

## Bullous Pemphigoid with Prurigo-Like Presentation Associated with Parkinson's Disease: A Case Report

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## Abstract

## Case Report

Bullous pemphigoid (BP) is an autoimmune subepidermal blistering disease affecting elderly patients. Atypical non-bullous presentations such as prurigo-like lesions may delay diagnosis. We report a 72-year-old patient with Parkinson's disease presenting with severe pruritus for 4 months, resistant to antihistamines. Direct immunofluorescence confirmed BP. The patient improved with topical clobetasol propionate (30 g/day).

**Keywords:** Bullous pemphigoid, Prurigo-like, Parkinson's disease, Direct immunofluorescence, Topical corticosteroids, Chronic pruritus.

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### INTRODUCTION

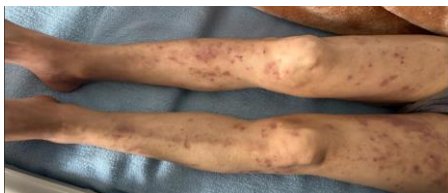
BP is characterized by autoantibodies against BP180 and BP230. Non-bullous forms may precede blistering. A strong association with neurological diseases, particularly Parkinson's disease, has been described.

### CASE REPORT

A 72-year-old patient with Parkinson's disease presented with severe pruritus for 4 months, causing insomnia and resistant to antihistamines. Examination showed excoriated papules and nodules on lower limbs without blisters. Skin biopsy and DIF showed linear IgG/C3 deposits confirming BP.

### Treatment and Outcome

Treatment with topical clobetasol propionate (30 g/day) led to rapid improvement of pruritus and lesions, with good tolerance.



### DISCUSSION

Prurigo-like BP is a misleading form. Chronic pruritus resistant to antihistamines should prompt DIF. The association with Parkinson's disease is well established with increased risk. Topical corticosteroids are effective in moderate forms.

### CONCLUSION

BP may present as prurigo-like eruption. DIF is essential for diagnosis. Topical corticosteroids are effective.

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