

# CHAPTER 11

## ERYTHEMA ELEVATUM DIUTINUM (L95.1)

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### REMEMBER

- ▶ Erythema elevatum diutinum is disease characterized by cutaneous small vessel vasculitis.
- ▶ Erythema elevatum diutinum (EED) is a disease of adulthood, and is most commonly observed in the ages between 30-60 years. Pediatric cases have also been reported.
- ▶ There is no gender or racial difference in the prevalence of ED.
- ▶ ED is characterized by red-brown, violaceous papules, plaques, and nodular lesions.
- ▶ Extensor surface involvement is more common (knee, elbow, ankle, hand and fingers).
- ▶ Lesions of ED are usually asymptomatic, but patients may sometimes complain of burning, and/or pain.
- ▶ Ulcerations on the penis, oral mucosa, and esophagus may accompany.
- ▶ Human immunodeficiency virus (HIV) infection should be considered in early-onset adult patients. In addition, palmoplantar localization may occur in these patients, and nodular lesions are more common.
- ▶ ED is usually not accompanied by systemic symptoms such as fever. The most common systemic finding is arthralgia.

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- ▶ Myasthenia gravis cases have been reported in the literature on the basis of case reports. In case of doubt, the patients should be assessed by a neurologist.

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## ERİTEMA ELEVATUM DIUTINUM (L95.1)

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### HATIRLA

- Eritema elevatum diutinum (EED) küçük damar vaskülitisi ile karakterize bir hastalıktır.
- Eritema elevatum diutinum yetişkin çağın hastalığıdır ve en sık 30-60 yaş grubunda görülür. Pediyatrik vakalar da bildirilmiştir.
- Hastalık prevalansında cinsiyet ve ırksal açıdan fark yoktur.
- EED, kırmızı-kahverengi, viyolase renkte papül, plak ve nodüler lezyonlarla karakterizedir.
- Ekstansör yüzey tutulumu daha sıktır (diz, dirsek, ayak bileği, el ve parmaklar).
- Lezyonlar genellikle asemptomatiktir ancak hastalar bazen yanma ve/veya ağrıdan da yakınabilir.
- Penis, oral mukoza ve özofagusta ülserasyonlar eşlik edebilir.
- Erken başlangıçlı yetişkin hastalarda insan immün yetmezlik virüsü (HIV) enfeksiyonu düşünülmelidir. Ayrıca bu hastalarda palmoplantar yerleşim de görülebilir ve nodüler lezyonlar daha sıktır.
- Genellikle ateş gibi sistemik semptomlar eşlik etmez. En sık sistemik bulgu ise artraljidir.
- EED, Sweet sendromu ve pyoderma gangrenozum gibi diğer nötrofilik dermatozlar ile birlikte görülebilir.

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