A Case Report of Large Area Exfoliative Dermatitis Treated with MEBO

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Abstract: Objective: To find an effective method for treating large area dermatitis. Method: A case of exfoliative dermatitis with an area of 96% TBSA was treated with MEBO, 4 to 6 times a day. Results: After applying MEBO for 28 days, the wounds were healed. The patient was discharged after staying at the hospital for 32 days. Conclusion: MEBO is very effective in treating large area exfoliative dermatitis.

Keywords: MEBO, severe drug eruption exfoliative dermatitis, treatment


In May 2005 our hospital admitted a patient with massive drug-induced exfoliative dermatitis, and achieved remarkable effects after local application of MEBO on the basis of systematic treatment. The large-area second-degree epidermolytic wounds healed without scarring.

I. Case Profile

Mr. Zou, age 60, from Dayudao Village, Shidao Town, Rongcheng, Shandong, suffered for years from itching all over the body complicated with dispersed scaly skin, which was treated in many hospitals as psoriasis without any substantial effect. Ten days before admission into our hospital he resorted to TCM at the dermatologic section of a small clinic (detailed prescription unavailable), but began to feel uncomfortable after taking the medicine for 4 days, with body temperature rising up to 40°C, feeling extremely thirsty and drinking desire, irritated, uneasy, with urinary frequency and gross haematuria, intensified itching, redness and dropsy on the skin all over the body, which had erythema and blisters, fell off and rot. Most skin was injured. Lab examination revealed blood pressure 90/53mmHg, WBC 28.6 x 10.9/L and urinary RBC ++++. Diagnosis: severe TBSA exfoliative dermatitis (second to thirddegree, 96%TBSA), complicated with shock due to decreased volume of blood, and severe local infections.

After admission he was given oxygen inhalations, catheter and fluid infusions. And he was provided with a systematic support therapy such as antibiotics, haemostatics, prevention of digestive tract ulcer and protection of renal functions. Locally we used MEBO to treat wounds in strict compliance with MEBT principles, by smearing MEBO to wounds with bamboo plates to an even thickness of 1-3mm once every 4 hours. For deep wounds, drug administration and surgical operation may be combined to remove necrotic tissues before smearing again. The wounds basically healed after being treated for 28 days, and the patient discharged after 32 days of treatment.
II. Discussion

Exfoliative dermatitis is a severe drug-induced dermatitis. Large patches of skin may flake off and became necrotic, complicated with injuries to and failure of liver, kidney, lung and blood-forming organs [1]. Wound surface treatment is the primary concern for this disease, and it is the No.1 technique according to some papers[2]. On the basis of the systematic therapy, we applied MEBT as local treatment to this patient. The result has proved that external applying of MEBO can prevent bacteria in the air from entering the wound, therefore preventing infection, and can reduce loss of water on the wound surface, thus keeping the wound from going deeper due to cellular desiccation and dehydration caused by excessive evaporation of water. Complicated as the etiology of exfoliative dermatitis may be, its injury to skin is similar to that of burns; that is, the injury is limited to skin, and will not result in subcutaneous injuries without the participation of other factors such as infection, pressure and blood circulation disorders. Therefore, treatment with MEBT can also achieve good effect.

Bibliography


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