

INFECTIOUS DISEASES (BACTERIAL, FUNGAL, VIRAL, PARASITIC, INFESTATIONS)

A CASE OF LEPROMATOUS LEPROSY WITH SECOND GRADE DISABILITY WITH MALNUTRION 16 YEARS OLD BOY

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Background: Leprosy among children is a public health problem also reflecting the disease's transmission in the community. Leprosy commonly causes physical disabilities which generate social stigma. Reactions or neuritis may lead to nerve damage and disabilities. Poverty and malnutrition is thought to be one of the risk factors causing in a failure of the immune response to Mycobacterium leprae. Inadequate intake of nutrition may affect the immune system and influence the progression of infection to clinical leprosy.

Observation: We reported a case of Lepromatous leprosy (LL) with grade II disability in a malnutrition with chief complaint there were painful reddish bumps on the right cheek, chin and ulcer on left cheek, left upper arm, both of lower arm, lower leg since one month ago. He suffered fever, malaise, and pain on his join. The physical examination BMI 16,7%, conjunctiva was anemis. Dermatological state revealed: infiltrates on face, erythematous bumps on right cheek, chin, multiple ulcers and xerotic skin. Motoric strength testing was weak on abductor digiti minimi, abductor policis brevis, interoseous dorsalis, tibialis anterior, contracture on left elbow, clawing hand on the 4th, 5th fingers on left and right hand, muscle atrophy (+), madarosis(+), stocking-glove pattern of sensory impairment (S-GPSI) (+). Slit skin smear revealed bacterial index of +4. Histopathological examination: atrophy epidermis, necrotic upper dermis, chronic inflammatory cells, lymphocytes, polymorphonuclear neutrophils, and foam cells around sebaceous and ecrine glands that support to LL leprosy with ENL reaction.

Key Message: The diagnosis was made based on the anamnesis, clinical findings, and laboratory findings. Disability that occurs in this case due to delay in diagnosis and treatment of patient. However, it is important monitoring the therapy and the late sequelae because the difficulty therapy and often are permanent.

Key words: leprosy, children, disability, malnutrition, anemic





