CLINICAL IMAGE

Miliaria crystallina in an intensive care patient

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Abstract

Miliaria crystallina is frequently seen in intensive care patients. This skin condition should be known by both anesthesiologists and dermatologists to avoid unnecessary investigations.

KEYWORDS

acute medicine, anesthesia, dermatology

1 | OBSERVATION

We report the case of a 28-year-old man hospitalized in the intensive care unit due to traumatic brain injury. The patient has developed an acute rash following a febrile syndrome due to ventilator-associated pneumonia. Physical examination showed multiple pinhead to 5mm size, clear vesicles on healthy skin. Lesions were diffuse throughout the trunk, suggesting miliaria crystallina (Figure 1). Miliaria crystallina is a skin condition due to the occlusion of the sweat duct opening, resulting in obstruction of the flow of sweat, and retention in a vesicle below the stratum corneum. Miliaria crystallina follows intense sweating due to excessive exposure to heat, hyperthermia, or humidity.² Patients who are hospitalized in intensive care unit often develop this skin condition because of the high levels of temperature and humidity. No treatment is necessary because miliaria crystallina is a benign dermatosis that heals spontaneously in a few hours with slight desquamation² as was the case with our patient after the fever disappeared.



FIGURE 1 Multiple pinhead clear vesicules of healthy skin

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ACKNOWLEDGMENTS

We would like to thank Doctor Akrout Firas for his support and for the great photograph. Published with written consent of the patient.

CONFLICT OF INTEREST

None.

AUTHOR CONTRIBUTIONS

Miss. Rouai Meriem, is the guarantor of the content of the manuscript, included the data and analysis. Dr. Meryam Chaabani contributed to interpretation of data and revision of the manuscript. Miss. Ayette Laabidi contributed to data collection. Dr. Noureddine Litaiem contributed to analysis and interpretation of data, revised it critically for important intellectual content, and final approval of the version to be submitted. Dr. Lotfi Rebai attended anesthesiologist.

ETHICAL STATEMENT

Informed consent was obtained from the patient.

DATA AVAILABILITY STATEMENT

All data generated are included in this published article.

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REFERENCES

- Haas N, Martens F, Henz BM. Miliaria crystallina in an intensive care setting. Clin Exp Dermatol. 2004;29(1):32-34.
- El Anzi O, Hassam B. Widespread miliaria crystallina: about a case. Pan Afr Med J. 2018;30:69.

How to cite this article: Rouai M, Chaabani M, Laabidi A, Litaiem N, Rebai L. Miliaria crystallina in an intensive care patient. *Clin Case Rep.* 2021;9:e04665. https://doi.org/10.1002/ccr3.4665