INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

RARE VARIANT OF LICHEN PLANUS ACTINICUS – A CASE REPORT

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Background: Lichen planus actinicus is considered to be a photodistributed variant of lichen planus. It has usually been described in individuals with dark complexion, predominantly in the Middle East or tropical area. Several morphologic variants have been described –annular, pigmented and dyschromic. Diagnosis is made based on the distribution (sun-exposed areas) along with biopsy findings. There is a broad choice of treatment – topical corticosteroids, pimecrolimus, cyclosporine, antimalarials, but it is hard to find the one option that clears the skin completely or stops the relapse.

Observation: We report a case of a middle-aged man, Fitzpatrick skin type III/IV, who presented to the office in the late spring because of the lesions that appeared about a year ago and now were worsening. The biopsy was performed that showed interface dermatitis, in conclusion, differential diagnoses were Actinic lichen planus and Lichenoid type of lupus erythematosus. Laboratory findings were all within the normal range, including negative antinuclear antibodies, so Lupus was excluded. The treatment was started with daily application of 0,1% topical pimecrolimus without any effect so pimecrolimus was omitted. Hydroxychloroquine was included in the treatment and the patient is due for check-up.

Key message: Lichen planus actinicus is rare variant of lichen planus that is also very hard to treat. Differential diagnoses include lupus erythematous, polymorphic light eruption, melisma and erythema dyschromicum perstans. Although some treatments have showed good therapeutical results, relapses are common.