hyperkeratosis overlying a thinned epidermis with focal lymphocytic infiltrate is the typical histologic features of HLP. We present a 6-year-old Korean boy with brown hyperkeratotic papules on his legs. The histopathology showed hyperkeratosis with atrophic epidermis and dermal lymphocytic infiltration. Herein we present a first case of HLP in Korean dermatologic literatures.

키워드: Hyperkeratosis lenticularis perstans, Flegel, Flegel’s disease

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Immunosuppression-associated eosinophilic pustular folliculitis in a patient with CLL

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Eosinophilic pustular folliculitis (EPF) is an eosinophilic dermatosis of hair follicles. There are three variants: classic EPF (Ofuji’s disease), immunosuppression-associated EPF (IS-EPF), and infancy-associated EPF (I-EPF). The majority of IS-EPF cases are found in HIV patients, and classic or I-EPF are much less common. In Korean dermatologic literature, there have been four reports of HIV-associated EPF, but no reports of other IS-EPF. Herein, we report a case of IS-EPF developing in a patient with chronic lymphocytic leukemia (CLL). A 57-year-old male presented with erythematous pustules, papules and plaques on the trunk, face and arms for 20 days. He was diagnosed with CLL 2 years ago, and treated with fludarabine-cyclophosphamide chemotherapy. The skin biopsy specimen taken from trunk showed a perivascular and pilosebaceous infiltration with eosinophils and lymphohistiocytes in the upper dermis. Laboratory findings showed eosinophilia. Based on the clinical history, skin biopsy, and laboratory findings, the patient was diagnosed with IS-EPF. He was treated with oral prednisolone, topical steroid and pimecrolimus cream, and the skin lesions was improved.

키워드: Eosinophilic Pustular Folliculitis, EPF, CLL

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Inflammatory disseminated superficial porokeratosis

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Disseminated superficial porokeratosis (DSP) is a specific disorder of keratinization. Clinically, the lesions show a sharply demarcated and hyperkeratotic plaque with central atrophy. The lesions appear mainly in the extremities and generally develop with bilateral symmetry. Inflammatory DSP is an unusual pruritic variant of DSP, and this was first described by Kanzaki in 1992 as eruptive pruritic papular porokeratosis. Since the first report, 9 cases of inflammatory DSP have been reported. The typical clinical course for patients with inflammatory DSP consists of several years of asymptomatic DSP followed by the appearance of intensely pruritic erythematous papules or plaques, which then subside within several months. Here we report an unusual case of inflammatory DSP that developed in an 80-year-old man.

키워드: Inflammatory disseminated superficial porokeratosis

**P479**

Isolated epidermolytic acanthoma in a renal transplant recipient

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A 64-year-old man presented with a solitary papule on his scrotum. The lesion had first appeared 7 years earlier and had gradually grown larger over time. He had received a kidney transplant 7 years previously, and the scrotal lesion occurred immediately after starting an immunosuppressive regimen. Skin examination showed a solitary, brownish, verrucous, and keratotic papule, 1 cm in diameter, on the left side of the scrotum. Histologic examination of a shave biopsy specimen of the lesion showed orthokeratotic hyperkeratosis, papillomatosis, and acanthosis. Hypergranulosis was also noted, and the cells of the granular and upper spinous layers contained numerous, large, clear, perinuclear spaces with