SKIN MANIFESTATIONS OF INTERNAL DISEASE

EPIDEMIOLOGICAL AND CLINICAL PATTERNS OF PYODERMA GANGRENOSUM IN TUNISIA

S Boufarguine [(1)] - Rima Gammoudi [(2)] - H Gharbi [(2)] - Lobna Boussofara [(2)] - M Belkahla [(2)] - W Saidi [(2)] - A Aounallah [(2)] - S Mokni [(2)] - C Belajouza [(2)] - R Nouira [(2)] - M Denguezli [(2)]

Farhat Hached University Hospital, Dermatology, Sousse, Tunisia [(1)] - Farhat Hached University Hospital, Dermatology, Sousse, Tunisia [(2)]

INTRODUCTION: Pyoderma gangrenosum (PG) is a rare ulcerating skin disease categorized into the spectrum of neutrophilic dermatoses, often associated with inflammatory bowel disease, rheumatologic diseases, hematologic disorders and malignancy.

OBJECTIVES: Analyzing the epidemiological, clinical profile and pathological association in Tunisian patients.

MATERIAL AND METHODS:Retrospective study of patients diagnosed with PG in dermatology department of Farhat Hached university hospital.

RESULTS: In total, 30 patients with PG were identified (16 males, 14 females), with median age of 31,6 (4-73 years). Pediatric forms represented 33 % of the cases. Ulcerative PG was the most common variant (83%). The commonest site of PG occurrence was the lower limbs (69%). Lesions were localized also to the head (24%), the perineum (21%) and oral mucosa (2 patients). Two-third of patients had multiple PG. Associated systemic diseases were observed in 55%: Inflammatory bowel disease (17%), myeloid malignancy (3cases), solid organ malignancies (2 cases), Takayashu arteritis(1 case), infections (hepatitis B and tuberculosis) (2 patients), PAPA syndrome in a teenager and immune deficiency in 3 children (defective expression in MHC class II (1 case) and Common variable immunodeficiency (2cases). Systemic corticosteroids were prescribed as first line treatment in 40%. In one third of patients, steroids were associated to another treatment (colchicine, dapsone, ciclosporin, thalidomide). Recurrences
were observed in 38% in a median time of 24 months.

CONCLUSION: Unlike previous reports, male predominance and younger average were observed in our study. Predominance of the ulcerative PG, preferential localization to lower limbs, relatively high recurrence rate and percentage of association with systemic disease were in accordance with the literature. Unusual localization and disseminated nature of lesions can be explained by the younger average of our patients; these atypical features are

more common in pediatric age. Looking for associated systemic disease is crucial in PG.