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PAEDIATRIC DERMATOLOGY

## DERMATOLOGICAL MANIFESTATIONS OF PRIMARY IMMUNODEFICIENCIES: ABOUT 14 CHILDREN.

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Introduction: Primary immunodeficiencies can be represented by many clinical signs, digestive, respiratory, cutaneous and others. Cutaneous signs are frequently found and may be the first tell-tale signs. The cutaneous manifestations during primitive immunodeficiencies are very frequent and very varied. They are mainly represented by bacterial, viral or fungal skin infections. There are also common non-infectious skin manifestations, including eczematous lesions, erythroderma, skin granulomas, pigment disorders, dysplasia of the skin, hair and nails.

Objective: The purpose of our study is to recall the frequency of dermatological manifestations during primary immunodeficiencies, as well as to specify the different types of dermatological manifestations in order to establish an early diagnosis.

Material and methods: This is a retrospective study on the records of children hospitalized for primary immunodeficiencies in the pediatric department between June 2015 and September 2018.

Results: We collected 14 children dignosed with primary immunodeficiencies in the pediatric department. The average age was 2.68 years, with a female predominance (57%). Dermatological manifestations were found in 71% of cases, of which 73% occurred after establishing the diagnosis of primary immunodeficiencies and 27% was revealing the diagnosis. The cutaneous manifestations were predominated by bacterial infections found in 60% of cases, followed by inflammatory deseases in 42% of cases. There are also 2 cases of erythroderma and 2 cases of partial oculo-cutaneous albinism. The types of immune deficiency were: Hyper IgE syndrome in 2 patients, severe combined immunodeficiency











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(SCID) in 2 patients, 2 cases of Chediak higashi syndrome, 2 cases of Griscelli syndrome, one case of ataxia telangiectasia and a case of Bruton's disease.

Conclusion: The cutaneous manifestations of primary immunodeficiencies are very varied. They are sometimes the first tell-tale signs of PIDs showing the importance of their knowledge by dermatologists and pediatricians.





