



PAEDIATRIC DERMATOLOGY

CUTANEOUS CONGENITAL MASTOCYTOMA: A VERY IMPORTANT DIFFERENTIAL DIAGNOSIS

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Background: baby born at 37 weeks' gestational age, from cesarean delivery, in good health. Height-weight parameters, post-natal hematochemical and instrumental were normal. The clinical evaluation at birth has highlighted a small lesion on the right nasogeniene region.

Observation: first dermatologic observation was done at the 7th day of life. At the right nasogeniene sulcus there were some small papules confluent in a polycyclic contoured plaque of the same color of the skin with whitish translucent surface and parenchymatous-elastic consistence ; Darier sign was negative. Epidermal nevus was the first diagnostic hypothesis. After four days a slight increase in size of the lesion with ulceration was observed and two new similar lesions of about 2 mm appeared near the first one and on the left tragus. A similar case with the same morphological appearance observed by prof. Bonifazi revealed a cutaneous leukemia; for this reason and due to the rapid growth white ulceration a punch biopsy was performed. The histological examination was diagnostic for cutaneous mastocytosis, showing widespread dermal infiltrate of fusiform mast-cells, positive tryptases, negative lymphocyte markers. Serum tryptase level was normal therefore we concluded for cutaneous congenital mastocytoma.

Key message: in our experience cutaneous mastocytoma is the most common form of mastocytosis in the pediatric age, but normally appears during the first years of life; generally punch biopsy is not necessary for the diagnosis in typical lesions. In this case the presence of the lesion from birth, the rapid growth with central ulceration and the negative Darier sign suggest to perform a biopsy for a very important differential diagnosis.

