

18087

**Clinical and histologic manifestations of ecthyma contagiosum in west Texas farmers**

Meagan O. Harris, MD, Baylor Scott & White; Palak Parekh, MD, Baylor Scott & White and Texas A&M Medical Center

Ecthyma contagiosum, also known as orf, is a highly contagious virus of the poxviridae family which typically affects sheep and goats. However, this virus can be transmitted to humans through direct contact with infected animals, usually resulting in self-limited nodular lesions at the site of contact in humans. This study presents a series of four patients in west Texas diagnosed with ecthyma contagiosum following the handling of sheep or goats, many after a drenching procedure. Drenching is the procedure by which the animal's head is held still while a drenching gun or syringe is used to administer oral medication into the throat or stomach. In sheep and goats, orf commonly presents as "scabby mouth disease" and can be easily transmitted through breaks in unprotected skin during this procedure. These four patients developed characteristic targetoid or nodular lesions and histology supported viral changes. Many cases of orf likely go unreported due to the self-limiting nature of the disease as well as the familiarity of the farmers with this condition; however it is important for clinicians to be aware of the clinical and histologic presentation in order to avoid further unnecessary testing or treatment.

*Commercial disclosure: None identified.*



18121

**Undifferentiated pleomorphic dermal sarcoma with unusual keratoacanthoma-like clinical presentation**

Alba Posligua, MD, University of New Mexico; Niharika Ravichandran, MSIII, University of New Mexico School of Medicine; Joseph Glass, MD, New Mexico Veterans Administration Health Care System; Romeo Morales, MD

Background: Pleomorphic dermal sarcoma (PDS) is a rare malignant skin neoplasm. Here we present a patient with a PDS mimicking a keratoacanthoma (KA) in a patient with a history of multiple KAs.

Case Report: 57-year-old man with past medical history significant for extensive sun exposure, heavy smoking, and prior multiple squamous-cell carcinomas and KAs that presented with a 4.0 × 3.5 cm rapidly growing, exophytic, fungating mass covered by hemorrhagic crusting and surrounded by rolling borders on the right mid-dorsal forearm that developed during a two-month trip to India. He denied any insect bite, fever or chills. Biopsy showed a dermal and subcutaneous, ulcerated, highly atypical spindle cell tumor with abundant mitotic figures. By immunohistochemistry these cells were negative for S-100, Melan-A, SOX-10, KRT-AE1/AE3, KRT5/6, FLI-1, and CD34, consistent with undifferentiated PDS. The MRI demonstrated invasion to adjacent muscle fascia, PET-CT was negative for metastasis. The patient was scheduled for surgical excision.

Discussion: Undifferentiated PDS is an aggressive tumor of mesenchymal origin characterized by deep subcutaneous tissue, perineural, and/or lymphovascular invasion. These tumors are more frequent on head and neck, and if on trunk and extremities, the rate of recurrence and metastasis might be increased. This case highlights a unique presentation of PDS resembling a KA on the arm. Given the history of KAs in this patient and the gross morphologic similarity, it may have been easy to misdiagnose the new lesion as a KA. Therefore, we emphasize the importance of considering PDS when evaluating KA resembling lesions.

*Commercial disclosure: None identified.*



18107

**Using oral retinoids to treat epidermal growth factor receptor–induced acneiform eruptions: A case series**

Hannah Hill, MD, Mayo Clinic Arizona; Collin Costello, MD, Mayo Clinic; Yul W. Yang, MD, PhD, Mayo Clinic Arizona; David Swanson, MD

Up to 80% of patients treated with epidermal growth factor receptor (EGFR) inhibitors have cutaneous side effects, which may necessitate dose adjustments or discontinuation. However, as cutaneous toxicity has been associated with greater drug efficacy, many patients would benefit from continued EGFR inhibitor therapy. We present a case series of 6 patients who were treated for papulopustular reactions related to EGFR inhibitors with oral retinoids after failing first line therapies. Six patients were identified by chart review (ages 37-73, 5 male, 1 female). Four were treated with isotretinoin, one with acitretin, and one initially with isotretinoin and later acitretin. Prior treatments had been attempted in all patients, including topical and oral antibiotics, and topical steroids. Dosage of isotretinoin ranged from 10 mg to 60 mg daily, and acitretin from 10 mg to 25 mg daily. Duration of treatment ranged from 1 month to 1 year. Clinical improvement was seen in 5 out of 6 patients (83%). Of the 5 patients treated with isotretinoin, 2 (40%) reported complete or near complete clearance, 2 (40%) reported significant improvement, and 1 (20%) reported partial improvement. Improvement was noted within the first month. Both patients treated with acitretin had little improvement, with waxing and waning of rash on therapy. Five of 6 patients continued EGFR inhibitor treatment after initiating retinoid therapy. Oral retinoid treatment was primarily discontinued upon switching the patient to an alternative chemotherapy agent. Clinicians should consider isotretinoin for patients on EGFR inhibitors with acneiform eruptions, to allow those patients to remain on potentially life-saving therapies.

*Commercial disclosure: None identified.*



18125

**Evaluation of the efficacy and tolerability of a trichloroacetic acid facial peel and post-peel masque**

Stephen Lynch, PhD, L'Oreal USA Research & Innovation; Uliana Gout, MD, London Esthetic Medicine; Shelby Cook, MS, Margarita Yatskayer, L'Oreal Research and Innovation; Lynn Fischer, L'Oreal

Background: Superficial chemical peeling has been employed for decades as a safe, effective method for skin exfoliation and rejuvenation. Trichloroacetic acid (TCA) has become a popular professional peeling agent due to its efficacy, reproducibility, and versatility in treating a variety of skin conditions. The goal of the present study was to evaluate the tolerance and efficacy of a peel containing 15% TCA and 3% glycolic acid as well as a novel post-peel facial masque on subjects with mild to moderate photodamage.

Methods: This single-center blinded study included 64 women, ages 40-60, with mild to moderate facial photodamage. The TCA peel and post-peel masque were applied once every 4 weeks over the course of 12 weeks (3 total applications). Efficacy was evaluated by expert grading and self-assessment questionnaires at baseline and weeks 2, 4, 8, and 12. The post-peel masque was compared with a standard water compress after the initial peel application through subject self-assessment and infrared thermometer readings. Dermatologist objective and subjective tolerance assessments were performed at each study visit.

Results: Two weeks after a single peel application, subjects showed statistical significant visible improvement in skin texture, dullness, uneven tone, pigmentation, pores and clarity. After 12 weeks, the regimen of 3 peels provided statistical significant improvement in more prominent signs of photoaging including fine lines, wrinkles, firmness, and dark spots. The post-peel masque provided a significant decrease in skin temperature compared with water compress and was appreciated by subjects. Overall, the peel and post-peel masque were well tolerated by subjects.

*Commercial disclosure: 100% sponsored by L'Oreal USA.*

