



INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

INFREQUENT CLINICAL VARIANTS OF LICHEN PLANUS.

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Background: lichen planus (LP) is a benign inflammatory disease with characteristic clinical and histopathological findings. It presents multiple clinical variants that occur less frequently than the classical form, so identifying them is very important for their correct diagnosis and treatment.

Observation: we present a series of patients with three variants of LP evaluated in our department.

The first patient was a 42-year-old male with a history of hypothyroidism who presented a pruritic dermatosis that had developed one month prior to consultation. He exhibited erythematous violaceous macules with scaly edges located on his trunk and intertriginous areas. Histopathology showed a lichenoid dermatitis. Diagnosis of LP pigmentosus inversus was made and he was treated with topical steroids with a partial response.

The second patient was a 38-year-old female with a history of autoimmune thrombocytopenic purpura who presented a pruritic dermatosis that started one month prior to consultation. It was characterized by annular plaques with raised erythematous edges and depressed hyperpigmented brownish centers. Histopathology demonstrated a lichenoid dermatitis. Diagnosis of annular LP was made, and she was treated with topical steroids with a good response.

The third case was a 50-year-old female who developed a pruritic generalized dermatosis three months prior to consultation. It comprised multiple erythematous violaceous annular plaques on trunk and limbs, associated with some tense bullae and erosions that arose both on normal skin as well as on the plaques. Histopathology of a plaque exhibited a lichenoid dermatitis, and the one corresponding to a bulla showed a subepidermal blister with mild eosinophilia. Direct immunofluorescence of perilesional normal skin demonstrated a linear deposit of C3. LP pemphigoides diagnosis was then made and she started therapy with meprednisone 0.5 mg/kg/d orally with an excellent response.

Key message: LP can manifest in diverse clinical variants that represent a diagnostic and therapeutic challenge.

