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Catastrophic presentation of pemphigus vulgaris with Norwegian scabies in a patient with HIV

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Description

A 40-year-old female, previously healthy, started 2 months earlier with skin lesions (Figure 1A) characterized by blisters of 3 to 4 cm on the trunk and extremities that, when broken, left denuded areas, excoriations, and painful and pruritic meliceric crusts with serohematic secretion: with involvement of the gingival mucosa, palate, and oropharynx. Biopsy is performed (Figure 1B) showing intraepidermal acanthosis in the lower portions of the epidermis and spongiosis with exocytosis of neutrophils, perivascular infiltrate with eosinophils in the dermis. Human Immunodeficiency Virus (HIV) positive is reported by Elisa. At the respiratory level, he progressed with respiratory acidosis, for which a chest X-ray was taken (Figure 1C) with an increase in the parahilar pattern, with no evidence of a pneumonic process.

The appearance of pemphigus vulgaris in patients with HIV are rare and although some cases have been reported, there are no definitive statistics, it is characterized by the loss of cohesion of the keratinocytes due to acantholysis, however, the real effect of the course of the diseases is unknown [1,2]. For its part, scabies is an emerging pathology in recent years, which is related to HIV, with a CD4 T lymphocyte count below 150/mm, both with severe extension due to immunosuppression [3].

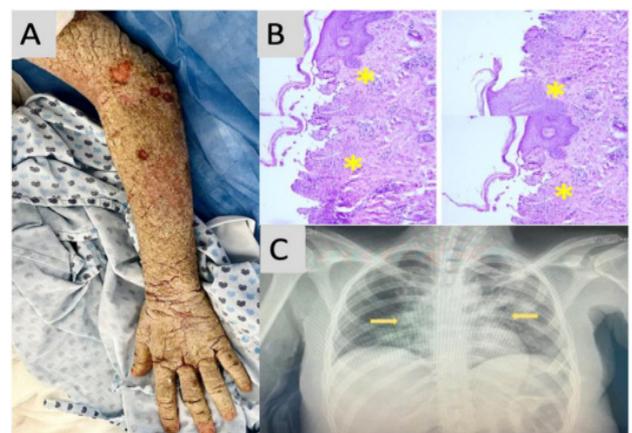


Figure 1

Declarations

Author contributions: All authors have contributed equally.

Availability of data and material: Data supporting the findings of this study are available from the corresponding author, upon reasonable request.

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Conflicts of interest: None reported.

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