

## Clinical Image

### Pityriasis Lichenoides et Varioliformis Acuta (PLEVA)

Running title: PLEVA

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A 74-year-old male patient came to the emergency department with an acute eruption consisting of multiple inflammatory papules some of them demonstrating crusting or/and necrosis (Figure 1). The lesions were initially distributed on the trunk and femoral areas and spread to proximal extremities within few days. The patient mentioned a recent upper respiratory infection 15 days before the appearance of the rash and he complained of intense itching. No new medication had been added to his chronic treatment with drugs for arterial hypertension. Blood tests were within normal ranges. He described worsening of the lesions with recent application of combination of topical corticosteroid with an antifungal agent.

Clinical suspicion of PLEVA was raised. After performing a skin biopsy, treatment with doxycycline 100 mg twice daily along with itraconazole 100mg twice daily was initiated-the last for 15 days. Five days later the rash subsided dramatically. On one month follow up he appeared with remarkable improvement and was advised to use doxycycline for at least one more month (Figure 1).



In conclusion, clinical and histologic findings were compatible with the diagnosis of PLEVA, whereas the clinical course and successful response to the applied treatment verified our initial suspicion.

#### AUTHORS CONTRIBUTION

The authors prepared the manuscript and the artwork. All authors approved the final version of the manuscript.

#### CONFLICT OF INTEREST

The Authors declare no conflict of interest