

For the Patient

The full report is titled: "Skin rash in a 2-week old infant." It is in the September–October 2017 issue of *Allergy Asthma Proceedings* (volume 38, pages 390 to 393). The authors are Marjan Nassiri, M.D., and Sami L. Bahna, M.D.

For the Patient is provided to physicians so that the patients can better understand the language of modern medicine.

For the Patient is written by the editors (Bellanti, JA, and Settignano, RA) and provided to practitioners so that patients can better understand the usefulness of new information that results from medical research.

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Autoimmune diseases in the newborn infant

An autoimmune disease is a condition that arises from an abnormal immune response to normal tissues in almost any part of the body. These disorders include >80 conditions, *e.g.*, systemic lupus erythematosus (SLE), and primarily occur in adults, with a preponderance in women. Autoimmune disease in the newborn (neonatal autoimmunity), however, is rare, most likely due to the relative unresponsiveness of the newborn immune system. Most neonatal autoimmune diseases result from the transfer of maternal antibodies across the placenta to the fetus or newborn. Neonatal lupus erythematosus (NLE) is the most common presentation of autoimmunity in the newborn; however, the characteristics that define NLE are not well defined and the presentation of NLE differs from that of classic lupus in the adult. In a recent report, Nassiri and Bahna from the Allergy and Immunology Section, Louisiana State University Health Sciences Center, Shreveport, Louisiana, presented a newborn infant with a rash and not only confirmed the diagnosis of NLE in the infant but also confirmed the diagnosis of SLE in the mother.

Who or What Was Proposed to Be Studied?

The authors presented a male infant with a patchy skin rash that began at 2 weeks of age. The rash was initially diagnosed as a skin fungus infection but did not respond to antifungal treatment.

How Was the Study Done?

Because of the appearance of the rash and a history of SLE in a maternal aunt, NLE was suspected as the cause of the rash, and the diagnosis was confirmed by laboratory testing.

What Are the Limitations of the Proposed Study?

Although the report was a single case study, it led to the correct diagnosis in the mother who was asymptomatic, who was found to be positive for the disease by laboratory testing, and who was counseled on the importance of follow-up.

What Are the Implications of the Study?

As with all cases of neonatal autoimmune disease, the condition is transient and reversible. At 8 months of age, the rash completely resolved. The importance of this report is that there are other autoimmune diseases in which maternal antibodies play a role and, therefore, should be suspected in an infant who presents with these rare entities. □