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A Case of amicrobial pustulosis of the folds in the patient with Sjogren disease

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Amicrobial pustulosis of the folds (APF), is a rare pustular eruption, predominantly involving the cutaneous folds, the external auditory canals and the scalp, occurring in patients who exhibit a wide spectrum of autoimmune abnormalities such as systemic lupus erythematosus (SLE), sjogrene's disease (SS). SLE is the most ommonly observed autoimmune disorder in patients with APF, particularly the systemic form of the disease. SLE may also occur in association with noninfectious neutrophilic dermatoses such as Sweet's syndrome and pyoderma gangrenosum. APF should be included in the spectrum of the noninfectious neutrophilic dermatoses such as Sweet's syndrome, which may occur in association with autoimmune conditions. A 37-year-old female presented with generalized malaise and acute pustular rash. Her medical history was unremarkable, except for a 1-year history of transitory polyarthralgias dry eye and dry mouth. She was taking no medication or contraception. On examination, there were coalescing pustular lesions arising on erythematous skin, forming large crusted and eroded plaques, predominantly affecting the groins, axillae, the neck including the 'V' of the chest, the external auditory canals, nasal alae, angles of the mouth, flexural areas of the limbs, and the scalp. Our patient had the haracteristic clinical and histopathological features of APF, which have been reported in previous case observations associated with primary SS. The clinical features are relapsing primary aseptic, pustular eruptions, mainly affecting the cutaneous folds, scalp and periorificial regions such as the external ear canal, nostrils, and angle of the mouth. The aetiology of APF is unclear. However, it is noteworthy that all previously reported cases with APF were women, and most of them were young and of reproductive age when the eruptions occurred for the first time. In conclusion, we present a patient with characteristic clinical findings of APF associated with SS.

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Associations between TBX21 gene polymorphisms and Behcet's disease in Korean patients

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Background : Behcet's disease is a chronic systemic inflammatory disease with unknown etiology. A number of clinical and laboratory findings suggest a strongly polarised Th1 immune response in Behcet's disease. T-bet is a newly identified Th1 specific T-box transcription factor selectively expressed in Th1 cells. However, it is not yet clear whether the T-bet protein is involved in the proposed Th1 mediated pathogenesis of Behcet's disease at transcriptional level. Therefore, this study was planned to investigate the potential associations of two single nucleotide polymorphisms (SNPs) at positions -99 (C/G) and -1993 (T/C) in the exon and promoter region of the TBX21 gene with a susceptibility to Behcet's disease in the Korean population. **Methods :** 105 patients with Behcet's disease and 105 healthy controls were studied. All of the subjects were genotyped using sequence specific PCR. Comparisons of the genotype, allele, and haplotype frequencies of the tow groups were performed using the chi-square test or Fisher's exact test. **Results :** The genotype, allele, haplotype distributions of the two SNPs did not differ significantly between the two groups. And there were no associations between the polymorphisms and clinical manifestations or severity. Haplotype analysis also showed no difference between the two groups. **Conclusion :** According to this study, TBX21 gene polymorphisms were not associated with a susceptibility, clinical manifestation and severity in Behcet's disease in the Korean population.