



PAEDIATRIC DERMATOLOGY

REFRACTORY INFANTILE BULLOUS PEMPHIGOID SUCCESSFULLY TREATED WITH IVIG.

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Introduction: Infantile bullous pemphigoid (BP) is more rare than the adult form and manifests differently. In the limited reported cases, treatment tends to include topical or oral steroids, dapsone, and immunosuppressants. A few case reports have shown successful treatment with IVIG. Here we report a case of refractory infantile BP treated successfully with IVIG.

Case: A 3-month old boy presented with three weeks of a blistering rash. Physical examination revealed a well appearing infant with diffuse tense bullae and urticarial plaques on the face, chest, abdomen, back, arms, legs, hands and feet. Biopsy for H&E and DIF were consistent with bullous pemphigoid. He continued to worsen despite 6 weeks of topical triamcinolone, prednisolone 2 mg/kg/day, and dapsone 2 mg/kg/day. IVIG was then initiated with rapid improvement leading to complete resolution with no recurrence after 4 total doses of IVIG.

Conclusion: Bullous pemphigoid is rare and presents differently in infants versus adults, namely it generally involves the hands, has diffuse skin involvement with a more severe presentation and a good long term prognosis. IVIG should be considered if standard treatment with oral corticosteroids and dapsone fail.

