INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

LICHEN MYXEDEMATOSUS : A RARE ENTITY ABOUT ONE CASE .

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Background: Lichen myxedematosus (LM), also called papular mucinosis, is classified into 3 broad subsets, depending on the degree of cutaneous sclerosis, systemic involvement, and existence of paraproteinemia to (1) generalized papular and sclerodermoid, (2) localized LM, and (3) atypical forms. We report here a case of localized LM with both the clinical and histopathological described criteria.

Observation: A 35-year-old man, without medical history, presented with pruritic eruption of 2 month's duration. Upon examination, multiple 2 to 4 mm discrete, whitish– colored papules without scales were present on the patient's back and bilateral axillary fold. There were no other similar lesions on the rest of the body. The histologic examination showed a normal epidermis with deposit of mucin in the papillary and upper reticular dermis. There was an increased spacing between collagen bundles, but the number of fibroblasts was not increased. Laboratory investigations were normal. Serology tests for human immunodeficiency virus, and hepatitis B and C viruses were all negative. The patient was treated with topical corticosteroid with good improvement.

Key messages: Papular mucinosis is an idiopathic cutaneous disorder characterized by lichenoid papules, nodules and/or plaques due to mucin dermal deposition, and a variable degree of fibrosis without thyroid dysfunction. The criteria for diagnosing the subset of localized LM requires a firm, opalescent papular eruption, without scleroderma, deposits of mucin with low fibroblast growth, absence of paraproteinemia, and absence of thyroid dysfunction. As it is self-limited to the skin and have very little or no morbidity, some experts believe that this disorder is unnecessary to treat. However, It is important for the clinicians to exclude any possible underlying disease such as gammopathies or HIV infection in such cases.