

Chemical Burn in a Neonate

An 18-day-old male neonate was brought in to our Emergency Department with concern about a large dark rash around the umbilicus with an area of desquamation (*Fig. 1*). He had otherwise been acting normally with normal intake and output, and no fever. The umbilical cord had fallen off three days earlier, and silver nitrate was applied to stop the bleeding. After rash developed, bacitracin was applied and the newborn was referred to the burn clinic. The lesion healed completely with some residual hyperpigmentation.

It is important to keep the cord stump dry and not to cover the area with diaper as occlusive dressing will disperse the chemical and cause burn. Also, protecting the surrounding skin with petroleum jelly is recommended. The differential diagnoses for this condition include heat burn and focal allergic reaction. The provider should also consider possible child abuse when evaluating infants with burns.



Fig. 1. Chemical burn around umbilicus in a neonate.

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Congenital Varicella Syndrome

A girl weighing 2320 grams was delivered at 38 weeks to a mother with antenatal history of chickenpox in the fourteenth week of gestation. At birth, baby had cicatricial lesions with areas of induration and hypopigmentation on the torso, causing deformity of underlying rib cage (*Fig. 1*). The limbs were spared. She had bilateral chorioretinal atrophy with cataract in the left eye. Her sensorium was altered, and she had poor respiratory efforts requiring mechanical ventilation. Computed tomography of brain revealed bilateral thalamic calcifications and mild cerebral atrophy. Despite intensive care, baby died at fifty hours of life.

The risk of congenital varicella syndrome (CVS) after maternal varicella in the first 20 weeks of pregnancy is approximately 0.4 - 2%. Cicatricial lesions, neurological defects, ophthalmological manifestations and limb-shortening defects with muscular hypoplasia are the major clinical features in CVS. An important differential diagnosis for cicatricial lesions in a neonate is intrauterine Herpes Simplex Virus infection (distributed in dermatomal



FIG.1 Cicatricial scar with areas of induration and hypopigmentation on the torso, causing deformity of underlying rib cage in congenital varicella syndrome.

fashion but presence of active lesions, hypo- and hyperpigmentation, aplasia cutis, and/or an erythematous macular exanthema).

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