

Case Blog

Title: Herpes Zoster Scars

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A 30-year-old man presented with a unilateral painful eruption of grouped vesicles in the right upper eyelid and right glabella area 8 months ago. The vesicles coalesced to form bullous lesions in 48 hours. The patient had chickenpox at the age of 4 years. A diagnosis of herpes zoster involving the ophthalmic branch of the right trigeminal nerve was made. The patient was treated with oral acyclovir 800 mg, five times a day. The lesions resolved in 14 days but the post-herpetic neuralgia lasted for 3 months. The patient was left with atrophic scars in the right glabellum.

Herpes zoster, also known as shingles, is caused by reactivation of endogenous latent varicella-zoster virus that resides in a sensory dorsal root ganglion of the spinal cord or the extramedullary cranial nerve ganglion usually after primary infection with varicella-zoster virus (i.e., varicella or chickenpox). Clinically, herpes zoster is characterized by a painful, unilateral vesicular eruption in a restricted dermatomal distribution. Herpes zoster may involve the eyelids and glabella when the ophthalmic branch of the trigeminal nerve is affected. Appearance of skin lesions at the side of the nose represents involvement of the nasociliary branch of ophthalmic nerve (Hutchinson's sign) and predicts a higher likelihood of ocular involvement. Herpes zoster may be complicated by scarring, as is illustrated in the present case.

Of academic interest, lesions of molluscum contagiosum, granuloma annulare, granulomatous folliculitis, psoriasis, cutaneous sarcoidosis, prurigo nodularis, lichen planus, lichen sclerosis et atrophicus, morphea, lymphoma, Kaposi's sarcoma, and lichenoid graft-versus-host disease have been reported in preexisting herpes zoster scars [1]. This is known as Wolf's isotopic response which refers to the occurrence of a new skin disorder at the site of another, unrelated, and already healed skin disease.

Reference

1. Fernandez-Redondo V, Amrouni B, Varela E (2002) Granulomatous folliculitis at sites of herpes zoster scars: Wolf's isotopic response. *J Eur Acad Dermatol Venereol* 16: 628-630.