

INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

SUCCESSFUL TREATMENT OF CHRONIC ACTINIC DERMATITIS WITH THALIDOMIDE

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Background: Chronic actinic dermatitis (CAD) is a rare, impairing dermatoses characterized by abnormal photosensitivity to ultraviolet and frequently visible wavelengths. It usually presents as dermatitis of mainly chronically sun-exposed skin typically occurring in older men of any ethnicity. Treatment is difficult and not standardized. We report a case of recalcitrant CAD successfully treated with thalidomide.

Observation: A 52-year-old healthy man presented with a 12-year history of a photosensitive eczematous eruption. Based on the history, clinical picture and results of the diagnostic procedures, he was diagnosed with CAD. Twelve years ago, the patient had extremely severe chronic eczematous dermatitis develop on sun-exposed skin involving the face, scalp, forearms, and the back aspect of the hands. The eruption was present year round with significant worsening in the summer. Skin biopsy showed a dense dermal infiltrate of T lymphocytes CD4, CD81 with epidermal hyperplasia. Phototesting showed decreased minimal erythema doses to both ultraviolet A(2J/cm2)UVB(50mJ/cm2). Therapy with sunscreens, topical and oral corticosteroids, methotrexate and cyclosporine was unsuccessful. Therefore, the patient was placed on a regimen of oral thalidomide (100 g/day). At 3 months, the clinical course of the patient showed a slow but dramatic response to this therapeutic regimen. The patient experienced no drug-related side effects.

Key message: Patients with CAD have an abnormal sensitivity to UV light. This condition varies in severity and can be severely disabling. In severe cases, systemic treatment with PUVA,cyclosporine and MMF has been used. However, a minority of patients have refractory disease with systemic treatments. In our cases, a suitable alternative to conventional immunomodulator was needed. Thalidomide has been successfully used in several inflammatory dermatoses with photosensitivity, especially prurigo nodularis. Although thalidomide possesses immunomodulatory and anti-inflammatory properties, its precise mechanism of action is unknown. However the risk of peripheral neuropathy and teratogenesity limit its usage.





