

Tozinameran

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Atypical erythema multiforme: case report

A 91-year-old woman developed atypical erythema multiforme (EM) following tozinameran vaccination against COVID-19 [route and dosage not stated].

The woman presented with diffuse, erythematous and pruriginous papules. The papules had a tendency to confluence into plaques. Anamnesis revealed that she had received two dose of tozinameran [BNT162b2; Pfizer–BioNTech] vaccine injection. She had developed this rash on the left deltoid area at 6 days after receiving the second dose of tozinameran injection. The rash deteriorated over the following 10 days, involving her back, neck, and extremities. Upon presentation, she was found to have large plaques in the injection site and in the central dorsolumbar area and buttocks, and also multiple papules on extremities and trunk. A discreet light pinkish erythematous border was noted around some of the lesions. She did not have systemic symptoms except for mild asthenia. She denied prodromal semiology or recent medication changes. Thereafter, she underwent two biopsies from the left deltoid plaque and a peripheral papule which showed superficial dermal lymphocytic infiltrate obscuring the dermo-epidermal junction associated with hydropic changes and dyskeratosis of isolated or grouped keratinocytes not confined to the basal layer. Intraepidermal lymphocytes were also noted. Based on the symptoms and biopsy result, atypical EM was diagnosed. She was admitted for close surveillance and initial treatment.

The woman started receiving treatment with clobetasol [clobetasol propionate]. Following the corrective measure, the lesions gradually subsided with only residual hyperpigmentation. On hospital day 8, she was discharged from the hospital. It was concluded that, she had developed atypical EM secondary to tozinameran.

Bujan Bonino C, et al. Atypical erythema multiforme related to BNT162b2 (Pfizer-BioNTech) COVID-19 vaccine. *International Journal of Dermatology* 60: e466-e467, No. 11, Nov 2021. Available from: URL: <http://doi.org/10.1111/ijd.15894> 803648623