



PAEDIATRIC DERMATOLOGY

SKIN MANIFESTATIONS IN PAEDIATRIC PATIENTS TREATED WITH TNF-ALPHA INHIBITOR FOR INFLAMMATORY BOWEL DISEASE: A RETROSPECTIVE STUDY

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Background: TNF antagonists are effective in the treatment of several inflammatory diseases, including psoriasis and inflammatory bowel disease (IBD). Their increasing use has raised the identification of cutaneous side effects (CSE).

We conducted a retrospective study of patients younger than 19 years of age with IBD under anti-TNF alpha treatment, referred to a paediatric dermatology clinic between 2013 and 2016.

Observation: From 343 patients with IBD under anti-TNF alpha in the period studied, 40 presented cutaneous side effects (CSE) potentially related to the treatment. The most frequent IBD was Crohn disease (82%). 42% of patients had family history of eczema/psoriasis (vs 20% in patients without CSE). CSE observed included psoriasiform eruption (50%), bacterial infections (20%), eczematous eruptions (12%), alopecia areata (2%), hidradenitis suppurativa (2%) and lupus-like reaction (2%). The most frequent sites of psoriasiform eruption were skin folds (45%) and scalp (35%).

Key message: Our case series in patients with IBD under anti-TNF therapy is one of the first to include side effects others than psoriasis and one of the first to be conducted in children. The latency period of CSE onset was more than 12 months, and was not associated to IBD activity. No differences in sex, age and BMI were found between patients with CSE and the total IBD cohort. The most frequent CSE is psoriasiform eruption and there is a predilection for the skin folds and scalp, with a striking weeping appearance, requiring treatment of a superimposed bacterial infection.

