



PAEDIATRIC DERMATOLOGY

TRANSIENT SYMPTOMATIC ZINC DEFICIENCY IN A PREMATURE TRANSFUSED INFANT.

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Background: Transient symptomatic zinc deficiency is a rare disorder clinically indistinguishable from acrodermatitis enteropathica, an autosomal recessive disorder of enteric zinc absorption, characterized by periorificial and acral dermatitis that usually occurs in infants especially if prematurely. It is fundamental to differentiate between congenital and acquired forms mainly because of the duration of zinc therapy. In the acquired form it is variable, but always limited in time, while in the congenital one it is essential all life long.

Observation: We introduce the case of a 8-weeks-old baby boy, born at 32 weeks of gestation, who has turned up with a history of demarcated, erythematous, erosive and exudative patches with overlying crusts on the perianal, perioral and acral areas. Before coming to our outpatient clinic, he was treated for anemia with blood transfusion. Laboratory examinations have revealed lowered zinc levels in the infant's serum (0.5 mg/L; normal 0.70-1.50 mg/L). Acquired zinc deficiency due to prematurity has been diagnosed based on clinical and laboratory examinations. After starting oral zinc replacement therapy (0.5 mg/kg/day), the skin lesions completely disappeared within the first few weeks. After 3 months, zinc replacement therapy was stopped and we did not observe further relapses in follow-up examinations.

Key message: When dealing with premature babies presenting with periorificial dermatitis, we always have to keep in mind zinc deficiency as a possible cause. Symptomatic zinc deficiency can be easily diagnosed by careful examination and effectively treated with oral zinc substitution.

The case we presented illustrates the importance of zinc in preterm infants and aims to stimulate awareness for this disorder which probably will become more and more frequent, because of the rising rate of premature infants.

