

## Highlights from Acta Dermato-Venereologica 2012, No. 2 chosen by the Editor Anders Vahlquist

### Common Neuropathic Itch Syndromes

Anne Louise Oaklander

Acta Derm Venereol 2012; 92: 118–125

Patients with chronic itch are diagnosed and treated by dermatologists. However, itch is a neural sensation and some forms of chronic itch are the presenting symptoms of neurological diseases. Dermatologists need some familiarity with the most common neuropathic itch syndromes to initiate diagnostic testing and to know when to refer to a neurologist. This review summarizes current knowledge, admittedly incomplete, on neuropathic itch caused by diseases of the brain, spinal cord, cranial or spinal nerve-roots, and peripheral nerves.



### Preoperative Characterization of Basal Cell Carcinoma Comparing Tumour Thickness Measurement by Optical Coherence Tomography, 20-MHz Ultrasound and Histopathology

Torsten Hinz et al.

Acta Derm Venereol 2012; 92: 132–137

Optical coherence tomography (OCT) is a new imaging method with promising results for several dermatological indications, including preoperative skin tumour characterization. While high-frequency ultrasound (HFUS) is frequently used for this purpose, overestimation of tumour thickness is a problem, due to subtumoral inflammatory infiltration that cannot be differentiated from tumour tissue. The aim of this single-centre study was to describe OCT features of basal cell carcinoma (BCC) and to determine vertical tumour thickness accurately, including a comparison with HFUS and histopathology. Tumour thickness values of 10 BCCs measured by OCT did not differ significantly from those measured by histopathology (median difference 0.12 mm). By contrast, the difference between HFUS and histopathology was greater (median difference 0.3 mm). A Pearson's correlation coefficient of 0.83 showed a stronger correlation of OCT in measuring tumour thickness compared with HFUS (0.59). Bland-Altman plots revealed a better agreement of OCT and histopathology concerning tumour thickness measurements. On the basis of this explorative study cohort, OCT was more exact than HFUS in preoperative tumour thickness estimation of BCCs compared with histopathological measurements.

### Evaluation of Recurrence After Photodynamic Therapy with Topical Methylaminolaevulinate for 157 Basal Cell Carcinomas in 90 Patients

Rune Lindberg-Larsen et al.

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The aim of this study was to evaluate the effect of photodynamic therapy with topical methylaminolaevulinate for the treatment of basal cell carcinomas in a single dermatological department. Ninety patients (34.4% men and 65.6% women) with a total of 157 basal cell carcinomas (111 superficial, 40 nodular, 6 unknown) were treated. Primary endpoint was clinically observed recurrence verified by biopsy 3, 6 and 12 months after treatment, then once a year. Estimated patient recurrence rates were 7% at 3 months, 19% at 6 months, 27% at 12 months and 31% at 24 months. Patients aged over 60 years had significantly higher estimated recurrence rates compared with patients aged 60 years or under (at 12 months, 35% vs. 19%,  $p=0.01$ ). Estimated recurrence rates for tumours was 4% at 3 months, 11% at 6 months, 16% at 12 months and 19% at 24 months. There were significantly higher estimated recurrence rates for nodular basal cell carcinomas compared with superficial basal cell carcinomas (at 12 months, 28% vs. 13%,  $p=0.008$ ). In conclusion, photodynamic therapy is only appropriate for treatment of superficial basal cell carcinoma, and, age above 60 years and histology showing nodular basal cell carcinoma are independent risk factors for developing a recurrent basal cell carcinoma.

### Chronic Herpes Zoster Duplex Bilateralis

Charlotte Castronovo and Arjen F. Nikkels

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Although varicella zoster virus latency has been demonstrated in several sensory ganglia, herpes zoster usually effects only one single, either left or right, dermatome in half of the body. In immunocompromised patients, more than one contiguous unilateral dermatome may be involved. Bilateral non-contiguous herpes zoster, also termed herpes zoster duplex, is rarely reported. Chronic varicella zoster virus skin infection is another rare entity encountered in HIV-infected and immunocompromised patients, often associated with aciclovir resistance. We describe here a patient with chronic lymphocytic leukaemia, who presented simultaneously non-contiguous bilateral and chronic herpes zoster lasting for more than 2 months, with resistance to aciclovir. To our knowledge, this is the first report of chronic herpes zoster duplex bilateralis. Physicians should be aware of and recognize these atypical manifestations of varicella zoster virus.



### Theme issue: Adverse Drug Reactions

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