PIGMENTATION

TWO CASES OF PEDIATRIC-ONSET LINEAR MORPHEA WITH CONCURRENT SEGMENTAL VITILIGO

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Background: Linear morphea and segmental vitiligo are uncommon autoimmune diseases with concomitant occurrence rarely documented. We describe two cases of linear morphea and segmental vitiligo co-occurring in pediatric patients.

Observation: Patient one is a nine-year-old male who presented with a two-month history of depigmented patches on the left side of the head and left extremities consistent with vitiligo. Concurrently, hypopigmented, sclerotic plaques had developed on his left leg and abdomen consistent with morphea upon biopsy. The morphea was strictly unilateral while the vitiligo crossed the midline around the mouth. He was managed with methotrexate and systemic steroids which controlled his morphea but minimally affected his vitiligo. Lab work noted positive anti-nuclear antibody and lupus anticoagulant.
Patient two is a 16-year-old female who presented with an 11 year history of depigmented patches on her right upper extremity and breast consistent with vitiligo. Additionally, she had progressively worsening sclerotic, hyperpigmented skin of the right leg and arm and one sclerotic plaque on her left thigh present for the last 10 years. Biopsy was consistent with morphea. She was started on methotrexate and systemic steroids. Lab work was notable for positive anti-nuclear antibody titer of 1:2560.

Key Message: The presence of segmental vitiligo and homolateral linear morphea appears to be a rare phenomenon with few documented cases, of which our patients are among the youngest reported. Interestingly, both patients had one of the disease “spill” across the midline – morphea in one patient and vitiligo in the other. Mosaicism is a possible causative factor in these diseases. Linear morphea has been associated with the presence of systemic autoimmunity markers. It is possible that the presence of both linear morphea and segmental vitiligo amplify the risk of autoimmunity, given that both patients had positive anti-nuclear antibodies and one had a positive lupus anticoagulant.