

## Neonatal Sucking Blisters

A female neonate was born by nontraumatic vaginal delivery at 41 weeks gestation to a 26-year-old caucasian woman following uncomplicated pregnancy. The mother denied any history of syphilis, herpes simplex infection, lupus erythematosus, autoimmune or hereditary bullous disorders. Examination approximately 2 hours postpartum revealed an active neonate with two superficial round erosions measuring 1 cm along the distal radial aspect of the left wrist (*Fig 1*). No other skin abnormalities were detected. During the examination the infant started to suck vigorously at the involved areas. The erosions healed uneventfully without any treatment after several days.

Sucking blisters, erosions, or calluses result from vigorous sucking by the infant during fetal life. The lesions are always present at birth. They occur in approximately 1 in every 240 live births, and are not associated with other abnormalities. The lesions are located mainly at the radial forearm, wrist, and hand, including the dorsal thumb and index fingers and can be unilateral or bilateral and symmetrical. Typically, the neonate is noted to suck excessively on the involved areas.. The lesions resolve without specific treatment within days to weeks. These lesions may be mistaken for other serious diseases in the newborn, such as herpes simplex, candidiasis, neonatal lupus erythematosus, bullous impetigo, mastocytosis, incontinencia pigmenti, or epidermolysis bullosa. The focal presentation, characteristic morphology, and failure to develop other vesicles or



**FIG. 1** Sucking blisters. Two shallow erosions covering the distal radial aspect of the left wrist.

bullae during the first few days of life should help to establish correct diagnosis. Recognizing this benign self-limited condition avoids unnecessary tests and alleviates anxiety on the part of the infants family and physicians.

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