

Picture Story

Acrodermatitis enteropathica

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Sri Lanka Journal of Child Health, 2000; **29**: 33

(Key words: Acrodermatitis enteropathica)

This 18 month old baby from Vavuniya, presented with a non-healing skin eruption of 13 months duration. The lesions were distributed over the face (mainly periorally), upper limbs, perineal region and the lower limbs. They were a combination of eczematous, bullous, dry and scaly areas. There was patchy alopecia. No response had been seen with prolonged anti-infective therapy. The zinc content of blood was $38\mu\text{mol/L}$ (laboratory reference normal range $122.4\text{--}183.6\mu\text{mol/L}$). The child was treated with "Becozinc" (zinc $37\text{mg}/5\text{mi}$) 10ml tds. Marked improvement was seen in 48 hours and complete resolution occurred in 7 days.

Acrodermatitis enteropathica is a rare autosomal recessive disorder caused by the inability to absorb sufficient zinc from the diet. Initial features appear in the first few months of life, often after weaning from the

breast to cows milk. Besides the characteristic skin lesions, the hair is affected with a reddish tint and alopecia of some degree. Ocular manifestations include photophobia, conjunctivitis, blepharitis and corneal dystrophy detectable by slit-lamp examination. Associated features include chronic diarrhoea, stomatitis, glossitis, nail dystrophy, delayed wound healing and growth retardation.

Secondary zinc deficiency due to prolonged total parenteral nutrition without supplemental zinc and chronic malabsorption syndromes, may give rise to a syndrome resembling the inherited form of acrodermatitis enteropathica.



On admission



Seven days later

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