INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

SUPERFICIAL GRANULOMATOUS PYODERMA OF FACE: A RARE ENTITY

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Background: Superficial granulomatous pyoderma is a rare, chronic, inflammatory disease of unknown etiology. It differs from classical pyoderma gangrenosum by virtue of its slow growth, lack of systemic association, granulomatous inflammation in histopathology, good response to steroids and better prognosis. The lesion is usually single, non-tender, superficial ulcer that is well defined with vegetating granulation. Site of predilection is usually trunk, however cases with facial involvement have been reported. These cases with facial involvement respond poorly to conventional anti-inflammatory treatment and require more aggressive immunosuppressive therapy.

Observation: Thirty-five years male presented with 8 months history of spontaneous onset erythematous papule gradually enlarging to form a crusted plaque over the left infra-orbital region. The lesion was largely asymptomatic. On removal of crust, shallow ulcer with clean base was visualized. Histopathology revealed intra-epidermal and dermal neutrophilic microabscesses with dense lymphocytes and plasma cells and vague aggregates of histiocytes and Langhan's type of giant cells. The case was diagnosed as deep mycosis. Following lack of satisfactory response to saturated solution of Potassium iodide and itraconazole over 6 months, repeat biopsy and additional investigations were done. Revised diagnosis of superficial granulomatous pyoderma was made and the patient was successfully treated with oral prednisolone and dapsone.

Key message: The case is being reported due to its rarity, moreover, due to its potential to mimic various granulomatous conditions, especially mycobacterial and deep fungal infections that are the usual suspects of granulomatous inflammation in this part of the world.