### **ERYTHEMA MULTIFORME**

# DEFINITION

- 1. **Erythema Multiforme** is a distinctive clinical and histological reaction which can be precipitated by various agents. Different names have been given to varying degrees of severity of the same pathological process. Such names are -
  - 1.1. Ectodermosis erosiva pluriorificialis
  - 1.2. Dermatostomatitis
  - 1.3. Stevens Johnson Syndrome
  - 1.4. Herpes Iritis
  - 1.5. Erythema Papulosum Rheumaticum
  - 1.6. Erytheme polymorphe

### **CLINICAL MANIFESTATIONS**

- 2. **Papular** or **simplex** form. The lesions are dull red, flat maculo-papules which may remain small or increase in size to reach 1-2cm in diameter. The periphery remains red and the centre becomes cyanotic or even purpuric. The lesions appear in successive crops at intervals for a few days and fade in 1-2 weeks sometimes leaving pigmentation. The extent of the eruption is variable.
- 3. **Vesico-bullous** form. This form is intermediate between the papular and the severe bullous form.
- 4. **Severe bullous** form (**Stevens Johnson Syndrome**). This is a very characteristic and severe illness. Onset is usually sudden, although there may be a prodromal systemic illness 1-13 days before the eruption appears. Numerous organs are affected including the mouth, eyes, skin, male genitalia and anal mucous membrane. The oral lesions show extensive bulla formation in the mucous membrane.
- 5. **Atypical** cases may occur.

## AETIOLOGY

- 6. The aetiology is unknown.
- 7. **Erythema Multiforme** is a reaction pattern to many different stimuli and is almost certainly based on immunological mechanisms, with immune complexes probably implicated in many cases. An association with HLA B15 has already been reported.
- 8. The most important agents known to precipitate attacks are –

# 8.1. Virus Infections

- 8.1.1. Herpes simplex
- 8.1.2. Primary atypical pneumonia
- 8.1.3. Lymphogranuloma inguinale
- 8.1.4. Psittacosis

- 8.1.5. Variola
- 8.1.6. Vaccinia
- 8.1.7. Hepatitis B
- 8.1.8. Milker's nodes
- 8.1.9. Orf
- 8.1.10. Infectious mononucleosis
- 8.1.11. Mumps
- 8.1.12. Poliomyelitis

# 8.2. Histoplasmosis

- 8.3. Bacterial Infections a wide range has been recorded
- 8.4. X-ray therapy
- 8.5. Lupus erythematosus
- 8.6. Polyarteritis nodosa
- 8.7. Wegener's granulomatosis
- 8.8. Carcinoma, reticulosis, leukaemia
- 8.9. Pregnancy, Pre-menstrual changes
- 8.10. Drug reactions
- 8.11. Sarcoidosis
- 8.12. Contact reactions

## CONCLUSION

9. **Erythema Multiforme** is a clinical and histological reaction which can be precipitated by various agents. The aetiology is unknown but the reaction is almost certainly based on immunological mechanisms which many conditions are known to precipitate.

# REFERENCE

Champion R H. Disorders of Blood Vessels - Erythema multiforme. In: (Eds) Champion R H, Burton J L and Ebling F J G. Textbook of Dermatology. Oxford. Blackwell Scientific Publications. 5<sup>th</sup> Ed. 1992. p1834-1838.

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