To the Editor,

We read with great interest the case of primary infection by human parvovirus B19 presented by Veraldi et al. [1] and their review of the cutaneous manifestation caused by this virus. They omitted a recently described entity, namely papular-purpuric ‘gloves and socks’ syndrome, which has been related to parvovirus B19 by some authors. Eight patients with this unique dermatosis have been described to date [2-6]. It is characterized by a pruritic erythema and edema of the hands and feet in a gloves-and-socks distribution and associated oral lesions and flu-like features. Petechial purpura occurs rapidly in the same distribution; lesions clear within 1-2 weeks. Two patients [3, 4] had seroconversion to parvovirus B19 during the course of the disorder, suggesting parvovirus B19 as the cause.

References


by Human

for this dermatosis. However, the serology in 3 other cases contradicts this hypothesis [5, 6]. Thus, parvovirus B19 may be considered as one possible etiologic factor, but other viral or infectious agents should be sought as well.


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We would like to thank Dr. Trattner for his interest in our paper about a case of ery-themato-maculo-papular lesions associated with primary infection by parvovirus B19 (PV B19) [1]. As far as the references in our paper are concerned, we thought it would be opportune to cite the
only paper in which an association between the ‘gloves and socks’ syndrome and PV B19 had been demonstrated [2], leaving out the studies in which this association had not been proven [3, 4]. Furthermore, at the time when our manuscript was sent to Dermatology (March 1992), we did not know that another case would be subsequently published by Halasz et al. [5] (November 1992).

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Reply

This aside, it is possible that the ‘gloves and socks’ syndrome is correlated in some patients with PV B19 infection. In fact, Harms et al. [6] recently found positivity for PV B19 in 3 of 5 patients with the ‘gloves and socks’ syndrome: in one patient, PV B19 infection was confirmed by PCR in the serum and the skin; in the other 2 patients, one of whom affected with AIDS, anti-PV B19 IgG antibodies were already present at the time when the eruption occurred, and specific IgM antibodies appeared subsequently. Harms M, Feldmann R, Saurat J-H: Papular-purpuric ‘gloves and socks’ syndrome: Primary infection with parvovirus B19? Reply. J Am Acad Dermatoi 1991;25:341-342.


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