

PAEDIATRIC DERMATOLOGY

A TALE OF PSEUDOTAIL: A RARE CASE OF OCCULT SPINAL DYSRAPHISM

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Background: Diagnosis of occult spina bifida (OSB) is challenging without its commonly associated cutaneous stigmata, considering the embryological development. OSB is characterized by skin-covered lesions without exposed neural tissue and arises from a defect in the neural tube formation. Several skin findings have been known to be associated with OSB, including midline paraspinal lesions such as appendageal tails and localized hypertrichosis. Here, we present a case of OSB manifesting as an appendageal tail and a large sacral hemangioma. To the best of our knowledge, this association has not previously been reported.

Observation: A five-day-old boy was referred to our clinic for a sacral skin tag and diaper dermatitis. Physical examination revealed a soft, 5 cm, paramedial tail in the lumbosacral region with a deviated gluteal cleft, as well as a large red plaque with an area of a small ulceration on the buttock extending to the right upper thigh. These findings were suggestive of an appendageal pseudotail and segmental hemangioma, for which he was started on propranolol to prevent its proliferation and to treat ulceration. Imaging revealed a closed spinal dysraphism suggestive of lipomyelomeningocele in association with the congenital tail for which he underwent a laminectomy and tail removal at age of five months. Histopathological examination of the congenital tail showed a cutaneous polyp with a lipomatous core containing microscopic nerves and skeletal muscle. After surgery, propranolol was discontinued as the hemangioma was stable.

Key Message: Early diagnosis of spina bifida is crucial for early intervention and prevention of subsequent complications. Cutaneous manifestations of OSB provide the physician with clues that further investigations are warranted. Here we report the first case of pseudotail and segmental hemangioma in association with OSB. Healthcare professions should be aware of this association to allow early diagnosis and intervention.





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