



Extensive ulcerative lesions in juvenile dermatomyositis



Fig. 1. Gottron's papules over dorsal aspect of the metatarsophalangeal and proximal inter-phalangeal joints.



Fig. 2. (A) Extensive vasculitic ulcers over the back. (B) Biological dressing using allograft from father covering the larger ulcer. (C) Healed ulcers at follow up after immunosuppressive therapy.

A 16 yr old male child[†] presented to the department of Pediatrics, All India Institute of Medical Sciences, New Delhi, India, in February 2017 with fever, progressive muscular weakness, polyarticular arthritis and skin ulcers for nine months. On examination, he was emaciated (body mass index of 15.4) with Gottron's papules (Fig. 1), truncal and limb muscle weakness along with multiple skin ulcers, with largest one overlying scapula (Fig. 2A). Investigations revealed raised inflammatory markers and hyperintensities of the thigh muscles on magnetic resonance imaging, and a diagnosis of juvenile dermatomyositis was made. Immunosuppressive therapy using intravenous immunoglobulin, steroids and weekly methotrexate was initiated in addition to

an interim biological dressing (Fig. 2B). The steroids were tapered over 18 months and complete recovery of muscular weakness and healing of ulcers were observed at 10 months (Fig. 2C).

Conflicts of Interest: None.

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[†]The child's assent and parents' consent obtained to publish clinical information and image.