

## An Annular Shaped Rash in an Infant: A Quiz

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A 2-year-old boy was referred to the paediatric ward because of an itchy annular rash on the trunk and extremities. Up to referral he had been suffering from a streptococcal tonsillitis, which had been treated with Cefoxitin, 30 mg/kg body weight a day for 7 days.

At the admission, there was noted an annular, generalized rash with central pallor (Figs. 1 and 2) and a discrete oedema of the feet, which had resulted in walking impairment for one day. He was afebrile and the capillary C-reactive protein was 1.74 mg/dl (normal range <0.5 mg/dl).

*What is the diagnosis? See next page for answer-*



Fig. 1. Back of a 2-year-old boy. Notice the annular shaped rash with central pallor. The skin condition was associated with angioedema of the feet.



Fig. 2. Abdominal area of a 2-year old boy. Wide-spread annular shaped rash with central pallor.

## AN ANNULAR SHAPED RASH IN AN INFANT: A COMMENTARY

### **Diagnosis: Urticaria multiforme**

Urticaria is a common condition in infants (1, 2), most often triggered by viral or bacterial infections (3). Urticaria multiforme, also known as annular urticaria, is a subtype of urticaria that mainly affects infants.

It is often confused with erythema multiforme but self-limiting, and there is a great treatment success when antihistamines are prescribed (1–5). It is a clinical diagnosis and a skin biopsy is not needed.

The boy was treated with desloratidine oral solution (0.5 mg/ml) 1.25 mg once daily with excellent treatment outcome; 2

days after initiated treatment the wheals had faded, the angioedema resolved and the boy regained his walking ability.

### REFERENCES

1. Shah KN, Honig PJ, Yan AC. "Urticaria multiforme": a case series and review of acute annular urticarial hypersensitivity syndromes in children. *Pediatr* 2007; 119: 1177–1183.
2. Mortureux P, Léauté-Labrèze C, Legrain-Lifermann V, Lamireau T, Sarlangue J, Taïeb A. Acute urticaria in infancy and early childhood. *Arch Dermatol* 1998; 134: 319–323.
3. Sempau L, Martin-Sáez E, Gutiérrez-Rodríguez C, Gutiérrez-Ortega MC. Urticaria multiforme: A report of 5 cases and a review of the literature. *Actas Dermosifiliogr* 2016; 107: e1–5.
4. Authried G, Bracher L, Bygum A. [Urticaria multiforme is a variation of urticaria, which imitates erythema multiforme]. *Ugeskr. Laeger* 2013; 175: 436–437 (in Danish).
5. Authried G, Svendsen MT, Eker E, Bracher L. Two young children with rashes on their trunk and extremities. *Pediatr Ann* 2015; 44: 369–370.