1. Pustular folliculitis associated with Demodex folliculorum

Abstract

A 49-year-old man presented with an acute onset of folliculitis on his right cheek. The folliculitis was unresponsive to antibiotics. A potassium hydroxide preparation of a scraping from the affected area revealed the presence of numerous Demodex mites. The patient was treated with topical crotamiton (Eurax) cream resulting in rapid resolution of the folliculitis. We believe that this case represents a localized pustular folliculitis resulting from a heavy infestation with Demodex folliculorum. In spite of more than 50 years of investigation, the role of D. folliculorum in human cutaneous disease remains controversial.

2. Pseudozoster clinical presentation of Demodex infestation after prolonged topical steroid use

Y. Karincaoglu, B. Tepe, B. Kalayci and M. Seyhan
Department of Dermatology, Inonu University School of Medicine, Malatya, Turkey
Correspondence to Dr Y. Karincaoglu, Department of Dermatology, Inonu University School of Medicine, 44315 Malatya, Turkey.

ABSTRACT

A 60-year-old man presented with a plaque lesion on the upper right half of the face, which had developed after ophthalmic varicella zoster infection about 2 years previously. The lesion, which was burning and itchy, included a few tiny erythematous pustules, and was slightly squamous and infiltrated. The lesion covered the upper two-thirds of the right trigeminal nerve dermatome, involving half of the face with the forehead, the periorbital area, upper part of the cheek and the nose. The lesion became more marked
after continuous topical anaesthetic and corticosteroid use. A standardized skin-surface biopsy was taken, and revealed a large number of Demodex folliculorum (38/cm^2) in the lesion area. The lesions completely abated after topical 5% permethrin treatment, and no recurrence was observed during follow-up. Demodicosis may have atypical clinical presentations, other than the well-known classic forms. To our knowledge, this is the first unilateral trigeminal, pseudozoster presentation in the literature.

3. A case report of demodicosis.

Fulk GW, Clifford C.

College of Optometry, Northeastern State University, Tahlequah, OK 74464.

Abstract

We report on a patient who had an excessive number of mites (Demodex folliculorum) on his eye lashes, i.e. 10 mites on eight lashes examined. A review of three previous reports suggested that one mite for every two lashes represents an over population of this nearly ubiquitous mite. Greasy scales on the lashes and foamy tears suggested that seborrhea was present as well as demodicosis. The primary symptoms of itching was relieved after one week of treatment with mercuric oxide ointment and lid scrubs, although the number of mites was not reduced. Treatment for an additional two weeks did reduce the mite number. We therefore recommend continuing treatment for demodicosis for at least three weeks even if symptoms abate sooner.