



SEXUALLY TRANSMITTED INFECTIONS, HIV/AIDS

ATYPICAL MANIFESTATIONS OF SECONDARY SYPHILIS IN A YOUNG MAN WITH HUMAN IMMUNODEFICIENCY VIRUS COINFECTION MIMICKING GRANULOMATOUS DISEASE

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Background: Worldwide, syphilis affects more than 36 million people, with 10 million new cases every year. The incidence of syphilis is higher in patients coinfecting with HIV, specially in men who have sex with men (MSM). Studies have shown that up 29.6% of cases have atypical manifestations, mimicking other entities and hindering diagnosis. Patients with HIV infection may have a longer illness, constitutional symptoms and more frequent atypical manifestations. Unusual manifestations can also occur, such as multiple genital chancre, oral pseudotumoral chancre, vesiculobullous and ulcerative forms, corymbiform, nodular and psoriasiform lesions and unusual gummas locations. In HIV positive patients, the diagnosis of syphilis may be difficult.

Observation: We show a case of 24 year-old man with six months history of disseminated polymorphic dermatosis that involves nose, trunk, limbs and soles consisting on multiple nontender, nonpruritic, erythematous papules, nodules and infiltrated appearance plaques some covered by a whitish and thick scale. Previous unsuccessful treatment included non specified antibiotics. The patient reported that he had an episode of secondary syphilis two years ago and the recent VDRL test was negative. Additionally we decided to perform HIV test resulting positive. Histopathological examination showed diffuse and dense mixed inflammatory infiltrate (lymphocytes and plasma cells) in the upper and deep dermis. In the presence of negative microorganism stains. The specimens were analysed for molecular techniques resulting positive for *Treponema pallidum*.

Key message: We present this interesting case not just for the diagnostic challenge not the difficulty of the case, but to remember the abrupt increase of the incidence and prevalence of syphilis on MSM on recent times and the higher risk of coexisting with HIV, things that we need to investigate and document as dermatologists to suspect and focus on the variety of atypical manifestations of any sexually transmitted diseases.

