



PSORIASIS

A CASE OF ADULT FILIPINO MALE PRESENTING WITH COLOCALIZED PSORIASIS AND SEGMENTAL VITILIGO

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Background: Vitiligo and psoriasis are common dermatoses with autoimmune pathomechanisms. There are numerous case reports on the coexistence of these two conditions but only a few have reported the colocalization of both lesions. Moreover, to our knowledge, only one case of concurrent segmental vitiligo and plaque type psoriasis has been documented. Several theories have been put forward however the exact pathogenesis of the association between these two remain unknown.

Observation: We report a 29 year-old male presenting with a four year history of recurrent pruritic erythematous scaly annular and irregularly-shaped plaques and papules on the trunk and face. There was no arthralgia. This was followed by the appearance of confluent depigmented macules and patches over the right hemiabdomen extending to the back with abrupt midline demarcation. Family history was positive for psoriasis and vitiligo. Histopathologic examination from specimens taken from the erythematous plaque and depigmented patch confirmed the diagnosis of psoriasis and vitiligo respectively. The patient was treated with topical steroids, topical tacrolimus and emollients along with narrowband ultraviolet B (UVB) phototherapy for two months resulting in marked improvement of the psoriatic lesions but no change in the depigmented patch.

Key Message: Segmental vitiligo can occur together with chronic plaque psoriasis. Segmental vitiligo poorly responds to topical therapy and phototherapy. The combination of topical steroids and narrowband UVB is effective in the treatment of psoriatic lesions.





