Images in clinical medicine

Erysipelas complicating impetigo

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Erysipelas complicating impetigo

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Erysipelas is an infectious dermo-hypodermitis due to group A beta-haemolytic streptococcus. It is common in adults. Obesity as well as lymphedema are major risk factors. These conditions are not frequent in children, hence erysipelas is rare during childhood. We here report the case of two children, aged 11 and 9 years respectively, with no significant pathological history, with no significant pathological history, presenting to the Department of Pediatric Emergency one week after eruption. Dermatological examination showed red and painful swollen right leg and multiple erythematous plaques surmounted by meliceric crusts surrounding the raised, well-defined, erythematous, oedematous lesions. In both patients, metaphyseal osteomyelitis was initially
suspected, then excluded by standard X-ray of the leg which was normal in both patients. Erysipelas associated with impetigo was then suspected and finally deep thrombophlebitis. This diagnosis was excluded based on vascular Doppler ultrasound. This showed significant soft tissue infiltration in the right leg, without underlying collection.

Laboratory test revealed high level of C-reactive protein (CRP) and hyperleukocytosis, which confirmed our diagnosis of erysipelas. Both patients responded well to oral antibiotic therapy based on protective amoxicillin 50 mg/kg/day for 15 days with good outcome.

Figure 1: red and warm swelling of the right leg of the first child (A, B) and the second child (C) with an adjacent impetigo.