



AUTOIMMUNE BULLOUS DISEASES

NEONATAL DERMATOSES SECONDARY TO THE TRANSPLACENTAL TRANSFER OF ANTIBODIES DURING PREGNANCY

S Golbert⁽¹⁾ - A Olivera⁽¹⁾ - M Marchese⁽¹⁾ - C Busso⁽¹⁾

Hospital Universitario Austral, Dermatology, Buenos Aires, Argentina⁽¹⁾

Background: Neonatal lupus erythematosus (NLE) and pemphigoid gestationis (PG) are two rare diseases that develop due to the transplacental transfer of maternal autoantibodies. In both cases the cutaneous lesions are self-limited and resolve once the maternal antibodies are cleared. In the case of NLE, in contrast to the skin, the heart anomalies are permanent.

Observation: we present a case of a NLE and one of a neonatal PG. The first patient was a healthy 60-day-old newborn male who presented erythematous annular plaques of sudden onset on his face-extended to the trunk in the next days- that had developed 5 days prior to consultation. Histopathology of a lesion showed a superficial perivascular and interstitial dermal lymphocytic dermatitis. Laboratory studies yielded positivity for antinuclear antibodies (titer > 1/1280), anti-SSA-Ro and anti-SSB-La. Cardiologic evaluation ruled out a heart block. The mother was also evaluated, she exhibited both anti SSA-Ro and SSB-La antibodies. The case was diagnosed as a NLE and the lesions resolved a month after the initial evaluation without any therapy.

The second case was a 2-day-old newborn male at term who presented bullous lesions on his face, trunk and limbs. His mother had developed a gestational pemphigoid during her 28th week of pregnancy and was treated with meprednisone at 1 mg/kg/day orally, topical clobetasol and oral antihistamines. Given the suspicion of a PG, a biopsy and direct immunofluorescence were proposed to confirm the diagnosis. However, the lesions resolved 48 h spontaneously. Despite this, considering the clinical presentation of both the newborn and his mother, the dermatosis was interpreted as probably due to neonatal pemphigoid gestationis.

Key message: there are maternal diseases with circulating antibodies that can be transplacentally transferred to the fetus and cause characteristic cutaneous disease in the newborn.

