

## ABSTRACTS FROM CURRENT LITERATURE

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### SCALP INVOLVEMENT IN DERMATOMYOSITIS OFTEN OVERLOOKED OR MISDIAGNOSED

Kasteler JS, Callen JP. *JAMA* 1994;272:1939-41.

This article is a case series involving 17 patients with dermatomyositis. The scalp was involved in 14. In five of these patients the scalp disease had been incorrectly diagnosed as psoriasis or seborrhea. The scalp involvement is characterized by atrophic, erythematous, and scaly plaques. A diffuse alopecia occurred in six patients.

K H Basavaraj

### INTERNAL INVOLVEMENT IN LOCALIZED SCLERODERMA

Delen L, Roujeau J C, Cosues A, et al. *Medicine* 1994;73:241-5.

These authors performed extensive evaluations for systemic disease in 76 patients with morphea with or without linear scleroderma. Patients with only linear scleroderma were not included in this study. Of the 76 patients only 53 completed the extensive evaluation and 15 had systemic involvement. Fourteen of these patients were asymptomatic and had decreased esophageal peristalsis and/or hypotonia (six patients), gas transfer defects (eight), and restrictive ventilatory defects (two). These abnormalities were mild. These patients were observed for a period of 4 years. All 14 remained asymptomatic. It is not stated whether repeat investigations were performed throughout the study period. The presence of internal involvement correlated with male gender, an increasing number of plaques, and

hyperglobulinemia. The authors conclude that "the mildness of these visceral abnormalities suggests that they do not justify routine detection in asymptomatic patients".

K V Basavaraj

### SALICYLATE INTOXICATION IN AN INFANT WITH ICHTHYOSIS TRANSMITTED THROUGH SKIN OINTMENT : A CASE REPORT

Abdel-Magid EHM, El Awad Ahmed F R. *Pediatrics* 1994; 94:939-40.

A 3-month-old infant with lamellar ichthyosis developed irritability, tachypnoea, and vomiting because of metabolic acidosis. The salicylate level was markedly elevated because of application of a 4% salicylic acid/6% sulfur ointment (frequency of application not noted) to the entire body during the previous months. The infant recovered after treatment with alkaline diuresis.

K V Basavaraj

### ERYTHEMA MULTIFORME WITH MUCOUS MEMBRANE INVOLVEMENT AND STEVENS-JOHNSON SYNDROME ARE CLINICALLY DIFFERENT DISORDERS WITH DISTINCT CAUSES ?

Haudrey Assier, Sylvie Bastuji-Garin, Jean Revus, Jean-Claude Roujeau. *Arch Dermatol* 1995; 131: 539-43.

EM major and SJS could be separated as two distinct disorders with similar mucosal erosions but different pattern of cutaneous lesions. EM should be restricted to patients with sparsely distributed typical targets or raised edematous papules, with or without

mucosal involvement, while SJS should be used for a syndrome characterized by mucous membrane erosions and widespread small blisters that arise on erythematous or purpuric macules.

The study was based on review of clinical photographs. Another investigator who was blinded for the clinical classification related each case to its more probable cause.

The majority (80%) of 76 cases could be classified as one of the two disorders: 28 as EM (37%), 33 as SJS (43%), and 15 as "undetermined" (20%). By using causal scores, the 76 cases were classified as herpes induced (n=18) (24%). There was a strong correlation between the clinical classification and the probable cause ( $k=0.87$ ,  $P<0.01$ ). Specifically, EM was mostly related to herpes (17 of 28 cases) or to other cause (8 of 28 cases); however, EM was rarely related to drugs (3 of 28 cases) while SJS was nearly always related to drugs (28 of 33 cases) and never to herpes.

D Parikh

## HEPATITIS C VIRUS IN DERMATOLOGY

Pawlotsky JM, Dhumeau D, Bagot M. *Arch Dermatol.* 1995; 131: 1185-93

Hepatitis C virus (HCV) is the main causative agent of parenterally transmitted non-A, non-B viral hepatitis. HCV is the cause of or is associated with various dermatologic disorders. Extra-hepatic immunological disorders can be classified into four categories: immune complex mediated disease, autoimmune disorders and two other disorders Lichen planus and salivary gland lesions.

Immune complex-mediated disease are mainly represented by mixed cryoglobulinemia. The manifestations of mixed cryoglobulinemia range from mild vasculitis

with purpura, arthralgia & weakness, to severe vasculitis with kidney, nerve and brain involvement.

Clinical LP associated with HCV does not differ from Idiopathic LP. The prevalence of HCV in LP patients varied from 0.1 to 35%.

D Parikh

## TREATMENT OF TINEA WITH ITRACONAZOLE : AN OPEN MULTICENTRE STUDY

Rakosi T and Gerber M. *Journal of Dermatological Treatment* 1995;6:35-8.

Itraconazole has been conventionally used at a dose of 100mg once daily for 15 days in cases of tinea corporis/cruris and, at the same dose for 30 days in cases of tinea manuum/pedis. Authors conducted an open multicentre study. 33 patients (16 with tinea cruris/corporis and 17 with tinea manuum/pedis) received itraconazole at a higher dose (200mg day) for shorter duration (7days in tinea cruris/corporis and 15 days tinea pedis/manuum). They concluded that shorter treatment schedules with higher doses may be at least as effective as conventional schedules.

D Parikh

## ERYTHROMYCIN LAURYL SULPHATE IN COMBINATION WITH TRETINOIN IN THE TOPICAL TREATMENT OF ACNE VULGARIS. A MULTICENTRE DOUBLE-BLIND CLINICAL TRIAL

Fonseca E, Fernandez C, Camarasa JG, et al. *Journal of Dermatological Treatment* 1995; 6:47-50.

Authors conducted a multicentre double-blind study with total of 272 patients. Erythromycin lauryl sulphate (ELS) an erythromycin salt has been shown to be

effective for inflammatory acne owing to the antimicrobial and the antiinflammatory action of the antibiotic. The lauryl sulphate assists by emulsifying superficial and intrafollicular fat and this enhances the accessibility of the follicular duct to the antibiotic. Tretinoin (TRT) is a recognised comedolytic agent blocking and preventing the appearance of new comedones.

Patients were divided into three groups.

Group 1: patients applied ELS in the morning and at night.

Group 2 : patients applied placebo in the morning and ELS/TRT at night. Authors found ELS/TRT statistically significantly better than ELS or TRT alone. No serious side effects were reported.

Group 3 : patient applied placebo in the morning and ELS/TRT at night.

D Parikh

### ANNOUNCEMENT

*VI South Zone Conference of IADV*

Venue : JIPMER, Pondicherry

C.M.E. : 13th Sept. 1996

Conference : 14 to 15th Sept., 1996

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*For registration and further information, contact :*

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