Inflammatory bowel disease (IBD) is made up of 3 clinical conditions: ulcerative colitis (UC), Crohn’s disease (CD), and indeterminate colitis (IC). The common denominator between them is bowel inflammation associated with an abnormal immune response. All these conditions usually present chronic relapsing pattern, alternating between active and latent phases. The etiopathogenesis is unknown; however, genetic predisposition, immunological dysfunction, environmental factors, and alterations in intestinal permeability all play important roles. Between 20 and 25% of patients with IBD develop it in childhood, normally during adolescence, and experience significant repercussions on pubertal growth and development.

Infliximab is a chimeric monoclonal antibody of the IgG1 class that blocks tumour necrosis alpha factor (TNF-α) activity, a cytokine that plays an important role in the tissue inflammation mechanism of IBD. The advent of anti-TNFs represented a huge advance in treating these conditions; patients with CD refractory to medical therapy (mesalazine, corticosteroids, and purine analogues) benefit from infliximab use (recommendation 1A)2. Infliximab is also currently used in the treatment of other conditions, such as rheumatoid arthritis, ankylosing spondylitis, psoriasis, and psoriatic arthritis. Paradoxically, infliximab can induce or trigger psoriasis in some patients.

Psoriasis is one of the most common dermatological diseases, affecting 1-2% of the general population. Psoriasis is a chronic inflammatory skin condition of polygenic inheritance associated with triggering factors such as trauma, infections (such as streptococcus), stress, and pharmaceuticals, particularly glucocorticoids, oral lithium, beta blockers, tetracyclines, and anti-malarial medications.

Infliximab is associated with adverse skin reactions such as rash, hives, itching, lupus-like rash, eczema, leukocytoclastic vasculitis, and cutaneous infections. Cases of anti TNF-α-induced psoriasis have been reported in recent years, generally after multiple doses, within weeks to years after initiation of treatment.