

Dermatite séborrhéique : une même image chez un nouveau-né et sa mère

Seborrheic dermatitis : the same picture in a new born and his mother

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Case 1

A 32 year-old healthy woman, with familial history of psoriasis, with no previous skin lesions was addressed to us for yellowish greasy scales and slight erythema, very well delineated, on the eyebrows and frontal area (Fig. 1), accompanied by pruritus and anxiety. The patient reported the abrupt onsets of the lesions 24 hours before consultation. No drug intake, no topical medication on the face were reported.

A diagnosis of seborrheic dermatitis was affirmed, the diagnosis of psoriasis was ruled-out, a short systemic

treatment with itraconazole and cleansing agents were recommended with positive results.

Case 2

A newborn, male gender was seen in Dermatology Unit for yellowish greasy scales on the eyebrows, preauricular and frontal areas (Fig. 2), observed by his mother (Case 1) 24 hours after delivery. The newborn, aged 24 hours, came from a non-consanguineous marriage, no lesions on other sites of the body were observed on clinical examination. The child was in good health state.



Figure 1. Seborrheic dermatitis on the forehead in a 32 years-old woman.



Figure 2. Seborrheic dermatitis on the forehead in a newborn.

Seborrheic dermatitis is characterized by yellowish greasy scales, well demarcated, with a distinctive distribution: the scalp, eyebrows, glabella, nasolabial and nasofacial folds, cheeks, peri-auricular skin, pre-sternal and interscapular, areas rich in sebaceous glands. Sometimes may occur in flexural areas: axillae, groin, anogenital skin, infra-mammary skin and the umbilicus [1,2].

A clinical diagnosis of seborrheic dermatitis facial involvement was admitted, the family reassured about the benignity of the skin manifestations and normal hygiene measures (ketoconazole 2% shampooing)

were followed by clearing of the lesions within 5 days. The clinical resemblance of the lesions despite the difference in years (1 day vs 32 years) and gender was the hallmark of the two cases.

References

1. Valia RG. Etiopathogenesis of seborrheic dermatitis. *Indian J Dermatol Venereol Leprol* 2006; 72: 253-5.
2. Chiriac A, Chiriac AE, Murgu A, *et al.* Seborrheic dermatitis eye lid involment (seborrheic blepharitis) in children not a rare clinical observation. *Our Dermatol Online* 2012; 3: 52-3.