DERMATOPATHOLOGY

SWEET'S PANNICULITIS IN A 4-YEARS OLD BOY WITH LANGERHANS CELL HISTIOCYTOSIS: A CASE REPORT

Arini Astasari Widodo [(1)] - Rahadi Rihatmadja [(1)] - Sondang Pandjaitan-sirait [(1)] - Nahla Shihab [(1)]

University Of Indonesia, Cipto Mangunkusumo Hospital/university Of Indonesia/dermato-venereology Department, Jakarta, Indonesia [(1)]

Background: Subcutaneous Sweet's syndrome or Sweet's Panniculitis (SP) is a rare entity. About 20% of Sweet's syndromes reported were associated with malignancy, mostly hematologic malignancy, but the prevalence of SP are still unknown due to the limited reporting. Clinically erythematous plaques or nodules are found in SP, while septal and lobular subcutaneous neutrophilic infiltrates are found on histopathological examination.

Observation: A 4-year-old boy with suspected Langerhans Cell Histiocytosis (LCH) was referred by a pediatrician for palpable purpura on his lower extremities. Two weeks prior to presentation he experienced high fever and pain on his ankle and knee which had made him unable to walk. Bone marrow aspiration test result was conclusive of LCH. Cranial and patellar X-ray found bone involvement. However histopathological examination showed PS with lobular and septal dense neutrophilic infiltrates on the subcutaneous fat. Characteristic features of LCH such as oval-shaped cells with eusinophilic cytoplasm and kidney-shaped nucleus was not seen. Negative result on CD1a and S100 immunohistochemistry study excluded the possibility of skin involvement in LCH. Patient was then diagnosed as LCH with SP, given prednisone for pain relieve, and planned for chemotherapy. SP is a rare entity of Sweet's syndrome, especially in children. Besides the classical form, there are also malignancy-associated Sweet's syndrome. In this case, LCH was suspected to have triggered the SP. Palpable purpura is an unusual form of SP.

Key message: Histopathological examination have a crucial role in establishing the diagnosis of SP.