



PAEDIATRIC DERMATOLOGY

HYPEREOSINOPHALY AND MORPHEA OF THE CHILD: SIGNIFICANT ASSOCIATION OR COINCIDENCE? SERIES OF 11 CASES

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Introduction: Morphea (SC) is the most common form of scleroderma in children. Hypereosinophilia has been described in a few case reports in association with pansclerotic morphea or schulman fasciitis (FE) in children.

Objective: To seek a significant explanation for this association, which can be an indicator of the evolution or its extension in depth and thus to guide us towards the best therapeutic choice

Materials and methods: This is a retro-prospective study, including all cases of pediatric morphea seen in our department from 2014 to 2018
All our patients had a blood count, with a clinico-biological correlation

Results: We collected 11 cases of Pediatric Morphea including: 7 girls and 4 boys with a sex ratio of 1.75, average age of our patients is 11.90 years, and the mean age of onset is 6.94 years

Hyperosinophilia was objectified in 7 of our patients presenting exclusively deep forms of the disease: 2 of which were morphées in saber stroke, one parry romberg, and 4 linear morpheas in large bands at the level of the lower limbs.

The absence of hyper-eosinophilia was noted in our 4 patients with superficial forms of the disease

The evolution was marked by changes in the rates of NCB depending on the course of the disease, regression in patients who showed improvements after systemic treatment, and persistence in patients still having active disease.

Conclusions: In our series, Hypereosinophilia has been observed in all our patients with a deep (exclusively) comforting Morpheus may be by this, the theory suggesting that the FE is a form of deep Morpheus, or the probability of existence of a overlap syndrome

Our message is that looking for a hyper PNE in front of a child's morphea could improve its prognosis, prompting us to start systemic treatments in earlier stages.

