



TROPICAL DERMATOLOGY

## TUBERCULOID LEPROSY (TT) IN CHILDREN LEADING TO THE INDEX MULTIBACILLARY (MB) CASES

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Background: “zero leprosy in children” one of the global targets of World Health Organization (WHO), is a challenge for Brazil, the second most endemic country in the world regarding leprosy and responsible for 151,764 new leprosy cases from 2012 to 2016. According to WHO 18,230 new child leprosy cases were detected in endemic countries in 2016 and Brazil detection rate in children was 4,46 cases/100.000 habitants.

Observation: the authors present four clinical cases of polar Tuberculoid leprosy (TT) with nodular leprosy in Childhood variant feature (NLC), diagnosed in three boys and one female, from 2 to 8 years old in which the signs evolution indicates the late diagnosis of their respective parents. So It is possible that all were infected early in their life in close contact with Multibacillary leprosy (MB). One of them was first diagnosed and then her mother was detected soon after; two were diagnosed in the first household contacts examination after their mothers had been diagnosed with advanced diffuse leprosy. The last one presented in his histopathology exam a typical tuberculoid granulome, while the skin lesion had almost healed as referred in NLC. He was only detected by domiciliary visit, as his father who had MB leprosy, did not bring him to the clinic, as per Ministry of Health guidelines. All patients were treated and cured following Brazilian guidelines.

Key message: the four cases presented illustrate that NLC is a form of TT leprosy observed in children who are able to build up an effective response against *M. Leprae* infection, promptly. While children with anergic spectrum response may present the disease later. Therefore, children with NL and paucibacillary forms of leprosy can lead to MB transmission cases diagnosis and treatment, which reinforce a permanent training programmes in endemic countries, for health professionals including dermatologists and also pediatricians.

