INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

PAPULOERYTHRODERMA OFUJI

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Background: Papuloerythroderma, described for the first time by Ofuji in 1984, is characterized by the occurrence of polygonal, erythematous-brown papules, covering the entire skin surface, except skin folds (Deck-chair sign); these changes are accompanied by pruritus and eosinophilia.

Observation: We present a case of a 65-year-old female patient with debilitating pruritic and blistering eruption involving the chest, abdomen, trunk and extremities for the last 2 weeks. The patient reported past anamnesis for melanoerythroderma that has been intensifying since 2003 to 2006. No triggering factors were identified in the course of hospitalizations. The molecular gene examination of fusion genes rejects the possibility of chronic eosinophilic leukemia or other myeloproliferative disease.
The diagnosis of papuloerythroderma of Ofuji was established on the basis of major and minor criteria proposed by Torchia et al. The patient met all the five major criteria: 1) erythroderma-like eruption formed by coalescence of flat-topped, red-to-brown papules with a cobblestone-like appearance, 2) itch, 3) sparing of skin folds and creases, 4) histopathological exclusion of cutaneous lymphoma and other skin diseases, 5) absence of the causative factors such as tumors, infections, drugs and atopy. Regarding the 5 minor criteria, the patient met the following three: 1) peripheral and tissue eosinophilia, 2) over 55 years of age, 3) lymphopenia.

Key message: The patient went into remission after 6-month treatment with cyclosporine at a daily dose of 100 mg.