AUTOIMMUNE CONNECTIVE TISSUE DISEASES

EOSINOPHILIC FASCIITIS

D Bermúdez Boedo [1] - A Guerra Zambra [2]

Médica Uruguaya, Dermatología, Montevideo, Uruguay [1] - Hospital De Clínicas, Cátedra De Dermatología, Montevideo, Uruguay [2]

Background: Eosinophilic fascitis (EoF) is a Sclerodermiform syndrome of unknown etiology. It is characterized by the thickening of the subcutaneous tissue and muscular fascia, which causes induration and sclerosis of the skin. Its etiology is unknown.

Observation: 56-year-old male, hypertensive in treatment with Amlodipine, was sent for assessment by dermatology. Physical examination showed a cutaneous rigidity with edema by sectors in the distal section of arms, forearms and hands. It also presents difficulty in the extension of forearms, and extension and flexion of fingers. Normal capillaroscopy and no sclerodactyly. He denied recently physical effort, trauma or exposure to toxic substances, solvents and herbicides.
Soft tissue ultrasound showed panniculitis. A skin biopsy was performed, which showed thickened collagen in the interlobular septum and few inflammatory infiltrate, with the presence of plasma cells. The analysis in search of autoimmune diseases and neoplasms were normal. The clinic and the findings in the biopsy led us to the diagnosis of Eosinophilic Fascitis.
The patient was treated with Methotrexate with significant improvement in skin thickening and movility.

Key message: The low frequency and little knowledge of this entity motivated us to present this clinical case. Treatments reported in literature are not satisfactory at all. Our patient showed a very good evolution with Methotrexate, with improvement in his quality of life.