



PAEDIATRIC DERMATOLOGY

## INVERSE PITYRIASIS ROSEA IN A CHILD

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**Background:** Pityriasis rosea (PR) is a common papulosquamous eruption of unknown etiology, with many atypical presentations. The inverse variant is uncommon and occurs in children more often. Herein, we report a case of inverse PR in a child.

**Observation:** An 11-year old girl, with no medical history, presented with a non pruritic eruption of the inguinal folds for the past two weeks. Physical examination revealed a localized rash of the groins, combining a 3 cm erythematous and annular patch with peripheral collarette of scale with similar but smaller lesions as well as non annular erythematous small papules with fine scales. These lesions were mainly located in the inguinal folds, involving the inner side of both thighs and labia majora. The rest of the physical examination, including mucous membranes and skin folds was within normal limits. Mycological examination was negative. The diagnosis of inverse PR was clinically made. Histological examination concluded to a spongiform dermatosis. The skin tissue samples were negative for human herpesvirus 7 DNA. The patient was reassured about her atypical PR, which resolved within 4 weeks.

**Key message:** PR usually occurs in young healthy persons between the ages of 10 and 35. It commonly presents on the trunk as oval scaly papules and plaques arranged along skin tension lines in a "Christmas tree" pattern. However, this presentation is not universal, especially in children and adolescents, in whom lesions may be concentrated in the inguinal and axillary areas, defining the inverse variant. The differential diagnosis includes atopic dermatitis, nummular eczema, tinea corporis, contact dermatitis, psoriasis and adverse drug reaction. The presence of the herald patch in our patient facilitated the diagnosis of PR, which was further supported by histological findings and a spontaneous favourable outcome.

