Puzzling Cases in

PEDIATRIC DERMATOLOGY

D M THAPPA

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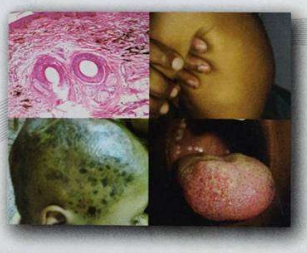

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CASE 4

A child with total alopecia and musculoskeletal abnormalities

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HISTORY OF THE CASE

A 1-year-old male child born to 2° consanguineous parents was admitted for respiratory symptoms under pediatrics and was referred to the dermatology outpatient department (OPD) for evaluation of total alopecia since birth. The patient was the first and only child of the parents so far. The child was a full-term normally delivered baby with normal scalp hair at birth. The hair loss began gradually at about 3 months of age, initially involving the scalp and later the eyebrows, and has attained the present status. There was also a history of seizure.

EXAMINATION AND INVESTIGATIONS

Physical examination revealed a hypotonic child unable to stand without support with total alopecia of the scalp and eyebrows along with scanty eyelashes (Figure 1). The child also had an open anterior fontanelle, delayed dentition for his chronological age, and grooving on either sides of the thorax—the Harrison's sulcus (Figure 2). Radiological examination revealed cupping, splaying, and feathering of lower end of ulna and radius, thin periosteal reaction, and no epiphysis of radius—findings suggestive of rickets (Figure 3). Biochemical investigations showed reduced serum calcium (8.6 mg/dl [Normal: 9.6–10.6]) and phosphorus (3.6 mg/dl [Normal: 4.7]), elevated serum alkaline phosphatase (800 U/L [Normal:]) along with elevated serum 25-hydroxy vitamin D3 and 1, 25-dihydroxy vitamin D3 levels.