

AUTOIMMUNE BULLOUS DISEASES

CHILDHOOD VESICULAR PEMPHIGOID: DISCREPANCY OF CLINICAL AND HISTOPATHOLOGICAL FEATURES WITH DIRECT IMMUNOFLUORESCENCE EXAMINATION, A RARE CASE REPORT

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Background: Bullous pemphigoid (BP) is an autoimmune vesicobullous disorder that affects the elderly and rarely occur in children. Vesicular pemphigoid is a BP variant with atypical skin lesions, which adds to the diagnostic challenge. To best of our knowledge, only two other cases of childhood vesicular pemphigoid has been reported in the literature.

Observation: A 15-year-old girl presented with tense blisters on all over the bodies, palm and soles, with oral and genital mucosal lesions. On physical examination, the patient showed the clinical pictures of cluster of jewels and grouped vesicles of linear IgA dermatosis or dermatitis herpetiformis with mild itch. A histopathological examination shows a subepidermal blister housing neutrophils, multiple papillary microabscess and superficial perivascular-interstitial dermatitis supported the diagnosis linear IgA dermatosis or dermatitis herpetiformis. We performed a direct immunofluorescence and shows a linear deposition of IgG and C3 on basement membrane zone fit with the feature of bullous pemphigoid. The diagnosis of childhood vesicular pemphigoid was made. She was treated with methylprednisolone 0,75 mg/kg/day and showed a marked improvement after 2 weeks of therapy. The patient was added azathioprine 50 mg/day as the sparing agent and able to control the disease for 7 months with minimal dose of oral methylprednisolone.

Key message: Bullous pemphigoid rarely occur in children and the vesicular variant makes it more difficult to diagnose. The unavailability of immunofluorescence examination may lead to a diagnosis of other autoimmune bullous diseases. This report illustrates the discrepancy of clinical picture, histopathological and direct immunofluorescence examination showing the rare vesicular variant of bullous pemphigoid on children.