

中文題目:過久使用類固醇與尿素軟膏導致7歲女孩下肢紅紋-個案報告

英文題目:Prolonged Hydrocortisone-Urea Topical Induced Striae Rubra over 7-Years-Old Girl's Lower Limbs – A Rare Case Report

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Introduction:

Striae distensae are confusing skin problems and are the usual form of dermal scarring. There are two main types of striae distensae, striae rubra and striae alba. Striae rubra are the earliest presentation of striae distensae and are characterized by an erythematous to violaceous color.

Predisposing factors of striae distensae include pregnancy, adolescent age, drug exposure (eg, topical or systemic corticosteroids), underlying disease (eg, Cushing's syndrome), and surgery (eg, breast augmentation). Inadequate topical corticosteroids treatment in children is more toxic than adult.

Case Report:

A 7-year-old girl visited Endocrinology clinic for complaint of red-purple striae over inner aspect of bilateral thigh for 2 weeks. Red-purple striae over inner aspect of bilateral leg was noted for one month.

According to her grandmother, the girl visited Dermatology clinic for leg small-sized papules. She used Hydrocortisone 1% / Urea 10% cream every day for more than 1 month.

In laboratory findings the patient found to have normal ACTH(29 pg/ml, normal range 6-56.7 pg/ml), normal Na (138.3mmol/L), positive phadiatop test [0.38(1+), <0.35(negative)] with normal IgE (41.6 IU/ml).

Discussion:

Topical corticosteroids have been used extensively by dermatologist for many dermatological disorders.

The use of lower potency topical corticosteroids in children is generally safe when used for short durations and for appropriate inflammatory conditions. But children are at greater risk of toxicity from topical corticosteroids as they have a large body surface area compared to adults. This girl used prolonged topical corticosteroids without dermatologist's suggestion. The topical corticosteroid contain 10% urea and Urea is an emollient which enhance corticosteroid. The product is suitable severe inflammatory dermatologic condition (eg, dermatitis,

eczema, psoriasis, rash) but not noted at endocrinology clinic
 About treatment of striae rubra, the preferred interventions are pulsed dye lasers, topical retinoids, fractional lasers, and as these are among the most studied and most successful therapies.

For patients with striae rubra, we often utilize pulsed dye lasers for initial treatment because these lasers target hemoglobin and a reduction in erythema is cosmetically beneficial.

Topical tretinoin is a useful alternative;

Treatment results are unpredictable and vary from no improvement to significant improvement in patients treated with similar regimens.

We hoped patients do not use more of topical corticosteroids, use them more often, or keep using them longer than prescribed by dermatologist.

References:

1. General principles of dermatologic therapy and topical corticosteroid use, UpToDate
2. 類固醇的分級(七級), 臺大醫院皮膚部
3. Striae distensae (stretch marks), UpToDate

Table 1. 類固醇的分級

Potency group	Corticosteroid
1、Super-high potency	Dermovate 0.05% (clobetasol propionate) gel、cream、ointment Ultravate 0.05% (halobetasol propionate) cream、ointment Diprolene 0.05% (betamethasone dipropionate; optimized vehicle) gel、ointment Psorcon 0.05% (diflorasone diacetate; optimized vehicle) ointment
2、high potency	Elocon 0.1% (momentasone furoate) ointment Lidex or Topsy 0.05% (fluocinonide) gel、cream、ointment Topicort or Esperson 0.25% (desoximetasone) cream、ointment
3、mid-potency	Cutivate 0.005% (fluticasone propionate) ointment Cyclocort 0.1% (amcinonide) lotion、cream Valisone 0.1% (betamethasone valerate) ointment
4、mid-potency	Elocon 0.1% (momentasone furoate) cream
5、mid-potency	Cutivate 0.005% (fluticasone propionate) cream Valisone 0.1% (betamethasone valerate) cream
6、mild-potency	Valisone 0.1% (betamethasone valerate) lotion
7、mild-potency	Cort. S 1% (hydrocortisone acetate) ointment