



PAEDIATRIC DERMATOLOGY

IDIOPATHIC FACIAL ASEPTIC GRANULOMA: A DIAGNOSTIC CHALLENGE THROUGH TWO CASES.

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Background: Idiopathic facial aseptic granuloma (IFAG) is a rare, benign lesion that occurs in very young children. The challenge is to diagnose this entity correctly, ideally based on clinical features, to avoid surgical intervention and unnecessary treatment interventions.

Objective: To raise awareness and highlight the diagnostic challenges of this entity.

Observation 1: A 6-year-old healthy boy who was seen for asymptomatic nodule on the right cheek that had arisen 2 months earlier. Dermatological examination revealed a firm, painless erythematous-violaceous nodule with telangiectatic surface in the right infra-orbital region, measuring 1.5 cm in diameter. Upon physical examination, the child was afebrile and had no palpable regional lymphadenopathy. There was no history of insect bite or trauma. Histological examination revealed an epidermal atrophy and dermal inflammatory infiltrate consisting of histiocytes with basophilic inclusions. Periodic acid-Schiff and Giemsa stains were negative. The evolution was favorable with spontaneous regression without any recurrence or aesthetic sequelae.

Observation 2: A 30-month-old girl was referred to our department for a 6-month history of a facial nodule on her left cheek. Her skin examination revealed a well-demarcated erythematous nodular lesion of 25 mm slightly indurated in the infra-orbital region. There was no palpable lymphadenopathy or hepatosplenomegaly. Skin ultrasound of the nodule showed a well-defined heterogeneous solid, hypoechoic dermal lesion without calcium deposits. Treatment with oral fucidin had been prescribed for 30 days. The lesions presented a progressive improvement and resolved spontaneously after 2 months, leaving a slight depressed scar in the center without recurrence with a 4 months follow-up.

Key message: IFAG must be mentioned in front of any nodular lesion of child's face, characterized by a prolonged course but heals spontaneously or in response to antibiotic treatment. It is a good prognosis condition that should be managed in a non-aggressive manner.

