

# Viral skin infection

*DR.DHUHA KHALIL*

## Objective of the lecture

- The students should know common viral infections.
- How does it is present?
- How do we diagnose them?
- The main points of treatment.

## How does virus affect the skin ...?

- Direct
- Reactivate dormant virus
- Viremia
- Allergic reaction

## Herpes simplex virus: DNA viruses

2 types virus 1 & 2

## Clinical variants

### 1. H.S. Liabalis

- Primary
- Recurrent

### How does it present?

- They start as grouped, tender and/or painful papules or papulovesicles on an erythematous base and then coalesce to form a crusted erosion.
- The initial infection usually asymptomatic in about 85-90% of cases, in the remaining cases it presents as severe gingivostomatitis, with systemic symptoms and pyrexia mostly in infants. Resolution takes place in about 10 days.

—the disorder is often precipitated by:

- ❖ Fever.

- ❖ Sun exposure.
- ❖ Stress.
- ❖ The recurrent lesions may occur around mouth, on lips, perinasal area, and on the cheeks.



Herpes simplex



Herpes simplex



Herpes simplex



Herpes simplex

## 2.H.S.Gentalis

- Primary
- Recurrent

—It is caused mainly by HSV2, but can be caused by HSG1.

—It affects the glans penis and the shaft of the penis.

—In women, the vulvar region or labia minora is usually involved.

—Its precipitated by:

➤ Sexual contact.

➤ Menses.

➤ Stress.

➤ Fever.

—It is presented as in herpes simplex as painful grouped vesicles on an erythematous base ,but differ from Hs by:

○ Being larger in size.

○ The vesicles closer to each other.

○ More painful.

○ More recurrent.

Herpetic whitlow

Its herpetic lesion on fingers due to direct inoculation of virus in the skin.

## Eczema herpeticum

- It is herpetic lesions superimposed pre existing eczema or dermatitis.
- It is considered as one of the dermatological emergency that needs systemic antiviral and hospitalization in severe cases.

## How to treat?

- Aciclovir (5 per cent cream) is the most effective agent for shortening the attack if started early.
- Acyclovir tab. 200mgx5x5.
- when?
  - All primary herpes infections.
  - Eczema herpeticum.
  - Herpetic whitlow.



- ❑ Frequently recurrent lesions especially H.genitalis.
- ❑ Immunocompromised patients.



Eczema herpeticum



H. S.g



H. WHITLOW

Varicella Zoster Virus:

Chicken Pox

Herpes Zoster

- How to Present?
  - Pre eruptive stage
  - Eruptive stage
  - Post eruptive stage

—Pre eruptive stage: start as pain or burning sensation .

—Eruptive stage: groups of grouped vesicles on an erythematous base strictly on unilateral dermatomal distribution.

Post eruptive stage: 25-30% of patients develop pain after healing of skin lesions

—Treatment with systemic antiviral therapy is indicated in:

- All patients with eruptive lesions within 72 hrs(optimal )and up to 7 days after eruption(beneficial).

—Acyclovir 800mq X5X10



Varicella



H.Z