Successful Treatment of Disseminated Granuloma Annulare With Narrowband UV-B Phototherapy

Resolución de granuloma anular diseminado con fototerapia UVB de banda estrecha

Disseminated granuloma annulare (DGA) is an inflammatory disease that tends to follow a chronic course and is resistant to multiple treatments.

We report the case of a 80-year-old woman with asymptomatic lesions that had developed 3 years earlier. The lesions initially developed on the arms, later spreading to the abdomen, back, and legs, and improved during the summer months. The patient had undergone treatment with topical corticosteroids for several weeks with no improvement. Her relevant medical history included hypertension and retinal detachment. Physical examination revealed well-defined, annular red-purple plaques several centimeters in diameter with a smooth surface and a raised edge (Fig. 1, A and B). These plaques were much flatter in sun-exposed areas of the forearms and legs. A biopsy of one of the plaques on the arm showed lymphohistiocytic granulomas in the upper and middle dermis, with degeneration of connective tissue and mucin deposition associated with a lymphocytic inflammatory infiltrate, leading to a diagnosis of DGA. The patient was prescribed several cycles of oral prednisone (30 mg per day in decreasing doses for periods of 6 weeks) and topical corticosteroids (15 days) with no improvement. Although asymptomatic, the plaques were esthetically unpleasant; it was thus decided to treat the patient with phototherapy. Psoralen-ultraviolet-A (PUVA) therapy was ruled out as the patient had experienced 2 episodes of retinal detachment. The patient underwent narrowband ultraviolet-B (NB-UVB) phototherapy 3 times per week for 2.5 months, following a dose escalation protocol for skin phototype II. In total, 27 sessions were performed and the patient received a cumulative dose of 26.155 J/cm². The patient showed good tolerance and an excellent response, with the affected body surface area

Figure 1  A and B, Right thigh and lumbar region before treatment.

Figure 2  A and B, Right thigh and lumbar region after 27 treatment sessions.

A Tumor in Images:
Anetodermic Pilomatrixoma

Un tumor en imágenes: pilomatrixoma anetodérmico

To the Editor:

Pilomatrixoma or pilomatrixicoma is a relatively common benign cutaneous tumor that is derived from immature cells in the matrix of the hair follicle. It presents clinically as a slow-growing solid nodular lesion. There are 2 peaks in its incidence, the first during the first 20 years of life and the

Despite having found only one similar case reported in the literature, we believe that in cases like the present one, in which PUVA was contraindicated, treatment with NB-UVB phototherapy is worth attempting.

References


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Figure 1 Clinical image showing a multicolor excrescent tumor measuring 15 mm across, with a well-defined border in the right frontoparietal region.