

Herpetic Whitlow a Rare Cause of Painful Finger

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Received: November 26, 2024; Accepted: December 07, 2024; Published: December 15, 2024

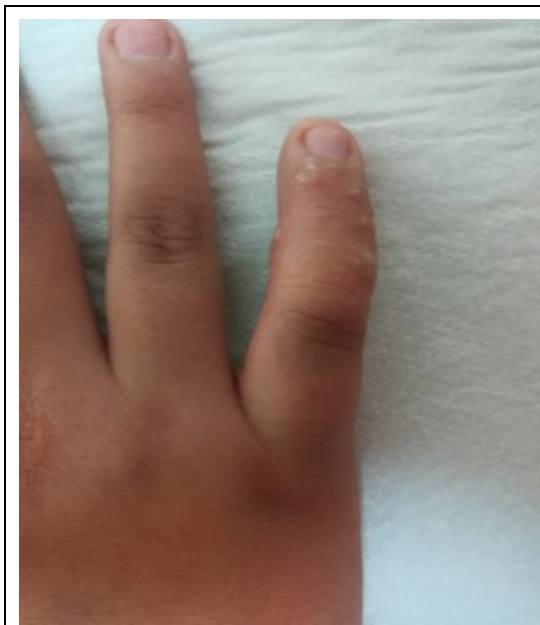


Figure 1: Vesicular lesions with clear fluid on the right fifth finger.



Figure 2: Erythema and swelling of several right fingers.

Clinical Image

A previously healthy 13-year-old male, with history of herpes simplex virus (HSV) infection, presents with very painful grouped vesicular lesions, with non-purulent clear fluid, on the right fifth finger (Figure 1). Skin lesions, erythema and swelling were present on several fingers (Figure 2). The diagnosis of herpetic whitlow and dyshidrotic eczema was made. The right fifth finger was treated symptomatically, and the eczema has been handled with topical corticosteroids. At a ten-day follow-up, all skin lesions had completely resolved. Herpetic whitlow is a rare cause of finger infection and an underdiagnosed HSV infection. It usually affects only one finger and is caused by inoculation of the virus through a break in the skin barrier [1].

The diagnosis should be suspected based on clinical signs [2,3]. Eczema and other skin lesions may increase the risk of herpetic whitlow. If left untreated, uncomplicated herpetic whitlow usually improves significantly within 10-14 days and completely resolves within 2-3 weeks. Only patients with primary HSV infection at multiple sites or recurrent herpetic whitlow may be considered for antiviral therapy [1]. Herpetic whitlow can be underdiagnosed and is often misdiagnosed as a bacterial infection [2]. The distinction is important as unnecessary medication should be avoided. We highlight the typical clinical signs and appropriate management of herpetic whitlow.

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