A case of Vancomycin-induced linear IgA dermatosis
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Linear immunoglobulin A (IgA) dermatosis is a rare autoimmune-mediated blistering skin disease. It is characterized by symmetrically presenting annular or grouped papules, bullae and vesicles on the trunk, extremities, palms, soles and mucosa. Histopathologically, it is characterized by subepidermal blisters with infiltration of neutrophils, eosinophils, and lymphocytes on the upper dermis. In direct immunofluorescense test, linear deposition of IgA along the basement membrane is characteristic. It is known to be associated with ulcerative colitis, B-cell lymphoma, infections, systemic lupus erythematosi and drugs. Vancomycin is the common drugs inducing this disease. Vancomycin-induced linear IgA dermatosis appeared widespread vesicles and bullae on the trunks, palms, soles and mucosa. We present a case of vancomycin-induced linear IgA dermatosis with review of the literatures.

Keyword: Linear immunoglobulin A (IgA) dermatosis, Vancomycin-induced linear IgA dermatosis, Vancomycin

A case of Rosai-Dorfman disease
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Rosai-Dorfman disease (RDD) or sinus histiocytosis with massive lymphadenopathy is an idiopathic, benign, histiocytic proliferative disease involving lymph nodes and extranodal sites. It is accompanied by fever, leukocytosis, elevated erythrocyte sedimentation rate, and polyclonal hypergammaglobulinemia. A 57-year-old woman presented with a 3-year history of multiple non-tender erythematous to yellowish nodules on the nose and upper arms. Histopathologic examination showed a granulomatous inflammation with large and pale histiocytes. In facial computed tomography, bilateral cervical lymph node enlargement and nasal mucosal involvement were observed. Herein, we report a rare case of RDD with no systemic involvement except skin and lymph node.

Keyword: Rosai-Dorfman disease

Staphylococcal scalded skin syndrome occurred in an adult
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Staphylococcal scalded skin syndrome (4S) is a type of skin infection by Staphylococcus aureus that makes systemic bulla and desquamation by exfoliative toxin of bacteria and causes generalized symptoms. It occurs mostly to the neonatal and children under 6 years old, but rarely to an immune-compromised adult. A 43-year-old man who had alcoholic liver cirrhosis and acute renal failure presented with exfoliative erythematous patches on the nearly whole body. On pelvic computer tomography, an abscess of buttock by profundus Staphylococcus aureus infection was found and this bacterial toxin was thought to be the cause of 4S. Here, we report a rare case of 4S occurring in an adult.

Keyword: Adult, Staphylococcal scalded skin syndrome

Eosinophilic cellulitis associated with toxocariasis
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Eosinophilic cellulitis, or Wells' syndrome, is a rare idiopathic disorder characterized by recurrent, pruritic granulomatous dermatitis with eosinophilia. Although the exact etiology of the disease is not known, several precipitating factors, including drugs, viral infections, myeloproliferative disorders, insect bites, parasitic infestations, lymphoma, leukemia and other malignancies have been suggested. To the best of our knowledge, only three cases of eosinophilic cellulitis associated with...