SHORT COMMUNICATION

Coinciding Erythema Nodosum and Sweet Syndrome

Philip R. Cohen, MD

1 Department of Dermatology, University of California, Davis Medical Center, Sacramento, CA
2 Touro University California College of Osteopathic Medicine, Vallejo, CA

To-the-Editor: I read with interest the report by Ramesh et al. describing a 35-year-old woman with a prior history of presumptive recurrent erythema nodosum on both of her legs. The patient presented with biopsy-confirmed Sweet syndrome and warm, tender, erythematous nodules on her bilateral shins that were not biopsied but designated as erythema nodosum. Evaluation for dermatosis-related conditions was negative. She was treated with 40 milligrams prednisone daily and all her skin lesions had resolved when she was seen at follow-up four weeks later.

Subcutaneous Sweet syndrome is a less common presentation of acute febrile neutrophilic dermatosis. The pathologic changes can occur not only in the subcutaneous fat, but also in both the dermis and the adipose tissue. Importantly, both the symptoms and the morphology of subcutaneous Sweet syndrome can mimic erythema nodosum.

Similar to Ramesh et al’s patient, the diagnosis of erythema nodosum is often made based on clinical features. However, a previous review of the world literature of individuals with concurrent Sweet syndrome and erythema nodosum only included nine patients; nine additional patients were excluded since their diagnosis of erythema nodosum was only based upon clinical features without pathology confirmation. Therefore, in a patient with Sweet syndrome whose lesions have been confirmed by biopsy, the diagnosis of sequential or concurrent erythema nodosum requires microscopic evaluation of the erythema nodosum-suspected lesion in order to definitively establish the diagnosis of erythema nodosum.

Conflict of Interest Disclosures: None

Funding: None

Corresponding Author:
Philip R. Cohen, MD
San Diego, CA
Email: mitehead@gmail.com

References:

(c) 2024 THE AUTHORS. Published in collaboration with Dermsquared.