



SEXUALLY TRANSMITTED INFECTIONS, HIV/AIDS

## LEONINE-LIKE FACIES IN SYPHILIS: A RARE MANIFESTATION

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Background: Leonine facies is rare manifestation that corresponds to the diffuse dermal infiltration of the face. Classically described for lepromatous leprosy, it has also been reported associated with amyloidosis, cutaneous lymphoma, mastocytosis among others. However, there are very few records of this manifestation in syphilis. This infectious disease is caused by *Treponema pallidum* and transmitted through sexual contact, vertically, or blood transfusion. It has polymorphic clinical presentation depending on the time of infection and stage. In this presentation we report a case of Leonine-like facies in syphilis mimetizing leprosy.

Observation: 36 years old female, from Rio de Janeiro, was referred to a Hansen's disease center to investigate leprosy due to generalized pruritus and xerosis. The symptoms had started thirty days before. Physical examination revealed leonine-like facies, generalized cutaneous infiltration and xerosis, total eyebrow madarosis (Fournier's sign), areas of non-cicatricial alopecia in the occipital region, palmoplantar erythematous maculae with peripheral desquamation (Biett's colarete), as well as brownish plaques with a scaly appearance. The following tests were performed: bacilloscopy (negative), non-treponemal test (VDRL) with a result of 1/1024 (positive), FTAabs (positive). Posterior examination of the cerebrospinal fluid showed positive VDRL and HIV. Secondary syphilis was diagnosed with associated asymptomatic neurosyphilis and HIV/AIDS.

Key message: Immunocompromised HIV/AIDS patients may present atypical clinical manifestations in case of coinfection with syphilis. Moth-eaten alopecia, madarosis and macules with peripheral palmoplantar desquamation are common in the secondary stage, even in immunocompetent patients. Leonine facies is a characteristic manifestation of lepromatous leprosy, and rare in syphilis. Thus, the differential diagnosis with leprosy, an endemic disease in Brazil, is extremely important. The present case emphasizes the need for a careful examination, observing the patient as a whole, highlighting the suspicion for syphilis even in the presence of unusual manifestations, due to the mimetizing nature of this pathology.

