## Case

A 22- year-old Thai man from Bangkok

**Chief complaint** Pruritic erythematous papulovesicular facial eruptions for 1 month **Present illness** One month ago, he had pruritic erythematous papulovesicular eruptions on his face.No history of drug ingestion and photosensitivity. He had no fever, oral ulcer and alopecia.

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Past History He is healthy . He had no personal history of any disease.

**Family History** No one in his family has the same skin lesions.

## **Physical examination**

Skin: Multiple discrete erythematous papulo-vesicular eruptions with crust and superficial erosion on face.

Oral mucosa: No erosion .Otherwise are unremarkable





Fig. 1

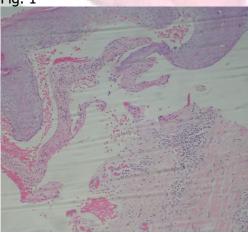


Fig. 3

## Investigations

CBC,UA : normal ANA : Negative ESR : 6 mm/hr Tzanck's smear : No acantholytic cells, no eosinophils Direct immunofluorescence : Positive linear C3 at dermoepidermal junction **Histopathology** (S03-8346)

Fig. 2

• Subepidermal blister containing serum, neutrophils and eosinophils.

Pattern of epidermal rete ridges and dermal papillae preserved above and below the blister.

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Superficial perivascular mixed-cell infiltrate of lymphocytes and eosinophils. Hospital

Diagnosis **Bullous** pemphigoid Treatment Clobetasol cream : apply twice daily Suporn rujsutthi Presenter Consultant Siripen Puavilai

## Reference

- 1. Sugita Y, Hashimoto T, Autoimmune vesicles on the face and neck, Eur J Dermatol. 2001;11:557-9.
- 2. Chang YT, Wong CK, Bullous pemphigoid a report of 86 cases, Clin Exp Dermatol. 1996; 21:20-23.
- 3. Pfau A, Hohenlentner U, UVA provoked localized Bullous pemphigoid, Acta Derm Venerol. 1994;74:314-6.

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