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A Case of Congenital Giant Pigmented Nevus in a Newborn of Triplet Birth

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Introduction

Congenital giant melanocytic nevus is defined as a hyper pigmented lesion present at birth. Although the lesion is rare, it has important effects due to association with complications such as malignant melanoma, involvement of central nervous system in some conditions and emotional impact on the patient family. So the interest in studying of this disorder has increased over time years [1]. Here, a case of congenital melanocytic nevus has been presented in a premature newborn.

Case report

A two-days-old male preterm newborn weighing 1400 gram admitted in our neonatal ward because of prematurity and neonatal jaundice. He was third newborn of a triplet pregnancy born by C/S at 33 week's gestation. Two other babies were healthy. Physical examination revealed an extensive hyper pigmented dark blue patch in right lower extremity covering 80% of skin in this area in anterior and posterior aspect and measured diameters were 10× 6 cm. The surface of nevus was rough and leather shape and lackluster hairs were scattered all over the lesion. Two small satellite lesions were seen on the left leg and abdomen [Figure.1]. Other examinations and surveys including abdominal and brain ultrasonography were normal. After medical stabilization of infant the baby was discharged with the advice to parents to refer him at 1 year of age for lesion excision and skin grafting.

Discussion

Giant congenital hyper pigmented nevus is a rare disorder in neonatal period. The estimated incidence is 1/20,000 live births [2,3]. The lesion occur commonly on the posterior trunk, but may also appear on the scalp or the extremities [4]. Primary diagnosis of congenital giant hyper pigmented nevus is clinical [5]. Das in 2013 reported a case of congenital giant pigmented nevus in an infant which covered the skin of back, neck, scalp and lower extremities [6] but she was singleton and term. The incidence of malignant melanoma arising out of this lesion is estimated to be approximately 5-10% and half of these occur by the age of five years. So the best treatment is complete excision [3]. In our case because of prematurity of the patient complete excision of this large surface of skin endanger the baby's life. Therefore follow up was recommended till appropriate time after the growth of the baby is created for staging or complete excision.

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Figure 1 Congenital pigmented nevus in a preterm triplet newborn.

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