

# Acitretin for the treatment of pustular psoriasis

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## Background:

Pustular psoriasis is an inflammatory skin condition characterized by eruption of sterile pustules on erythematous background. It is considered as a public health care problem as it can be life-threatening. There is no standard therapy.

## Objective :

The aim of our study was to evaluate the role of acitretin in pustular psoriasis treatment.

## Materials and methods :

A retrospective study involving patients with pustular psoriasis treated in the Dermatology Unit of Habib thamer hospital of Tunis from 2017 to 2021.

## Results :

A total of 31 patients were included of whom 22 adults and 9 children. The male to female ratio was 1/3. Six cases (19%) had a previous history of psoriasis vulgaris, three cases (10%) had previous history of psoriasis arthropathica and four cases (13%) had family history of psoriasis. Main Co-morbidities were diabetes (two cases) and hypertension (two cases).



The average age of onset was 29 years [1-66]. Five cases (16%) were triggered by infections and three ones (10%) were caused by drugs. Clinically, 23 patients (74%) had presented with annular pustular psoriasis, 6 patients (19%) with generalized pustular psoriasis and 2 patients (7%) with palmoplantar pustulosis.

A concomitant fever was recorded in 16 cases (51.61%). The average duration of hospitalisation was 9,2 days. Acitretin 0.5-1mg/kg/day was administrated as first-line therapy in 25 cases, 18 patients (72%) showed good clinical response. During Follow- up, skin lesion clearance had been noticed after an average of 21.5 days [7-60]. Most of cases (13) did not report side effects. Five patients (20%) had stopped the treatment after an average period of 2 months. Three cases reported hyperlipidaemia and two cases reported abnormal liver function.

## Discussion :

Pustular Psoriasis is a form of psoriasis consisting of widespread sterile pustules on red skin. Even if it is an uncommon variant, it remains frequent in Tunisia. The disease starts at a mean age of 30 to 40 years old. It occurs more frequently in women. Many factors trigger the flare up of the disease such as sudden withdrawal of corticosteroids, infection and pregnancy. There is no standard treatment and many systemic medications are available. According to international guidelines, ciclosporin is the first-line treatment but in our study, better results have been shown with Acitretin.

## Declaration of Conflicting Interests :

Authors have no conflict of interest.