Teaching *NeuroImages*: Interferon-induced psoriasis flare in a multiple sclerosis case remits with dimethyl fumarate

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A 26-year-old woman with a history of psoriasis diagnosed with relapsing-remitting multiple sclerosis (Expanded Disability Status Scale score 1) received SC interferon β -1a as first-line treatment. Interferon was discontinued 4 months later, following a dramatic psoriasis flare with plaques in upper and lower extremities (figure, A–C) and manifestation of Koebner phenomenon along abdominal injection sites (figure, C). Switch to oral dimethyl fumarate (DMF) resulted in complete remission within 14 months (figure, D–F), and the patient remained relapse-free for the last 3 years under DMF treatment. Our case is consistent with the association of multiple sclerosis with psoriasis¹ and the overlapping efficacy of fumaric acid esters in both conditions.²

AUTHOR CONTRIBUTIONS

Georgios Tsivgoulis: data collection, study design, drafting and revising the manuscript. Georgios N. Papadimitropoulos: drafting and revising

the manuscript. Aristeidis H. Katsanos: data collection, critical comments during manuscript revision. Christina Zompola: data collection, critical comments during manuscript revision. Apostolos Safouris: data collection, critical comments during manuscript revision. Odysseas Kargiotis: data collection, critical comments during manuscript revision. Konstantinos Voumvourakis: critical comments during manuscript revision.

STUDY FUNDING

Dr. Tsivgoulis has been supported by the European Regional Development Fund—Project FNUSA-ICRC (No. CZ.1.05/1.1.00/02.0123).

DISCLOSURE

The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

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(A–C) Plaques and guttate lesions in the lower (A, B, arrows) and upper (C, arrows) extremities. Confluent plaques demonstrate Koebner phenomenon along the interferon injection sites (C, arrowheads). (D–F) Remission of psoriatic eruptions 14 months after treatment with oral dimethyl fumarate. Residual discoloration in former Koebner-positive sites (E, arrowheads).

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Neurology 2017;89:e188-e189

DOI 10.1212/WNL.0000000000004501

This information is current as of October 9, 2017

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