We read with interest the report by Siedner-Weintraub et al. (1), who found that only 30 out of 119 children with an initial diagnosis of erythema multiforme (EM) (20 girls, 10 boys, age range 4–18 years) met the Bastuji-Garin classification criteria recommended for diagnosis of this condition. Of the initially misdiagnosed cases, 59 had a non-specific eruption, 29 had features consistent with urticaria multiforme and 2 had acute haemorrhagic oedema of young children. Stimulated by this report, we re-evaluated the characteristics of 35 Swiss children with an initial diagnosis of EM (2–4). The diagnosis of EM was confirmed in only 18 cases (12 girls, 6 boys, age range 4–13 years). Of the 17 initially misdiagnosed cases, urticaria multiforme was diagnosed in 8 cases (3 girls, 5 boys, age range 4 months to 12 years), acute haemorrhagic oedema of young children in 6 cases (2 girls, 4 boys, age range 2–19 months), and non-specific eruption in the remaining 3 cases (2 boys, 1 girl, age range 3 months to 13 years).

In conclusion, EM exclusively affects children ≥4 years of age. Furthermore, acute haemorrhagic oedema of young children is often misdiagnosed either as EM or as non-specific eruption. Diagnosis of acute haemorrhagic oedema is made clinically in children ≤24 months of age, who do not appear ill, who present: (i) with targetoid lesions predominantly over the cheeks, ears and extremities (with relative sparing of the trunk), (ii) often tender non-pitting oedema of the face, auricles, and extremities, and (iii) without pruritus.

REFERENCES (for both papers)


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Journal Compilation © 2018 Acta Dermato-Venereologica.
doi: 10.2340/00015555-2785
Acta Derm Venereol 2018; 98: 169