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# Erythema multiforme in the context of SARS-Coronavirus-2 infection<sup>☆</sup>



## Eritema multiforme en contexto de infección por SARS-Coronavirus-2

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We report two cases of erythema exudativum multiforme (EEM) in patients diagnosed with COVID-19, highlighting their clinical presentation and the relationship with said infection.

The first is an 82-year-old male treated with hydroxychloroquine, ceftriaxone, and ertapenem for SARS-CoV-2 pneumonia; 12 days after finishing the treatments (30 after the onset of respiratory symptoms) he developed skin lesions without accompanying systemic symptoms.

The second is a 48-year-old male with SARS-CoV-2 pneumonia who received hydroxychloroquine, ritonavir, lopinavir, ceftriaxone, and azithromycin. After three weeks of respiratory symptoms, skin lesions developed without any other accompanying symptoms.

Both patients showed confluent erythematous-violaceous papular plaques, some targetoid, a diagnostic key to EEM (Figs. 1 and 2). These symptoms were resolved with a prednisone regimen of 0.5 mg/kg/day.

Various cutaneous manifestations associated with SARS-CoV-2 infection have been described. In addition, the numerous drugs used for its treatment make the occurrence of potentially serious toxicoderma expected, requiring correct aetiology and specific management, such as the discontinuation of the drug involved.



Fig. 1.

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Fig. 2.

We report two cases of presumably drug-related EEM, given its late onset and good response to corticosteroid therapy. However, these dermatoses could represent a SARS-CoV-2-induced skin involvement, as this is a recent, little-known disease.

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### **Conflict of interests**

The authors declare no conflict of interest.

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