



PAEDIATRIC DERMATOLOGY

ERYTHRODERMIC LICHEN PLANUS PEMPHIGOIDES IN A CHILD

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Background: Lichen planus pemphigoides (LPP) is a rare, acquired, autoimmune subepidermal bullous dermatosis characterized by tense bulla arising on lichen planus lesions and on uninvolved skin, histological demonstration of subepidermal bullae, and linear deposits of IgG and C3 along the BMZ on immunofluorescence of peribullous skin. LPP is rare in adults, but exceptional in children; indeed just 16 cases were reported. We report a rare case history of a 6-year-old boy with clinical and histological findings of LPP.

Observation: A 6-year-old Moroccan boy was admitted to our department, without medical history except pharyngitis that happened 3 weeks before an eruption of pruritic violaceous papules on hands and feet, evolving to erythrodermia in 3 months, with appearance of blistering on his forearms and legs. On clinical examination, he had widespread violaceous polygonal papules with numerous tense vesicles and erythematous bulla. The Nikolsky's sign was negative. A white reticulated pattern was present on the oral mucosa. There was no nail involvement. Histopathology of fresh bulla on lichenoid eruption was consistent with subepidermal blister containing neutrophils, and lichen planus (irregular acanthosis, compact orthokeratosis, dense lichenoid lymphohistiocytic inflammatory infiltrate with vacuolar change, and pigmentary incontinence). Indirect immunofluorescence was positive (1/160). Based on all these findings, the diagnosis of a erythrodermic lichen planus pemphigoides was made. The patient received a systemic treatment by corticosteroid (prednisolone) 0.5 mg/kg/day. Bullae formation and pruritus then ceased within 8 days. No relapse occurred after 4 months of follow up.

Key message: LPP in child is usually idiopathic, some cases had been described after varicella infection or sun exposure. In our case LPP seem probably triggered by the pharyngitis. the erythrodermic form of LPP was reported in just 11 cases in adults but never in children. We report the first case of erythrodermic LPP in child.

