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

MORBIHAN SYNDROME: CASE PRESENTATION IN A MEXICAN MAN

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Background: Morbihan syndrome is a rare entity whose exact prevalence is unknown. Its pathophysiology is not well established, but it is considered a clinical variety of acne and rosacea. It has been described as typically affecting both sexes of caucasic race. It presents as a persistent erythema and solid facial edema which can lead to disfiguration. It is considered an exclusion diagnosis and appropriate investigations should be carried out, based on an extensive clinical history. Many treatment options based on systemic drugs over long periods of time have been suggested.

Observation: We present the case of a 38-year-old, male patient, resident to Mexico City with an occupation as a shoe shiner, Fitzpatrick skin phototype V. The only relevant history was a long-time severe acne with no previous treatment. On physical examination he presented a localized dermatosis, affecting the face upon the glabella, upper and lower eyelids, and bilateral buccal region; constituted by intense solid edema, slight erythema, some hyperchromic macules with diffuse borders and multiple atrophic scars. Further blood examinations revealed no abnormalities. A skin biopsy described suggestive findings of Morbihan syndrome and the diagnosis was made. Medical treatment was started with doxycycline and prednisone showing slight improvement and was modified to low dose isotretinoin and reduction of the prednisone, with a marked clinical improvement.

Key message: This case is of clinical relevance due to the scarce reports of Morbihan syndrome in darker skin phototypes as well as the marked clinical improvement the patient showed with the established treatment.