



PAEDIATRIC DERMATOLOGY

ACUTE PAINFUL NIPPLES IN A FEMALE CHILD

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Background: A wide variety of dermatoses are associated with participation in specific athletic activities. For example, irritant dermatitis of the breast most commonly presents as the entity known as “jogger’s nipple” (JN).

Observation: A 10-year-old prepubertal girl was referred to our department with a 3-day history of painful and itchy nipples. There was no history of atopy. She denied any use of topical agent or trauma but recalled that these lesions began after 3 day-beach vacation. Her family history and prior medical history were unremarkable. Cutaneous examination revealed well-defined erosive and crusted lesions on both nipples without edema. There was neither bleeding nor exudation and areolas were normal. No other skin lesions were found. Her general and systemic examinations were within normal limits. The diagnosis of irritant dermatitis was suspected. Effectively, our patient was wearing a tight swimsuit when swimming. A treatment with topical steroids was initiated with significant improvement at 1-month visit.

Key message: Irritant dermatitis of the breast most commonly presents as the entity known as JN. It should be included in the differential diagnosis of a wide variety of skin lesions of the breast, in children, because it may mimic a number of cutaneous entities. To the best of our knowledge this entity has never been reported in children. To the best of our knowledge this entity has never been reported in children. This phenomenon results from repeated friction of the nipples against the shirt, the swimsuit, the sand or the surf hunt. The diagnosis is based on the context of sports activity, the bilateral acute involvement and the characteristic clinical features of the nipples. This diagnosis avoids unnecessary investigations in children. Prevention is essential especially in case of repeated high-risk activities.

