



INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

A CASE OF ACRODERMATITIS OF HALLOPEAU TREATED WITH SECUKINUMAB

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Background: Acrodermatitis continua of Hallopeau is a rare skin condition, characterized by chronic and recurrent pustular eruptions, onychodystrophy and osteolysis of the distal phalanges of hands and feet. Some authors classify this dermatosis as a variant of pustular psoriasis, others as a separate condition altogether. The treatment of this condition is still problematic, due to the absence of specific guidelines.

Observation: We describe the case of a man in his thirties who, for about 20 years, has been affected by pustular eruptions to the distal phalanges of the fingers, arthralgia and erythematous-desquamative patches on the elbows and the nape. The patient had previously received therapies with acitretin, cyclosporine, methotrexate, etanercept and several topical treatments, with poor results and a negative impact on the quality of life. Following the histopathological confirmation of acrodermatitis of Hallopeau – and after a muscle-tendon ultrasound showing a bilateral peritendinitis of the extensor muscles of the fingers – it was decided to treat the patient with the biological drug secukinumab, in accordance with the label: two 150 mg vials SC at weeks 0, 1, 2, 3 and 4, followed by two 150 mg vials SC every month. The patient was evaluated according to the NAPS (Nail Psoriasis Severity Index). NAPS value at baseline was 14; at the first check – after 16 weeks of treatment with secukinumab – a 40% improvement was observed, which increased to 60% after 32 weeks. Two years after the start of treatment, NAPS is 4.2, and the psoriatic skin lesions present at the beginning of the therapy have disappeared.

Key message: Two years after the start of therapy with secukinumab, psoriatic skin lesions are absent, the algic symptomatology has resolved and the patient has found serenity in his interpersonal relationships.

