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AUTOIMMUNE CONNECTIVE TISSUE DISEASES

SUSPICIOUS ANNULAR LESIONS IN A NEWBORN: WHEN THE MOM IS THE KEY TO RESOLUTION.

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BACKGROUND: Cutaneous neonatal lupus erythematosus (NLE) is a rare autoimmune condition caused by the transplacentar transfer of autoantibodies from the mother to the fetus. It usually occurs at birth or within the first two months of life. The main features include multiple erythematous annular lesions with central resolution and scaling border, commonly located on face, scalp and trunk. In the 10% of the cases a cardiac disease can coexist. Prognosis of cutaneous NLE is favourable with negative antibodies in the first year of life. The treatment of skin lesions may include topical steroids and they resolve by 8 months without sequelae.

OBSERVATION: A three-months old female first-born from Ghana was brought to our Dermatologic Pediatric Unit for the onset of multiple cutaneous erythematous annular lesions on the face, arms, trunk and legs during the last two months. No other associated symptoms were referred, neither exposure to any risks. Although the mother was totally symptomless, in the clinical suspicion of NLE, her specific antibodies were looked for. Positivity for Anti-SSA/Ro and antinuclear mother's antibodies confirmed our diagnosis.

KEY MESSAGE: Appropriate dermatological diagnosis of NLE is important for both mother and newborn in order to rule out any systemic complications. In fact a half of the mothers could be affected by Sjogren's Syndrome or LES, others could only have positive history of connectivopathies or to be totally asymptomatic.





