Double Herpes Zoster in a Hemodialysis Patient

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A 63-year-old man with antineutrophil cytoplasmic antibody (ANCA) associated vasculitis was admitted to our hospital. The patient was started on methylprednisolone (1 g/day), followed by consecutive oral steroid therapy. Hemodialysis (HD) was also initiated because of a progression of renal dysfunction.

One month after the initiation of these therapies, a skin examination revealed hemorrhagic vesicles with erythema clustered on the left upper arm (C6 area) and the right sole (L5 area) (Picture), which was diagnosed as bilateral double herpes zoster (DHZ). The patient was started on valaciclovir (500 mg/day) which led to a marked improvement after 1 week.

The incidence of DHZ is approximately 0.0-0.61% according to the previous investigations of more than 100 herpes zoster cases (1, 2). However, there have been few reports of DHZ in HD patients. Skin trouble of the shunt area may progress to secondary infection. In addition, HD patients have many opportunities to come in contact with medical staff members and other patients. Therefore, early detection and rapid treatment is crucial to prevent a worsening of the disease and the spread of these infections in the clinical setting.

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References