Eczematous Dermatitis. Erythema Multiforme.

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Eczematous Dermatitis.

- Eczema: Greek word \rightarrow To boil over.
- Eczema is a group of different conditions that makes skin inflamed or irritated.

Eczema is clinically...

- Red,
- Pappulovesicular,
- Oozing,
- Earlier crusting lesions,
- Then raised scaly plaques.

Classification of E.D.

- Allergic contact dermatitis.
- Atopic dermatitis.
- Drug induced eczematous dermatitis.
- Eczematous insect bite reaction.
- Photoeczematous dermatitis.
- Primary irritant dermatitis.

Morphology of Ecz. Derm.

• Allergic C.D.→ Spongiotic dermatitis.

• A.D.→ Spongiotic dermatitis.

 Drug Related Ecz. Derm→ Spongiotic dermatitis; infiltrate often deeper with abundant eosinophils.

Morphology of Ecz. Derm. Contd..

- Eczematous insect bite reaction → Spongiotic dermatitis; wedge shaped infiltrate having many eosinophils.
- Photoeczematous eruption → Spongiotic dermatitis; infiltrate that diminishes gradually with depth.
- Primary irritant dermatitis → Spongiotic dermatitis in early stages; Acanthosis (Marked epidermal thickening) predominates in later stages.

Clinical features of Ecz. Derm.

- Allergic C.D.→ Marked itching, burning, or both, requires antecedent exposure.
- A.D→ Erythematous plaques in flexural areas; family hx of eczema , hay fever, or asthma.
- Drug Related Ecz. Derm→ Temporal relationship to drug administration; remits with stopping of drug.

Clinical features of Ecz. Derm. Contd..

- Eczematous insect bite reaction → Papules, nodules, and plaques with vesicles; may be linear when multiple.
- Photoeczematous eruption → Occurs at sites of sun exposure; may require associated exposure to systemic or topical antigen; photopatch testing may help in Dx.
- Primary irritant dermatitis → Localised mechanical or chemical irritants.

Etiology.

 Allergic C.D→ Topically applied antigens like Poison ivy, Nickel, Fragrances.

• A.D. \rightarrow Unknown; may be inherited.

 Drug Related Ecz. Derm→ Systemically administered antigens or haptens e.g. penicillin.

Etiology contd..

Eczematous insect bite reaction → Locally injected toxin or antigen.

• Photoeczematous eruption \rightarrow UV Light.

Primary irritant dermatitis → Repeated trauma or chemical irritants (as in detergent).

Pathogenesis.

- Initially, antigens at epidermal surface are taken up by dendritic langerhans cells.
- Migration to draining lymph nodes through dermal lymphatics.
- Processing of antigens by langerhans cells.
- Presentation to naïve CD4 T cells.

Pathogenesis Contd..

- Their activation & development into effector & memory cells.
- Migration of memory T cells to affected skin sites on antigen re-exposure.
- Release of cytokines & factors.
- Recruitment of numerous inflammatory cells responsible for clinical lesion of spongiotic dermatitis.

Allergic contact dermatitis.



Atopic dermatitis.



Drug induced eczematous dermatitis.



Eczematous insect bite reaction.



Photoeczematous dermatitis.



Primary irritant dermatitis.



ERYTHEMA MULTIFORME.

E.M.

- A skin immune reaction that an infection or drug can trigger.
- Its name combines the Latin "erythema" (redness),
- "multi" (many),
- and "forme" (shapes).
- The main symptom is rash on body where each mark resembles a bull's eye.

Associated conditions with E.M.

- 1. Infections:
- Herpes simplex,
- Mycoplasmal infections,
- Histoplasmosis,
- Coccidiomycosis,
- o Typhoid,
- \circ Leprosy.

Contd..

- 2. Administration of certain drugs :
- Sulfonamides,
- o Penicillin,
- Barbiturates,
- Salicylates,
- Hydantoins,
- Antimalarials.

Contd..

- 3. Malignant disease :
- o Carcinomas,
- \odot Lymphomas.

Contd..

- 4. Collagen vascular diseases :
- Lupus erythematosis,
- Dermatomyositis,
- Periarteritis nodosa.

Clinical manifestations of E.M.

- It manifests as sudden onset of asymptomatic, erythematous macules, papules, vesicles, bullae, or a combination on the distal extremities (often including palms and soles) and face.
- Target lesion consisting of red macule or papule with pale, vesicular or eroded centre.

- Symmetrical involvement of extremities frequently occurs.
- But lesions may be widely distributed over the skin of body.

E.M.



Stevens- johnson syndrom.

- An extensive and symptomatic febrile form of the disease often but not exclusively seen in children.
- Errosions and haemorragic crusts involve lips and oral mucosa.

SJS Contd..

- Although conjunctiva, urethra, genital and perianal areas may also be affected.
- This condition may lead to life threatening sepsis.

SJJ.



Toxic epidermal necrolysis.

- Diffuse necrosis and sloughing of cutaneous & mucosal epithelial surfaces.
- Produces a clinical condition very similar to extensive burn injury.

Toxic epidermal necrolysis.

