PAEDIATRIC DERMATOLOGY

I SAW THE SIGNS: A CASE OF A 15 YEAR OLD FEMALE WITH DERMATOMYOSITIS

Hl Panlilio [(1)] - Ap Ibanez [(1)] - D Arcega [(1)] - E Prieto [(1)]

East Avenue Medical Center, Dermatology, Quezon City, Philippines [(1)]

Background: Dermatomyositis is an idiopathic inflammatory myopathy affecting the skeletal muscle and skin. Its incidence is 3.2 cases per million children per year. It occurs in children 2 to 17 years of age with an average age of onset at 7 years old.

Observation: This is a case of a 15 year old Filipino female who presented with a 10 year history of initially erythematous patches over her upper eyelids and erythematous papules over her hand joints which worsened upon sun exposure. Previously assessed as Juvenile Dermatomyositis by a pediatric rheumatologist, she was on oral medications for 4 years which caused resolution of lesions. However, in 2015, there was reappearance of her previous lesions on the face and now involving the shoulder, scalp, nape and chest which were still exacerbated by sun exposure. Areas of hypo-hyperpigmentation over the arms, chest and back and thickening of previously flattened erythematous papules over her hand joints were also noted. Histopathology revealed interface dermatitis while direct immunofluorescence revealed consistent with Dermatomyositis or Lupus Erythematosus. Normal lactate dehydrogenase, creatinine kinase MM and C3 levels and negative ANA and anti-dsDNA ruled out lupus erythematosus. Mometasone cream, Clobetasol + Vaselina Blanca, Sunblock SPF 30 and above and mild lotion were given. Ophthalmology did baseline eye screening. Rheumatology co-managed and prescribed the patient with Hydroxychloroquine, Calcium + Vitamin D and Prednisone with marked improvement after 2 months.

Key Message: Juvenile Dermatomyositis has favorable functional outcomes with patients having a good health-related quality of life and only a few showing severe muscle weakness or physical disability at follow-up assessment. Prior to corticosteroid treatment, mortality approached 33%. But with the early, aggressive use of glucocorticoids, mortality rate in children has reduced to less than 10%.