INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

BULLOUS PYODERMA GANGRENOSUM WITH HASHIMOTO'S THYROIDITIS - A CASE REPORT

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Background: Pyoderma Gangrenosum (PG) is a neutrophilic dermatosis that most comonly presents as ulcerative skin lesions. However, it can also present as bullous, pustular and vegetative lesions. The histological findings of bullous variety sometimes overlap with features suggestive of Sweet syndrome.

Observation: We report a 54-year-old lady who presented with fluid filled tense blisters on dorsa of both hands for one week. She was a known case of longstanding Hashimoto's Thyroiditis but clinically and chemically euthyroid. The lesions first appeared over the index and middle finger of right hand, within one day underwent a bluish color change and then hemorrhagic. Spread to the left hand occured rapidly. There was no fever or any other feature suggesting Sweet syndrome. The blister fluid was negative for any growth. All the baseline laboratory workup came out to be within normal limits and without any evidence of raised acute phase reactants. Biopsy sample for histopathology revealed an acanthotic epidermis along with spongiosis and neutrophilic infiltration. There were sub epidermal blisters and the dermis was edematous with dense neutrophilic infiltrate and some lymphocytes. A diagnosis of Bullous Pyoderma Gangrenosum was made based on clinical and pathological findings. She was started on systemic steroids at 0.5 mg/kg/day and Dapsone 50 mg daily. She showed marked improvement of the leions two weeks later.

Key message: As per literature search, the association of Bullous PG with Hashimoto's Thyroiditis is not previously reported, to the best of our knowledge. Furthermore, our case is also unique in that our patient developed bullous PG when she was euthyroid completely. Till date there are many studies suggesting bullous PG to myeloproliferative disorders, inflammatory bowel disease or connective tissue disorders but none supports the association as presented in our case.