

Rash in an Infant: Blast from the Past

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QUESTION

A one-month-old male infant, born at 38-weeks gestation, at home, to an unbooked 28-year-old woman, was brought with complaints of brownish scaly rash over face and abdomen of 5 days' duration. The infant was pale and irritable. Examination revealed multiple flaccid vesicles, multiple erosions with crusting, and extensive scaling (Fig. 1a). The child also had thickened palmoplantar skin with desquamation (Fig. 1b) along with scrotal and perianal involvement (Fig. 1c). There was nasal

congestion and mucopurulent discharge from both the eyes. The abdomen was distended with hepatosplenomegaly. Laboratory investigations revealed a hemoglobin of 8.3 g/dL, reticulocyte count of 6%, total leucocyte count of 17,250/ μ L, and platelet count of 87,000/ μ L. Coomb's test was negative, C-reactive protein (CRP) was 9 mg/L, serum aspartate aminotransferase (AST) level 33 IU/L, serum alanine aminotransferase (ALT) level 19 IU/L, and total bilirubin level 0.5 mg/dL. What is the likely diagnosis?

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Fig.1a Erythematous macules, flaccid pustules and extensive scaling involving the face. Perioral fissuring and erosions can be seen. Mucopurulent discharge from the eyes with matting of eyelids is present.



Fig.1b Erythematous macules with superficial scaling involving the soles.



Fig.1c Involvement of the diaper area with superficial erosions and macular lesions.