

Letter

Failure of lichen planopilaris to respond to ustekinumab

Guy Webster MD PhD

Dermatology Online Journal 21 (11): 17

Clinical Professor of Dermatology, Jefferson Medical College, Philadelphia, PA

Correspondence:

Guy Webster MD PhD
Philadelphia, PA
gfweb@earthlink.net

Abstract

Lichen planopilaris failed to respond to ustekinumab after 10 months of treatment.

Letter

A 70-year-old woman presented with a longstanding history of both lichen planopilaris (LPP) and psoriasis. She had used various topical steroids for the LPP with no benefit. A trial of hydroxychloroquine 200 mg twice daily for 5 months had minimal effect on the LPP and may have worsened the psoriasis. A course of methotrexate was rejected by the patient because of potential side effects. Infliximab was likewise found to be unacceptable.

The patient did agree to treatment with 45 mg ustekinumab given according to label and had fairly rapid clearing of her psoriasis, but the drug had no effect on the LPP after 10 months of therapy.

LPP is a refractory and disfiguring disease. When topical or intralesional therapy fails, the success rate of systemic medication is fairly low [1]. Biologics approved for other indications occasionally have unexpected benefit in various inflammatory dermatoses [2]. There is minimal reported experience using biologics in LPP. Two case reports note LPP developing during therapy with etanercept [3,4] but another reports successful treatment of LPP with adalimumab [5]. Unfortunately we did not find ustekinumab to be useful in our LPP patient.

References

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