



PSORIASIS

ZINC AND PSORIASIS

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Background: A 70 year old type 2 diabetic man with left hemiparesis presented with a progressive worsening of his chronic psoriasis (PASI 15), interesting mainly groins and both hands. Treatment with methotrexate/folic acid was initiated. Blood monitoring at four weeks revealed severe anaemia (Hb 7.5 g/dL). Patient required admission for blood transfusion and methotrexate treatment was stopped.

Observations: Examination of the skin showed large erythematous scaly plaques with neat borders on pubis, inguinal areas and both hands, with face and feet affected to a lesser degree. Smaller plaques were observed on elbows, knees and lumbar region as well (PASI 18). The pattern of distribution resembled the one described in acrodermatitis enteropathica: zinc levels were measured and resulted significantly low (20 mcg/dl, normal range 70-120). Oral zinc supplementation was commenced with significant clinical improvement of the skin lesion within one week. Ciclosporin was subsequently started and well tolerated.

Key message: There is little evidence supporting the use of oral zinc supplements for the treatment of psoriasis. However in the reported case the acquired acrodermatitis enteropathica elicited Koebner phenomenon in psoriasis, also known as isomorphic response.

