Chapter 9 Iranian Hospital Cases in Literature

9.1 Patient One [1]

This is the first Acrodermatitis Enteropathica patient in Iran that was reported by Dr. Sardadvar. This patient was a 6-month-old baby boy at the time of his admission to Razi Hospital on January 21, 1970. He was suffering from skin rash, digestion problems, and diarrhea. The patient had three brothers and two sisters who were apparently healthy. He had a natural birth, a normal weight at birth, and had been breast fed. The 6-year-old patient was suffering from a mild diarrhea at birth. Next, he had itching skin of the thighs, diarrhea, and hair loss at three months old. It is important to note that the history of the patient's disorder was intermittent and he did not respond to the administration of Mycostatin when he was 3 years old. The patient was re-admitted and examined at the age of 6 months old. The skin lesions still existed around the mouth, nose, eyes, hips, and anal canal. The lesions were in the form of squamous erythematous plaques that were restricted around the nose, mouth and chin and had spread to the anterior part of the neck. The recent lesions had red color that could be separated from normal skin because of its red areola, plaque centers slightly sunken, and cloudy content covered by a thin crust. Impetigo like lesions were seen in the inner angle of the eyes, on the jowl, and eyebrows. Red irregular plaques, which seemed like impetigo or eczema, were also observed in the area of head and neck. Skin eruption vesicles were seen on the fingers, hips and legs. Alopecia was also noticed on the head and eyebrows. In addition, his strands of hair were thin and pale, and the mucosa membrane of his nasal cavity and the mouth were red. The Patient also suffered from diarrhea and excretion was done five to six times per day. Stools were reported to be green or sometimes yellow, smelly, and mixed with white rashes.

The height and weight of the child were measured to be 88 cm and 9 kg respectively. He also suffered from severe photophobia and his other organs appeared normal during examination. The 6-month-old infant also had a mild fever. The course of treatment was initiated with three EnteroVioform tablets and Mycostatin ointment, vioform hydrocortisone, and hand washing with 2 % aqueous eosin solution. The treatment took a month and it was very successful. The biopsy hyperkeratosis results showed a bit of spongiosis on the epidermis but the skin appeared normal and candidiasis was not seen in the stool or skin.

9.2 Patient Two [1]

The second Acrodermatitis Enteropathica patient in Iran was reported by Dr. Mostoufi at Razi Hospital. The patient, who was a 20-month-old baby girl at the time, was admitted to the hospital because of skin rash, diarrhea and hair loss. She had a natural birth and had normal weight at birth. She had seven sisters and one brother, all of which seemed healthy. The child was breastfed. Skin eruptions appeared on the legs, wrists, and face, especially around her mouth. It was reported that her diarrhea with defecation of six times a day started 30 days after the skin rashes first appeared; and 3 months later her hair and eyebrows began to fall. When the patient was first admitted, erythematous squamous dermatoses was observed around the mouth, nose, and chin. The skin rash on her wrists had the form of bracelets which progressed to the backhand. Moreover, the internal and posterior parts of her thighs and

pubic area were covered with rashes. The patient had mild photophobia, but her other organs seemed to function normally. She weighed 10 kg and her height was 75 cm. In addition, there wasn't any Candida fungus detected in the stool sample. Her blood test results were 4,200,000 red blood cells, 12,000 white blood cells, 53 lymphocytes, 2 monocytes, 6 eosinophils, and 39 polynuclear leukocytes. There were no specific symptoms detected in the skin biopsy since there was only a lack of keratinized stratified pitted cells in the epidermis. Furthermore, as the patient was diagnosed with Acrodermatitis Enteropathica upon clinical criteria. she was treated with four daily EnteroVioform tablets. Her symptoms significantly improved in the first week of her treatment.

Reference

1. Sardadvar S, Mostoufi M. Dermatology disorders. Tehran, Iran: Vol. 1. TUMS; 1972.