

PAEDIATRIC DERMATOLOGY

NEONATAL LUPUS ERYTHEMATOSUS: ABOUT 6 CASES

H $Mesrati^{(1)}$ - R $Chaabouni^{(1)}$ - F $Frikha^{(1)}$ - E $Bahloul^{(1)}$ - S $Boudaya^{(1)}$ - A $Masmoudi^{(1)}$ - H $Turki^{(1)}$

Faculty Of Medicine Of Sfax, Hedi Chaker Hospital, Dermatology Department, Sfax, Tunisia (1)

INTRODUCTION: Neonatal lupus erythematosus (NLE) is an uncommon autoimmune disease manifested primarily by cutaneous lupus lesions and/or congenital heart block. We present a case series of 6 patients diagnosed with NLE.

OBJECTIVE: To study clinical manifestations, investigations and outcomes of NLE patients.

MATERIAL AND METHOD: A retrospective descriptive study of all NLE cases diagnosed in our department during January 2006 to December 2017. The diagnostic criteria required the presence of clinical symptoms plus positive anti-Ro/SSA or anti-La/SSB or both.

RESULTS: During the 12 years of study, we collected 6 cases including 3 girls and 3 boys (sex ratio = 1). Age of onset of clinical manifestations was from birth to 40 days with median age of 15 days. In all cases, cutaneous lesions included annular, erythematous and infiltrated lesions with a micropapular border and clear center. Size of lesions was between 0.5 and 4 cm. Cutaneous lesions was localized in the face and scalp in 2 cases, and generalized affecting the scalp, face, trunk and limbs in 4 cases. Only 2 mothers of the NLE infants were diagnosed as lupus erythematosus but completely asymptomatic during pregnancy. In the other cases, no history of lupus or other autoimmune disease was reported. ANA was positive in in all newborns and their mothers (anti-Ro and/or anti-La). No cardiac, hematological, hepatic or neurological abnormalities were found. There was no mortality during the study. All the clinical symptoms disappeared after 4 months of age (10days-8months).

Conclusion: NLE should be suspected among neonates or young infants presenting with skin rash with multi-system involvement despite a lack of concurrent maternal autoimmune diseases. Anti-Ro/SSA and/or anti-La/SSB are the most useful laboratory diagnosis. Most NLE patients without congenital heart block have relatively good prognosis.





