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MULTIBACILLARY HANSEN'S DISEASE DISGUISING AS A SOLITARY NODULO-ULCERATIVE GROWTH IN POST -ELIMINATION PERIOD: A CASE REPORT.

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Background: Multibacillary leprosy or lepromatous leprosy presents as generalized skin disease affecting peripheral nerves and skin with diffuse, fine or gross infiltrations. Solitary nodulo-ulcerative lesion in multibacillary leprosy is a rare occurrence and is easily misdiagnosed especially in this post -elimination period of leprosy, and hence is worth reporting.

Observation: A 39-year- old male, farmer by occupation, presented with a single asymptomatic nodule with episodic discharge on right leg since six months which was gradually progressing in size. There was no history of trauma and symptoms suggestive of systemic illnesses. On examination, there was a soft non tender mobile nodule of 1.5X1.5 cm with central ulceraton on anteromedial aspect of right lower leg five cm above the medial malleolus. Initially, biopsy of the lesion showed mixed lymphohistiocytic infiltration with ill-defined granulomas in dermis and aggregates of neutrophils in epidermis. A provisional diagnosis of deep mycosis was made and the patient was started on Itraconazole. There was no response to treatment even after six months of itraconazole, and interestingly the patient developed two new lesions on flexors of left upper arm and right wrist and a satellite lesion adjacent to previously existing lesion. A repeat biopsy showed dense upper dermal infiltrate of lymphocytes and histiocytes with a narrow grenz zone and slit skin smear came out to be 6+. A final diagnosis of single nodular multibacillary leprosy without reaction and deformity was made. The patient was started on multidrug therapy with gradual and complete resolution of lesions over a period of time.

Key message: Single nodulo-ulcerative lesion is a rare presentation of multibacillary leprosy. Even though leprosy is on the verge of elimination, we as clinicians need to be vigilant about diagnosing a nodulo-ulcerative lesion and keep leprosy as one of the differential diagnoses of such presentations.





