood such as antinuclear antibodies, abnormalities typical of a muscle disease on EMG/nerve conduction testing, magnetic resonance imaging (MRI) of muscle, and findings on muscle biopsy including inflammation of the muscle. Both skin and muscle biopsies also typically show signs of inflammation of blood vessels (i.e. vasculitis). Treatment consists of medications designed to suppress inflammation including corticosteroids, immunosuppressive therapies like methotrexate and azathioprine, and intravenous immunoglobulin.