

## INFLAMMATORY LINEAR VERRUCOUS EPIDERMAL NEVUS

Mohan B Gharpuray, Vinay Kulkarni and R R Sule

A 4-year-old girl had linear verrucous lesions restricted to the axilla and groin on the right side of the body. The lesion was itchy and had repeated episodes of infection. Histopathology was characteristic. Response to local betamethasone dipropionate was good.

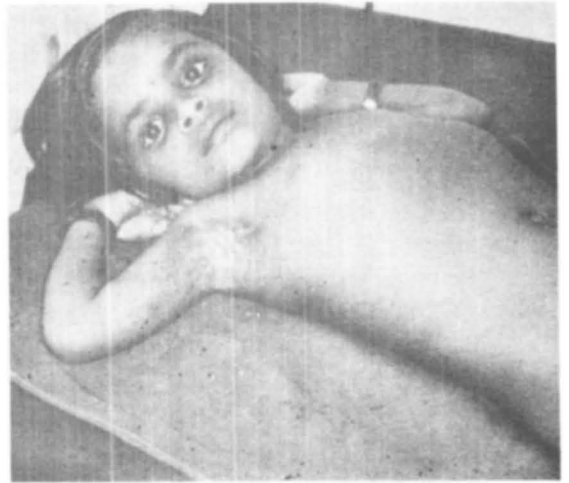
**Key words :** Inflammatory, Linear, Epidermal, Nevus.

Inflammatory linear verrucous epidermal nevus (ILVEN) is a rare disease described in 1971.<sup>1</sup> Prior to this, there had been occasional reports of linear verrucous lesions that were inflammatory and pruritic.<sup>2</sup> These had been confused with linear psoriasis, lichen striatus or lichen simplex chronicus. There have been no reports in the Indian literature. We are reporting a case of ILVEN.

### Case Report

A 4-year-old girl was brought for exudative and pruritic lesions in the right axilla since birth and similar lesions in the right groin and the right thigh which appeared one year after birth. The lesions were gradually increasing in size. Treatment from private practitioners was not effective. The lesions were hyperpigmented papules and ill-defined confluent plaques with irregular verrucous surface. The papules on the right thigh were arranged in a linear fashion. There were excoriation marks, exudation and crusts.

The biopsy showed alternating bands of hyperkeratosis and parakeratosis. Parakeratotic areas without granular layer



were raised while keratotic areas with granular layer were depressed. Demarcation between the keratotic and parakeratotic areas along with the granular layer changes was abrupt. There was minimal acanthosis with a sparse lymphocytic infiltrate in the dermis.

The secondary infection was treated with antibiotics and then twice a day application of betamethasone dipropionate. There was considerable improvement. During 3 months of follow up there were no new episodes of inflammation. The patient was asked to continue the application of local corticosteroid once a day.

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From the Department of Dermatology and Venereology, BJ Medical College and Sassoon General Hospital, Pune-411001, India.

Address correspondence to: Dr. M.B. Gharpuray, Continental Chambers, Above Chinese Room, Karve Road, Pune-411 004, India.

## Comments

The persistent linear pruritic lesions of ILVEN are composed of erythematous slightly verrucous scaling papules arranged in one or several lines.<sup>3</sup> Although the usual time of onset is early childhood the disease may arise in adults.<sup>2</sup> The characteristic features as described by Altman and Mehregan<sup>1</sup> are, (1) early age of onset, (2) 4 : 1 predominance in females, (3) frequent involvement of the left side of the body; especially the lower limbs, (4) pruritus, (5) persistence of the lesions despite treatment, and (6) distinctive histopathology. Our case showed all the features as described except the fact that lesions were on the right side of the body.

The histopathological features are of three types,<sup>3</sup> (1) non-specific, chronic dermatitis called by many as psoriasiform chronic eczema,<sup>4</sup> (2) in some cases there is extensive parakeratosis,<sup>1, 2</sup> and (3) regular alternation of raised parakeratotic areas without granular layer and slightly depressed hyperkeratotic areas with distinct granular layer.<sup>5, 6</sup>

Various treatment modalities tried so far have been topical corticosteroids, under occlu-

sion or intralesional, surgical excision, or cryosurgery.<sup>7</sup> None is very satisfactory. We think that newer potent corticosteroids like betamethasone dipropionate may be able to control the inflammatory episodes.

## References

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