INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

SUBCORNEAL PUSTULAR DERMATOSIS: A CASE REPORT

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Background: Subcorneal pustular dermatosis SPD, first described by Sneddon and Wilkinson in 1956, is a rare, chronic, recurrent pustular eruption with unknown etiology. The exact nosological classification of the disease is still controversial. It usually develops in middle-aged or elderly women and is only rarely seen in childhood and adolescence.

Observation: We report the case of a 17-year-old girl who developed a pruritic eruption involving symmetrically the intertriginous areas, trunk and extremities. The lesions consisted of multiple coalescing flaccid pustules with annular and circinate pattern. Routine laboratory investigations were within normal ranges and no abnormalities were found by serum and urine electrophoresis and immunofixation. The histology revealed a subcorneal pustule formation, containing neutrophils and inflammatory infiltration of the dermis. Direct immunoflorescence on perilesional skin was negative. Systemic methylprednisolone 40mg/day and dermocorticoids were temporarily effective but the condition relapsed upon tapering the dose. The patient did not respond to treatment with acitretin 25mg/day, as well. On the contrary, the disease responded dramatically to dapsone 100mg/day. Approximately ten days after the initiation of dapsone the lesions had almost completely regressed.

Key message: This case represents a rare and distinguishable clinical picture of SPD in an adolescent patient successfully treated with dapsone. It also highlights the requirement of long-term follow-up of patients with recurrent SPD.