



## Vitiligo Repigmentation After SARS-CoV-2 Vaccine

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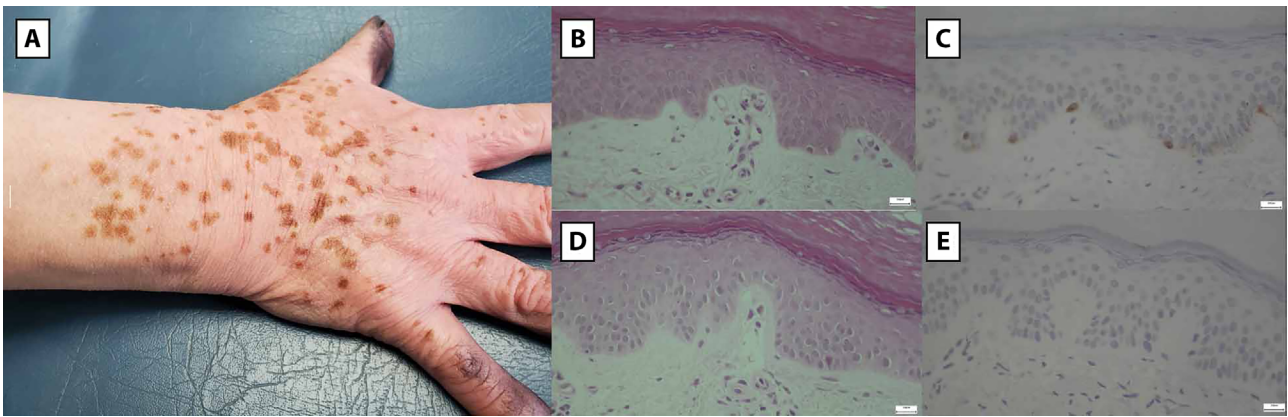
### Case Presentation

A 72-year-old male with a history of vitiligo that started during adolescence and hypertension—both conditions without any treatment—was sent by general practitioner because of the sudden appearance of asymptomatic, round pigmented macules on his vitiligo lesions, especially those on ears and hands, two days after receiving the first dose of SARS-CoV-2 vaccine BNT16b2. No new lesions appeared after the second dose. Clinically, the lesions looked like vitiligo re-pigmentation, but a skin biopsy was performed. In achromic areas, the biopsy showed a complete absence of melanocytes, while in the pigmented areas showed the presence

of melanocytes without any other significant changes. Given that the patient had universal vitiligo before the vaccine, he asked for a depigmenting treatment and was then treated with 10% monobenzyl ether of hydroquinone.

### Teaching Point

Since SARS-CoV-2 vaccines are relatively new, we still have a lot to learn about their potential adverse effect. There have been many reports of mucocutaneous symptoms after COVID-19 vaccines [1,2], including lupus, vasculitis and chilblains, their pathophysiology has not been completely understood yet, as mRNA vaccine are still new in our clinical



**Figure 1.** (A) Clinical picture of the hand of the patient, where the re-pigmented areas can be seen. (B,C) Histopathology of a re-pigmented area where melanocytes can be seen in the basal layer of the epidermis. (B) Corresponds to the H&E stain and (C) to Melan-A immunohistochemistry. (D,E) Absence of melanocyte in an achromic area of the hand. (D) Corresponds to the H&E stain and (E) to Melan-A immunohistochemistry.

practice. Even though new-onset vitiligo or worsening vitiligo has been described, we could not find any report about an improving vitiligo after any SARS-CoV-2 vaccine. This shows that we still have a lot to learn about this new disease and this new type of vaccine.

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