PAEDIATRIC DERMATOLOGY

PIGMENTARY MOSAICISM IN CHILDREN: CLINICAL STUDY OF 100 CASES

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Introduction: Pigmentary mosaicism is an umbrella term that includes hypomelanoses of ito, linear and whorled nevoid hypermelanosis, hypopigmentation and hyperpigmentation distributed along the archetypical patterns of cutaneous mosaicism (type 1a: narrow bands, type 1b: broad bands, type 2: checkerboard pattern, type 3: phylloid pattern, type 4: patchy pattern, type 5: lateralization pattern, type 6: sash-like pattern). It is associated with extracutaneous abnormalities mainly neurological and musculoskeletal system.

Objective: To study the epidemiological features, clinical pattern and systemic association of pigmentary mosaicism in children presenting at a tertiary care children hospital.

Materials and Methods: A cross sectional, descriptive study of children less than 18 years diagnosed with pigmentary mosaicism presenting to department of pediatric dermatology at our child institute during the period January 2015 through December 2017 were included. All demographic and clinical details were collected on a predesigned proforma.

Results: A total of 100 cases diagnosed with pigmentary mosaicism were included in the study. Age of presentation was 10 days to 15 years. 57% were boys and 43% were girls. Onset of skin lesions were at birth in 78% and 19% in infancy. 92% children were born at term and 8% were preterm. 35% children were born out of consanguineous marriage. Hyperpigmentation was exhibited in 20%, hypopigmentation in 68% and combination in 12% children. The most common pattern was narrow band (47%), followed by broad band (29%), phylloid pattern (10%), patchy pattern (7%), whorled pattern (4%) and checkerboard pattern (3%). The most common site was lower limb (63%) followed by trunk (53%). Extracutaneous features were in 52% children. 31% children had central nervous system involvement (seizures in 14%, developmental delay in 16%), 4% had congenital heart disease.

Conclusions: Our study showed high percentage of extracutaneous involvement. Any child with pigmentary mosaicism should be thoroughly investigated and followed for systemic

involvement.