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PSORIASIS

CASE REPORT: PUSTULAR PSORIASIS CONFUSING WITH ACUTE GENERALIZED EXANTHEMATOUS PUSTULOSIS (AGEP)

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Background: Pustular psoriasis and Acute Generalized Exanthematous Pustulosis (AGEP) are grouped under pustular diseases, in which their clinical manifestations are similar. It is often hard to differentiate between the pustules in pustular psoriasis and AGEP unless thorough history-taking and physical examination are done. AGEP is characterized with a widespread of pustules with an acute febrile onset; while pustular psoriasis is an acute variant of psoriasis where pustules are spread over erythematous skin and accompanied with high fever and leukocytosis.

Observation: A 55-year-old woman presented with sudden redness and diffused scaly skin with multiple pustules in some parts of the body. She also had a fever. The patient said that she had taken cefadroxil 2 days before the scales and pustules appeared. Laboratory examination showed leukocytosis (13,5 x 103 /μL) and histopathological examination from biopsy supported the diagnosis of AGEP. The patient was then hospitalized and received steroid therapy. Within the first week of tapering off, the scales disappeared but the pustules' numbers increased. After these clinical findings, the histopathological examination, and the new histopathological examination results. Psoriasis workup was done and the therapy was switched to Methotrexate. The Patient had a better outcome, and within three weeks the pustules slowly disappeared entirely.

Key message: The Gold standard for establishing pustular psoriasis is by histopathological examination. However, sometimes mistakes could also come from histopathological examination. The histopathological characteristics of Pustular Psoriasis and AGEP are difficult to differentiate. Therefore, we need sharp history-taking and detailed physical examination to establish the diagnosis.





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