

PITYRIASIS ROSEA WITH UNUSUAL PAPULOVESICULAR PRESENTATION

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SUMMARY

Although pityriasis rosea is a common and well known disorder, some cases with atypical lesions and an unusual distribution of the latter are sometimes observed.

This paper reports on a 30-year-old male patient with papulovesicular exanthema which in the beginning of the disease could not be clearly differentiated.

Later on the clinical features changed and showed the characteristic signs of pityriasis rosea. The pathohistologic symptoms were also different. The spongiosis was more expressed, there were larger spongiotic vesicles.

KEY WORDS

pityriasis rosea, atypical papulovesicular lesions

INTRODUCTION

Pityriasis rosea is a relatively frequent benign dermatosis of unknown etiology with typical clinical features. Therefore in the majority of cases this skin disease is not difficult to diagnose. Nevertheless, some cases with atypical lesions such as papulae, vesiculae, bullae, urticae and even erythema multiforme-like lesions have been described (1,2,3). There are also reports on cases with unusual distribution of the lesions, i.e. on the extremities, the face or scalp (4), and cases with manifestations on the oral mucosa (5,6,7).

For the above reasons we decided to report on our 30-year-old male patient with disseminated papulovesicular exanthema which in the beginning we could not differentiate clearly.

CASE REPORT

The patient was admitted to the Department of Dermatology because of acute papulovesicular exanthema lasting two days. Previously, at the Unit for Infectious Diseases, varicella was excluded (the patient already had it in childhood).

Clinical findings:

On the trunk and shoulders, on the neck and scalp soft, bright-red papules were disseminated quite symmetrically. Some of these papules showed evidence of a tiny vesicle (Fig. 1). Except for vigorous pruritus, the patient had no other subjective symptoms. Otherwise his health was satisfactory. Routine laboratory findings were within normal limits.

