



INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

TREATMENT OF LUPUS MILIARIS DISSEMINATUS FACIEI

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Background: Lupus miliaris disseminatus faciei (LMDF) is a rare skin disorder of unknown etiology.

Objective: Our goal was to evaluate the efficiency of several treatments in LMDF.

Materials and Methods: A retrospective study of cases of LMDF was undertaken (Jan.2008-Aug.2018). The diagnosis of LMDF was based on the clinical and histological findings.

Results: Six patients with a mean age of 35.3 (23 to 60) were included. A male predominance was found with a sex-ratio of 5. The mean duration of lesions was 80days(range,30-150). Erythematous papules were noted in all cases, pustules in 2cases, nodules in 1case and lupoid aspect in 2 cases. Lesions were localized on the cheeks(6cases), lower eyelids(3cases), eyebrow region(1case), upper lip(1case), ear(1case) and back of the hands(2cases). Suspected diagnoses were: papulonecrotic tuberculid(3cases), demodecidosis(1case), rosacea(1case) and sarcoidosis(1case). Histology showed granulomatous dermal infiltration in all cases associated with caseous necrosis in 4cases. Ziehl-Neelson's and PAS's stains were negative. Several treatments have been used: combination of doxycycline and metronidazole for 2months(3cases), hydroxychloroquine(HC) for 2-12months(3cases), dapsone for 6months(1case) and crotamiton for 4months(1case). One patient refused any treatment. Regression of lesions was noted 2months after the onset of HC in 2cases and dapsone in 1case. Complete regression of lesions was obtained after 6-12months of the beginning of the disease leaving depressed scars in all cases.

Conclusions: LMDF affects young adults with male predominance. Extrafacial involvement is rare. Only a few cases with involvement of back of the hands have been reported (33% in our series). Though numerous therapies have been tried, results are inconstant. Our study shows that HC and dapsone can be effective. The effectiveness of HC has not been reported. However, other studies have shown that dapsone decreases the duration of the





LMDF course. Otherwise, spontaneous regression leading to depressed scars casts doubt on the real effectiveness of treatments.

