



INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

## PYODERMA GANGRENOSUM WITH GOOD RESPONSE TO DAPSONE THERAPY: CASE REPORT

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**Background:** Pyoderma gangrenosum (PG) is a rare, chronic, ulcerative neutrophilic dermatosis. It is characterized by ulcerated cutaneous lesions with raised and painful borders. It usually affects lower limbs and gluteous. Etiology is unknown. Most cases (50-70%) are associated with an inflammatory bowel, rheumatoid arthritis and others. Most patients improve with immunosuppressive therapy and require minimal care after healing. However, several cases may be refractory requiring long-term care. Male, 43 years old, presented with erythematous papules on the right flank, which progressed to ruptured nodules and multiple ulcerations, with local pain. He started the treatment at another service with prednisone 80 mg/day for 5 months, without improvement. Biopsy showed inflammatory infiltrate in superficial and deep perivascular areas, fibrosis and exuberant granulation tissue with predominance of plasma cells and lymphocytes. Abdominal magnetic resonance, protein electrophoresis and colonoscopy demonstrated non-association with other diseases. After 10 months, dapsone 100mg AND activated charcoal dressing were introduced daily associated with biweekly debridement with 70% trichloroacetic acid. A good response was obtained with wound healing after 2 months.

**Observation:** Histopathological characteristics of PG are not specific. Neutrophils are considered a marker of pyoderma gangrenosum. In general, PG diagnoses is by exclusion, because it does not have specific criteria. There is no consensus on gold standard treatment, systemic corticosteroids are considered the most effective method. Other options are azathioprine, clofazimine, dapsone, cyclosporine and infliximab. It is suggested that dapsone acts by limiting the necrosis process, allowing reepithelialization.

**Key message:** PG is a severe disease and difficult to treat despite OF the long list of options for inflammation control. Dapsone is considered class C therapy (experimental use) in pyoderma gangrenosum. Currently standard treatments are not always succesfull and development of new studies to establish other therapeutic options and better responses is still a challenge.

