



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

RICKETTSIOSIS IN CHILDREN: ATYPICAL CLINICAL PRESENTATION

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Introduction : Rickettsiosis is an infection disease. This pathology could take on several clinical forms. It is most often from a benign evolution. The most severe forms seem to be related to a diagnostic delay.

We are reporting a new case with an atypical clinical presentation.

Observation : A 10-year-old patient with no significant pathologic ATCD presented 4 days before admission and following an insect bite, a localized pruritus with hot and painful erythematous swelling of the right knee, the evolution was marked by the appearance of an erythematous cupboard of the lower right limb, with a rash spread throughout the body, all in a context of 39 fever and asthenia, then the patient was put on simple amoxicillin and analgesic without improvement of his state.

Dermatologic examination revealed a hot and painful erythematous cupboard taking the leg and reaching the right thigh surmounted by a tense bull with haemorrhagic content interesting the internal face of the right knee with a maculopapular rash spread throughout the body associating a palmar involvement. The diagnosis of rickettsiosis was suspected and a treatment with doxycycline at a dose of 200 mg / day was started urgently with a good improvement after 7 days of treatment.

Conclusion : Rickettsioses are re-emerging, clinically polymorphic and potentially serious infectious diseases.

Our observation illustrated an atypical clinical presentation of rickettsiosis in the form of haemorrhagic bubble at the point of inoculation whose diagnosis is retained despite a negative serology while relying on other arguments of strong presumption.

The treatment is mainly based on doxycycline and macrolides in children under eight years of age.

