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INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

SWEET SYNDROME AFTER ORTHOPEDIC SURGERY

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Background: Sweet syndrome is an inflammatory disorder characterized by the abrupt appearance of edematous, erythematous to violaceous plaques accompanied by fever and leukocytosis and characterized by a dense neutrophilic infiltrate on histology. Cytokine dysregulation is thought to contribute to its pathogenesis.

Case report: 68-year-old woman presented 1 week after her total hip replacement with bloody drainage from the incision site. She was admitted for an incision and drainage of a suspected wound hematoma which was noted to be complicated by marked leukocytosis and fevers. This was presumed to be from prothesis infection, and the patient underwent explantation and antibiotic spacer insertion the following day. Despite broad antibiotics and negative tissue cultures, the patient developed exquisitely tender violaceous lesions around the incision site with persistent leukocytosis to over 30,000 with neutrophilic predominance and spiking fevers. Punch biopsy revealed neutrophilic dermatitis negative for microorganisms, correlating with Sweet syndrome. Patient was treated with systemic steroids, leading to improvement in her wound and normalization of her fever and leukocytosis. Workup for underlying hematologic malignancy or inflammatory bowel disease was negative.

Discussion: Sweet syndrome can be associated with malignancy, drug-induction, or an idiopathic etiology. The association with orthopedic surgery has not been widely reported. Clinicians must maintain a high level of suspicion for Sweets in the setting of a suspected post-operative wound infection without an identifiable causative organism or response to broad antibiotic coverage. Identification of Sweets in the post-surgical setting is critical to avoid further surgical intervention and propagation of disease due to pathergy.





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