



PAEDIATRIC DERMATOLOGY

## HERPES ZOSTER DUPLEX BILATERALIS IN AN IMMUNOCOMPETENT CHILD

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**Background:** Herpes Zoster (HZ) is characterized by eruption of grouped vesicles in a dermatomal distribution, which is unilateral. When two non contiguous dermatomes are involved affecting bilaterally, it is called HZ duplex bilateralis. HZ duplex bilateralis is extremely rare in children, with incidence of less than 0.1 percent of all HZ cases, and happens to develop in immunocompromised patients. This report describes a 12-year old girl with bilateral HZ without features of immunosuppression.

**Observation:** A 12-year old girl presented with complaints of vesicles on her abdomen, sides of trunk and back for 3 days. Two days prior to the eruption of vesicles, she had felt mild pain and burning sensation over the affected area. The lesions were sudden in onset as few grouped vesicles initially over her left hypochondriac region. The very next day, the lesions spread to the sides and back with simultaneous appearance of vesicles over right side of the chest and back. There was no history suggestive of immunosuppressed status.

On examination, there were grouped vesicles on erythematous skin. The lesions had bilateral dermatomal distribution (Left T8,9 and Right T6,7). The rest of the physical findings were unremarkable. Mucosal involvement was absent. Her HIV status was negative. Serologic test for anti-vericella-zoster virus immunoglobulin G (IgG) showed positive (37.91 units, Biological reference range: 9-11 units), but anti VZV IgM was negative. We performed T-Zanck smear from a vesicle. It showed acantholytic cells along with multinucleated giant cells. She was diagnosed with HZ duplex bilateralis and was treated with oral acyclovir.

**Key message:** HZ duplex bilateralis is a rare presentation in immunocompetent children. However possibility should be suspected even in immunocompetent children who present with characteristic history and skin findings. There is chance of misdiagnosis as it can also occur in children with no underlying factors for immunosuppression.

