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Case Report

Yellowish Plaque on the Scalp of a Nursling, what's your Diagnosis?

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Case report

A 6-month-old girl presented with a 2- month history of a solitary slowly enlarging soft yellow plaque located at the vertex, with no other associated sign.

General examination had found a baby in good general condition, toned and reactive, with on dermatological examination a yellow plaque of 3 cm of large roughly oval, with hairy surface (Figure 1)

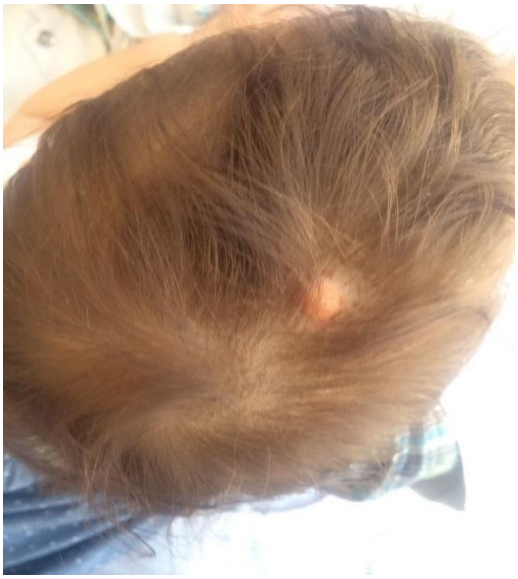

Figure 1: yellow plaque of 3 cm of large roughly oval, with hairy surface located at the vertex

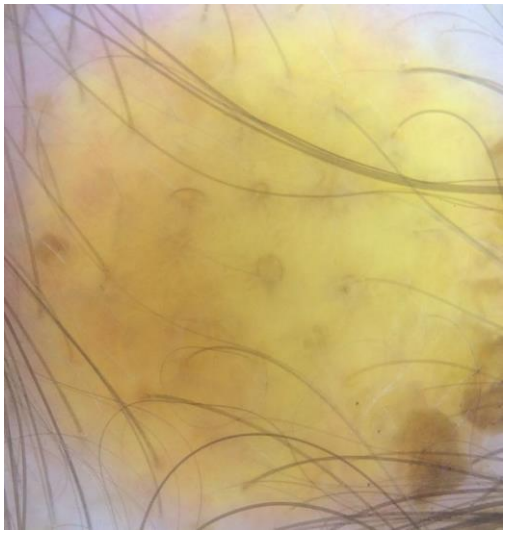

Figure 2: Dermoscopy showing orange-yellow background colouration with clouds of xanthomatous deposits

The dermoscopy had objectified: an orange-yellow background coloring with clouds of xanthomatous deposits (Figure 2).

The rest of the somatic examination was unremarkable

Given the age of the infant, the clinical history, the appearance of the lesion, and the dermoscopy strongly suggestive of the diagnosis, a conservative management was adopted, with the beginning of regression of the lesion in the following year, without the appearance of new injury with a hindsight of four years

What is your Diagnosis?

juvenile xanthogranuloma (JXG) is a common form of non-Langerhans cell histiocytosis, mild, with good prognosis , First described by Adamson in 1905[1], its current nomenclature was adopted in 1954.[2] and its manifests as asymptomatic yellow-red papulonodules that usually occur in childhood [3] usually in the first months of life [4] and spontaneously regress within a year of formation.[3] Lesions may be solitary or multiple, and although they are most often found in the skin, they can also develop within other organs [5]

In early stages it is pink to red with a yellow tinge , but with time it acquires a yellow-brown hue and may develop occasional telangiectases on the surface[6]

Because of its benignity and transitory character, it is estimated that it is an underdiagnosed entity and, therefore, of unknown incidence [7]

Extracutaneous involvement is described, and is estimated to occur in 4% of cases, affecting any organ or tissue [8] Risk factors for extracutaneous involvement are age under two years and the presence of multiple lesions [5].

Diagnostic is fundamentally clinical , but dermoscopy can improve diagnostic sensitivity by showing a characteristic orange-yellow background colouration, with 'clouds' of paler yellow deposits consistent with a xanthogranulomatous dermal infiltrate. The 'clouds' of paler yellow deposits are similar to those seen in sebaceous hyperplasia [3] as in our patient.

The prognosis of patients with exclusively cutaneous involvement is excellent, with spontaneous remission in months or a few years, and relapses are rare.[7]In some cases, a small residual hyperpigmented scar may remain.Surgical removal may be considered only for cosmetic reasons, especially in cases of giant JXG[9]

References:

1. Adamson HG. (1905) Society intelligence: the dermatological society of London. Br J Dermatol.17:222.
2. Helwig EB, Hackney VC. (1954) Juvenile xanthogranuloma (nevoxanthoendothelioma). Am J Pathol.30:625-626.
3. Palmer A, Bowling J. (2007) Dermoscopic Appearance of Juvenile Xanthogranuloma. Dermatology [Internet]. S. Karger AG. 215(3):256–259.
4. Mancini AJ, Krowchuk DP. (2019) Xanthogranulome juvénile. Dermatologie de L'enfant [Internet]. Elsevier.452–455.
5. Dehner LP. (2003) Juvenile Xanthogranulomas in the First Two Decades of Life: A Clinicopathologic Study of 174 Cases With Cutaneous and Extracutaneous Manifestations. The American Journal of Surgical Pathology [Internet]. Ovid Technologies (Wolters Kluwer Health); May;27(5):579–93.
6. Cohen BA, Hood A. (1989) Xanthogranuloma: report on clinical and histological findings in 64 patients. Pediatr Dermatol.6:262-266.
7. Xantogranuloma juvenil solitario congénito.(2017) Caso clí nico. Archivos Argentinos de Pediatria [Internet]. Sociedad Argentina de Pediatria.1;115(1).
8. Patel BC. Juvenile xanthogranuloma. Medscape.com [home page on the Internet]. [cited 2017 Oct 10].
9. Rana A, de Waal Malefyt S.(2012) An infant who has dome -shaped papules. Pediatr Rev.33:86-88

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