



INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

SUCCESSFUL TREATMENT OF ACTINIC GRANULOMA WITH TOPICAL PIMECROLIMUS

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Background: Actinic granuloma (AG) is an asymptomatic granulomatous reaction towards extended continuous sunlight exposure presenting clinically as papules that may coalesce into annular plaques with raised borders and slightly atrophic centers. AG is commonly found in females aged between 40 and 70 years old. AG therapy often elicits disappointing results. Until now, no official therapeutic consensus on AG has been agreed upon. The objective of this report is to discuss a rare case of actinic granuloma successfully treated with topical pimecrolimus 1%.

Observation: A 66-year-old female, presented with a 4-year history of erythematous plaques with a raised border and an atrophic center on her face. Over time, the lesions gradually increased in number and slowly extended centrifugally as annular erythematous plaque with a raised border and an atrophic center on face. A skin biopsy showed a lymphohistiocytic infiltrate, surrounding solar elastosis, without apparent palisading, necrobiosis, or mucin deposition. Increased elastin fibers were notable findings that supported a diagnosis of actinic granuloma. The precipitating factor was exposure to sunlight. The patient was advised to reduce exposure to sunlight and apply sunscreen. Treatment regimen consisting of topical pimecrolimus 1% cream (applied twice daily) was initiated. By day 14, there was significant improvement concerning the skin lesions.

Key message: Topical pimecrolimus 1% produced a favorable response with no side effects, and leading to long-term remissions.

