



DERMATOPATHOLOGY

ACNEIFORM LIKE CUTANEOUS ROSAI-DORFMAN DISEASE SUCCESSFULLY TREATED WITH METHOTREXATE

Songmei Geng⁽¹⁾ - Hongmei Zhou⁽¹⁾ - Qiang Zhao⁽¹⁾ - Lihong Zhao⁽¹⁾ - Qian Shang⁽¹⁾

Department Of Dermatology, Northwest Hospital Affiliated To Xi'an Jiaotong University, Xi'an, China⁽¹⁾

Background: Cutaneous Rosai-Dorfman disease (CRDD) is an unique entity distinct from systemic Rosai-Dorfman disease without lymphadenopathy or system organs involvement. The CRDD presented with striking acneiform lesions is rarely reported.

Observation: A healthy 28-year-old man presented with multiple brownish red papules on his face and scalp for 3- months. His general condition was good and denied allergy and trauma history. Physical examination revealed clusters of brownish red papules, partially coalesced into verrucous plaques spreading on his both check, forehead, nose and nearby scalp with eyelid and perioral area spared. No prominent enlargement of lymph nodes and abnormality of internal organs examination were found. Laboratory routine analyses, including blood cell count, biochemical tests, serum lipoprotein profile and ultrasound scan were all in normal range. A biopsy of skin lesion showed nodular dense mixed infiltrate of mainly histiocytes, lymphocytes and few neutrophils throughout dermis. Emperipolesis were noted. Immunohistochemical staining revealed S-100 (+), CD68 (+), CD1a (-), PAS (-). Acid-fast staining primarily excluded bacillus infection. Based on clinical feature and histopathology findings, the diagnosis of cutaneous Rosai-Dorfman disease was made. The patient was firstly given therapy of oral methylprednisolone 30mg/d for two weeks but no obviously response, then methylprednisolone was stopped after oral methotrexate 15mg weekly was taken. The Patient responded very well after 1 month treatment and obtained remarkably remission after 6 months ttherapy. No adverse effect was complained.

Key message: Acneiform like CRDD is rarely reported and should be uncommon feature of CRDD . Methotrexate has been reported to be effective in treating systemic Rosai-Dorfman and CRDD in few cases with partial or complete remission. Our patients also obtained remarkably remission and further follow-up should be done.

