



INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

MILIA EN PLAQUE AT A NEW SITE IN THE ADULT POPULATION SUCCESSFULLY TREATED WITH A NOVEL MULTIMODAL APPROACH: A CASE REPORT AND REVIEW OF LITERATURE

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BACKGROUND: Milia en plaque (MEP) is a rare disorder distinguished clinically by numerous confluent milia on an erythematous base. No more than sixty cases have been reported in literature, majority of which are located on the post-auricular area. Although benign, it poses a cosmetic predicament among patients. Treatment options are limited, including various topical, systemic, and procedural modalities that were comprehensively reviewed in previous literature.

OBSERVATION: We report a case of a 25-year-old Filipino female with multiple white-yellow domed asymptomatic papules at the nasal tip, a novel site of MEP in the adult population. Dermoscopy showed numerous white and white-yellow cysts, scattered brown dots, and arborizing telangiectatic vessels. Histopathology revealed multiple epithelial-lined cystic structures filled with keratin on the dermis, typical of MEP. We treated the patient with a multimodal approach of utilizing topical tretinoin, manual extraction, electrocautery, and 30% trichloroacetic peel, which led to complete resolution with no recurrence and scarring after follow-up in six months.

KEY MESSAGE: MEP is a rare, primary variant of milia clinically distinguished as multiple, grouped, asymptomatic milia coalescing into a plaque in a specific location. The case presented represents the first case on the nasal tip in the adult population. No treatment modality has been established to be optimal in treating MEP. We propose a multimodal approach that is cost-effective, simple to perform, easily reproducible and better tolerated by the patient compared to other modalities described in previous literature.

