AUTOIMMUNE CONNECTIVE TISSUE DISEASES

EXTENSIVE FACIAL LUPUS PANNICULITIS OF LATE DIAGNOSIS IN CHILDHOOD

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Background: Lupus panniculitis is a rare variant of chronic cutaneous lupus that clinically presents with solitary or multiple painful subcutaneous nodules or large indurated erythematosquamous plaques. There are few cases reported of paediatric involvement, most of them with early diagnosis and opportune treatment. We present a patient with late referral to the Dermatology service, without previous treatment, who come up to our consultation with active cutaneous lesions and important aesthetic sequels of the disease.

Observation: An 9-year-old Latin-American girl presented with photosensitive plaques of 4 years that begin in the left cheek and in the last year extend to the chin and right cheek, without prior treatment. On examination, confluent nummular erythematous to violaceous plaques with atrophic appearance of size 0.5 cm to 1 cm, covering both cheeks and chin. Serum laboratory revealed positive antinuclear antibodies (1/640) with speckled pattern, slight hypocomplementemia and negative anti-double stranded DNA antibodies, with normal blood count and biochemistry. Histopathological examination revealed superficial, deep and perifollicular lymphocytic perivascular dermatitis with hypodermic septal and paraseptal involvement, associated with multinucleated giant cells and the presence of mucin, compatible with lupus panniculitis. The patient was started on Prednisone, Methotrexate and Hydroxychloroquine, with cessation of the appearance of new cutaneous lesions in the follow-up at 3 months and colour attenuation of existing lesions, but maintaining the atrophic appearance of existing lesions.

Key message: Lupus panniculitis can have disfiguring sequels in a few years which have a negative long term impact on life quality. Recognition of the clinical presentation of this disease allows and opportune treatment that can decrease consequences.