



ACNE, ROSACEA, AND RELATED DISORDERS (INCLUDING HIDRADENITIS SUPPURATIVA)

A SYNDROMIC FORM OF HIDRADENITIS SUPPURATIVA

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Background: Hidradenitis suppurativa (HS) represents a chronic inflammatory condition which affects the pilosebaceous units located in the axillary, anogenital or inguinal areas. Rarely, this cutaneous entity may appear in the context of various complex syndromes such as PASH (pyoderma gangrenosum, acne, hidradenitis suppurativa). The syndromic form of HS has a poor response to treatment and a less predictable course.

Observation: We present the case of a 37-year-old patient with a history of hidradenitis suppurativa Hurley III stage for 7 years. He has been consulted for a deep and painful ulcer located on the left leg, with undermined, violaceous borders, which evolved from a violaceous pustule on an erythematous base during one week and whose aspect was suggestive of pyoderma gangrenosum. A previous oral antibiotic course was without any benefits. He also had severe acne vulgaris in the past, with atrophic scars at the current consult.

A histopathological examination of the undermined ulcer confirmed pyoderma





gangrenosum. The sudden appearance of this entity in a patient previously diagnosed with hidradenitis suppurativa and acne pointed towards PASH syndrome. The patient received oral prednisone (0.8 mg/kg per day with a slow reduction of the dose), salazopyrin (2 g per day) and topical steroids for the ulceration, which led to a complete remission of pyoderma gangrenosum after 5 months. In the next 5 months the disease remained stable.

Key message: This remarkable association of hidradenitis suppurativa with acne and pyoderma gangrenosum may lead to a better understanding of neutrophil mediated cutaneous diseases. Although rare, PASH syndrome cases can reveal new meanings regarding innate immune disorders and autoinflammation.

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