QUIZ

Dermatology Series: An itchy back

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Case history

An elderly woman presented to her doctor with an itchy back which began after a long hot bus ride in Australia from Brisbane to Cairns during summer. It persisted for months despite a return to a temperate climate. On examination there were numerous small red papules and papulovesicles over the upper back, some of which appear to have been excoriated (Figs 1, 2).

Q1 What may cause an itchy upper back?

Common causes of an itchy back without rash (but perhaps showing excoriations) are listed in Table 1.

It may be important to exclude systemic causes of itch such as thyroid disease, iron deficiency, renal failure, liver disease and diabetes mellitus. Scabies should always be looked for in an itchy patient.

Common itchy rashes that may involve the back include:

- eczema of various types
- psoriasis
- drug rashes.

Q2 What causes papulovesicular eruptions on the trunk in hot humid conditions?

This patient's itchy rash began after a long, hot, humid bus ride so occlusion, heat and humidity are probably part of the pathogenesis.

Miliaria, due to sweat duct obstruction can produce crops of:

- asymptomatic thin-walled vesicles which desquamate (miliaria crystallina)
- or tiny prickly papules (miliaria rubra), mainly on the trunk.

Miliaria is very common in hot humid climates but may also be seen in hot dry deserts or associated with a febrile illness. Although infants seem especially prone, any age group can be affected. In the elderly, this may involve the back after prolonged bed rest in a well heated hospital without a sheepskin on the mattress. Secondary infection is common. Miliaria usually resolves quickly with a return to cooler conditions or slowly with acclimatization to the heat and humidity.

Grover's disease (transient and persistent acantholytic dermatosis) is also believed to relate to heat and sweating. It most commonly affects the trunk of fair-skinned, sun damaged, middle aged to elderly men presenting as itchy red papules or papulovesicles. In the acute form, it usually appears in summer and resolves over weeks to months. The chronic form may persist for months to years regardless of the climate. The Koebner phenomenon may be seen.

This patient has Grover's disease.

Q3 What is the management of Grover's disease?

The diagnosis is usually clinical, suggested in an older patient with sun damaged skin and scattered discrete itchy papules or papulovesicles over the front or back of the trunk perhaps extending onto the proximal upper limbs. A biospy is diagnostic. Histology of a recent papule shows small foci of acantholysis in various patterns. Immunofluorescence is negative. If mild, symptomatic control of itch can be achieved with emollients and midpotency topical corticosteroids. Severe disease may require treatment with psoralen and ultraviolet A photochemotherapy or other systemic therapies.

Table 1 Common causes of an itchy back without rash

Dry skin Standing in the shower with the hot water running onto the interscapular skin Dermographism Urticaria Systemic disease

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Figure 1 A crop of erythematous papules over the upper back



Figure 2 On closer examination, some of the lesions are papulovesicular.