AUTOIMMUNE CONNECTIVE TISSUE DISEASES

# CUTANEOUS NEONATAL LUPUS ERYTHEMATOSUS: A CASE REPORT

*A Sanader Vucemilovic [1] - A Bubic [2] - A Markota Cagalj [2] - B Poljak [2] - N Puizina Ivic [2]*

*University Clinical Hospital Split, Dermatoneverology, Split, Croatia [1] - University Clinical Hospital Split, Dermatovenerology, Split, Croatia [2]*

BACKGROUND:Neonatal lupus erythematosus (NLE) is a rare autoimmune disease characterized by passive passage of anti-Ro autoantibodies from mother to fetus. In this report we present a case of infant with unrecognized cutaneous NLE who was born from mother with unrecognized SLE.

OBSERVATION:A four-month-old male infant presented with confluent annular erythematosus and desquamative lesions on the skin of periorbital and temporal part of the face and scalp and little scars on both temporal sides of the face. He is accompanied by his mother who was presented to us with annular scaly erythematosus lesions on face and chest. Mother has been complaining to her doctor of pain in her joints, changes on the skin of her hands, shoulders and chest for last year. She pointed out stiffness of the joints during mornings. Unfortunatelly, diagnose was not established on time. The problems worsened after she gave birth. From heteroanamnesis we found out that right after birth newborn had a changes on the skin of the face and scalp and sepsis. There was no involvement of the heart. Infant results showed positive ANA (1:80), SS-A(Ro60) 85 AU/ml, SS-A(Ro52) 151 AU/ml. Mother`s results showed also positive ANA (> 1:1280), SS-A(Ro60) 108 AU/ml, SS-A(Ro52) 216 AU/ml, dsDNA 232 IU/ml, SS-B(La) 97 AU/ml. After administration of local 1% hidrocortison on the affected skin, the skin lesions gradually improved.

CONCLUSION:It is important to include NLE in differential diagnosis of typical skin lesions in newborns. Furthermore, levels of serum autoantibodies should be tested among pregnant women with typical skin changes and neonates with skin changes, congenital heart blocks or cytopenia.