



CASE REPORT

Erythema Induratum of Bazin: A New Case

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Abstract

Erythema induratum of Bazin (EIB) is a rare skin form of tuberculosis (TB) that is most commonly seen in middle-aged women. Clinically, EIB can mimic several skin conditions, which often leads to a delay in diagnosis. We report here the observation of a new case of EIB, presenting as a chronic nodular panniculitis, in a 38-year-old female patient.

Keywords

Antitubercular agents, Erythema induratum, Interferon-gamma release tests, Latent tuberculosis, Panniculitis

Introduction

Erythema induratum of Bazin (EIB) is a rare condition that is still subject to nosological controversy. It is a nodular vasculitis occurring most often in women. This rare dermatosis poses a problem as to its tubercular origin and is considered by most authors as a state of hypersensitivity to multiple antigens and primarily to *Mycobacterium tuberculosis*. However, the work-up often does not provide sufficient evidence for the tuberculous origin of the skin lesions. Its therapeutic management therefore remains poorly codified [1,2].

Case Report

A 38-year-old female patient, with a family history of a brother treated for pulmonary tuberculosis, was referred to us for the management of erythematous skin lesions on both lower extremities, which had been evolving for eight years. The patient reports night sweats and weight loss, but does not report any pulmonary symptoms.

The dermatological examination showed the presence of erythematous nodules, purplish and sensitive to palpation on both legs (Figure 1).



Figure 1: Erythematous, violaceous nodules and plaques on both legs.

A Punch skin biopsy of the nodules was performed, and showed lymphohistiocytic infiltration with fat necrosis predominantly in the fat lobules. Multinucleated giant cells with epithelioid granuloma and vasculitis were demonstrated. Interferon-gamma release assay (IGRA) using Quanti FERON-TB Gold Plus was positive, and a chest radiograph was normal.

The patient underwent anti-tuberculous treatment. The skin lesions quickly improved in the first 2 months.

The diagnosis of Erythema induratum of Bazin (EIB) was retained on the basis of the clinic pathological correlation with a good response to anti-tuberculosis treatment and a positive IGRA.

Discussion

Erythema induratum of Bazin was first described by

Bazin in 1861, It is a rare form of panniculitis, considered to be a state of hypersensitivity to multiple antigens including MT [3]. The clinical presentation of EIB can be diverse, it usually characterized by chronic, tender, erythematous, indurated subcutaneous nodules on the posterior or anterolateral lower extremities [4].

In endemic countries, notably Morocco, in the presence of arguments in favor of a tuberculous etiology (personal or family history of tuberculosis, phlyctenular IDR, the identification of active tuberculosis in other organs, the histopathological elements of the lesions,), the prescription of antituberculous drugs is recommended [5].

Conclusion

Despite being a preventable and curable disease, tuberculosis is still an endemic problem in our country.

References

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