

PAEDIATRIC DERMATOLOGY

PSORIASIFORM ERYTHRODERMA IN CHILDREN: DIAGNOSIS AND THERAPEUTIC DIFFICULTIES

G Sami (1) - F Hali (2) - S Chiheb (3)

Ibn Rochd University Hospital, Dermatology, Casablanca, Morocco ⁽¹⁾ - Ibn Rochd University Hospital, Dermatology, Casablanca, Morocco ⁽²⁾ - Ibn Rochd University Hospital, Dermatology, Casablanca, Morocco ⁽³⁾

Erythroderma in children is a rare and severe condition. It constitutes a considerable scientific challenge for the dermatologist.

Our study describes the clinical profile of erythroderma in children and the difficulties of therapeutic management.

We have conducted a retrospective study based on the epidemiological and clinical data concerning 12 children, covering a period of 5 years from 2013 to 2018.

First degree consanguinity was found in 3 children. Two patients had deaths among siblings. The average age was 2.5 years from new borns to 7 years old children. Erythroderma was observed in the first year of life in 6 patients, three of them were newborn. Three patients had a history of atopy and one patient had a history of psoriasis. The symptomology was dominated by dry scales in 7 patients and a parakareratosis of the scalp in 9 children. Nails involvement was observed in 9 children. One patient had temporal and occipital alopecia.

Biologically, the value of immunogloobulins and lymphocytes sub-populations was normal. We noticed only two cases of hypereosinophilia.

We retained clinically and histologically the diagnosis of psoriasis in 8 patients, 4 of them was pustular, severe atopic dermatisis and ichtyosis in 2 patients respectively.

Five children were treated with retinoids, four were treated with cyclosporine and three patients received topical steroids. Only the patients who had atopic dermatisis and 3 of the patients who had psoriasis clinically improved.

The possible etiologies are large, they are dominated by inflammatory dermatosis especially psoriasis.

The diagnosis and therapeutic difficulties lie in the non specificity of the clinical and histological signs. Therapeutic arsenal is very limited in our context and the results are usually disappointing. The evolution can be very long, altering and interfering.

Regardless of it etiology, erythroderma in children remains a severe condition that acquires precise diagnosis and long term care.





