

CHAPTER 45

SNEDDON-WILKINSON DISEASE (SUBCORNEAL PUSTULAR DERMATOSIS) (L13.1)

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REMEMBER

- Sneddon-Wilkinson disease, which is also known as subcorneal pustular dermatosis (SPD), is a rare, sterile, neutrophilic, and recurrent pustular dermatosis. The prognosis of the disease is fair and the exact etiology is unknown.
- SPD usually occurs in adults, but rarely children may be affected.
- SPD most commonly occurs between the fifth and seventh decades of human life. The disease is four times more frequent in women compared to men.
- The pustules of SPD characteristically occur on the normal skin, but in some cases pustules may also appear on erythematous skin. Lesions tend to settle symmetrically.
- In dermatological examination, very superficial (=subcorneal) sterile pustules are the most distinguishing feature of the disease.
- SPD is characterized by polycyclic and/or annular lesions that usually begin in the flexor areas of the body. Face, and mucosal surfaces are often not involved in the disease course.
- SPD clinically begins abruptly as painful/painless, and/or pruritic superficial papules which are later replaced by vesicles, pendulous pustules or sometimes bullae. New lesions spread within a day or two to form circinate, annular, and/or serpiginous patterns surrounded by peripheral pustules with central clearing.

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ic leukemia If necessary, patients should be evaluated by a hematologist.

Medical Oncology

- An association between SPD, and some solid organ tumors has been reported. Patients with suspected lung cancer, and thymoma should be evaluated by an oncologist.

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BÖLÜM 46

SNEDDON-WILKINSON HASTALIĞI (SUBKORNEAL PÜSTÜLER DERMATOZ) (L13.1)

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HATIRLA

- Sneddon-Wilkinson hastalığı olarak da bilinen subkorneal püstüler dermatoz (SPD), nadir görülen, steril, nötrofilik ve tekrarlayıcı bir püstüler dermatozdur. Etyolojisi belli olmayan hastalığın prognozu iyidir.
- Genellikle yetişkinlerde görülür, çocuklarda çok nadir olarak ortaya çıkabilir.
- SPD en sık yaşamın beşinci ve yedinci dekatları arasında ortaya çıkar. Hastalık, kadınlarda erkeklerde göre dört kat daha sık görülür.
- SPD püstülleri karakteristik olarak normal deri üzerinde ortaya çıkar, ancak bazı durumlarda püstüller eritemli deri üzerinde de görünebilir. SPD lezyonları simetrik yerleşme eğilimi gösterir.
- Dermatolojik muayenede çok yüzeysel (=subkorneal) steril püstüler hastalığın en ayırt edici özelliğidir.
- SPD, genellikle fleksör alanlarda başlayan polisiklik ve/veya annüler dizilik gösteren lezyonlarla karakterizedir. Sneddon-Wilkinson hastalığında yüz ve mukozal yüzeylerde tutulum beklenmez.
- SPD, klinik olarak aniden ortaya çıkan ağrı/ağrısız ve/veya kaşıntılı yüzeysel papüller olarak başlar ve daha sonra yerini veziküller, sarkık püstüler veya bazen büllere bırakır. Yeni lezyonlar,

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Medikal Onkoloji

- SPD ile bazı solid organ tümörleri arasında ilişki bildirilmiştir. Akciğer kanseri ve timoma şüphesinde hastalar onkoloji uzmanı tarafından değerlendirilmelidir.

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