Oral, oropharyngeal and cutaneous manifestations of multisystem inflammatory syndrome in children Zidane Fatima Ezzahra, Ouatik Nabil, El Alloussi Mustapha

Introduction

Although much is still unknown about the full effects of Covid-19, the literature supports a post-viral immunological reaction resulting in Multisystem Inflammatory Syndrome in Children (MIS-C). The aim of this study was to report the oral, oropharyngeal and cutaneous manifestations observed in two patients declared positive for Covid-19 in order to be able to establish a correct etiological diagnosis.

Case 1

This is a 10-year-old Canadian girl in good general health, exposed to covid via her mother, confirmed with positive PCR and who presented several symptoms for 2 days (dry cough, fever, sore throat). 3 weeks later, she develops external signs on the arms, chest and neck, as well as on the oral mucous membranes and on the tonque

Case 2

This is an 8-year-old boy who tested positive with PCR two weeks before the onset of symptoms, which disappeared after 4 days and his intraoral lesions disappeared after 5 days. No lesions were noticed on the rest of the body

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Discussion : The etiological diagnosis of rashes can be difficult for dermatologists, some clues are the morphology of the rashes, the associated symptoms and the presence of enanthema. Pustular morphologies and dark lesions are suggestive of a drug etiology, while petechiae or vesicles, involvement of the buttocks or acral sites and enanthema suggest an infectious etiology, especially viral. In a large series of patients presenting with atypical exanthema, only 9% of patients with enanthema had a drug reaction, whereas 88% had an infectious etiology, most often viral. This is consistent with our two cases where numerous petechiae were observed. The 2 patients with pure petechial enanthema developed these lesions after the onset of COVID-19 symptoms, for case 1 it was immune thrombocytopenia following viral infectiou. While case 2 showed none on the rest of the body

Conclusion

Establishing an etiological diagnosis is difficult.

However, the presence of enanthema is a strong clue suggesting a viral etiology especially when a petechial pattern is observed.