

Cutaneous creeping eruption in a child

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Sir,

A 6 year-old boy from coastal area presented with history of intensely pruritic skin lesions over the right forearm for last 3 days. There were no other symptoms. The boy used to play on the beach barefoot daily. Clinical examination revealed an erythematous, serpentine lesion on the dorsal aspect of the right forearm (Fig. 1). Systemic examination was unremarkable. Hemogram was normal except for eosinophilia (absolute eosinophil count-1400/mm³). A diagnosis of cutaneous larva migrans was made and he was treated with single dose of albendazole (400 mg) and ivermectin (6 mg). Lesion had healed during his subsequent followup after 1 week.

Cutaneous larva migrans (CLM) also called creeping eruption, plumber's itch, is characterized by classical serpentine skin lesions in a tropical setting [1]. Bare foot walkers, farmers, children playing in beaches, sandy and moist areas are at high risk. CLM is mainly caused by infection with larvae of animal hookworms like *Ankylostoma caninum* and *A. braziliens*. Other offenders include *A. ceylonicum*, *Bubostomum phlebotomum* etc [2,3]. Larval penetration of skin and migration cause itchy erythematous, raised vesicular and serpentine cutaneous lesion. The disease is usually self-limiting and lasts for 4-6 weeks until the larva dies and humans are accidental and 'dead-end' host [2,4]. Severe infestations manifest as Loeffler's syndrome of pulmonary eosinophilia and rarely as eosinophilic enteritis [5]. Biopsy is of no value as the larvae advance ahead of the clinical tract. Optical coherence tomography is a non-invasive modality for diagnosis [6]. We treated with a single dose of ivermectin and albendazole [7]. Other treatment regimens include oral albendazole



Figure 1: Raised curvilinear serpentine lesion of cutaneous larva migrans.

(400 mg) daily for 3 days and topical application of 10% thiabendazole [8]. CLM can be prevented by avoiding skin contact with soil contaminated with animal feces and adequately covering the feet when visiting sandy and moist areas.

Consent

The examination of the patient was conducted according to the Declaration of Helsinki principles.

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