

## BLACK DOESN'T MEAN DEAD

Aziz SH, Toyat SS, Rashdeen Fazwi MN, Syahril RA

<sup>1</sup>Hand & Microsurgery Unit, Hospital Selayang

### INTRODUCTION:

Henoch-Schonlein Purpura (HSP) is a rare immune-mediated vasculitis, occurring in 10-20 children per 100,000 per year.<sup>1</sup> Clinical presentation includes palpable purpura, abdominal pain, arthralgia, and renal involvement, but on occasion, can present with hemorrhagic blisters or necrotic patches.<sup>2</sup> We report a rare presentation of a rare case of HSP.

### REPORT:

A 10-year-old boy was referred for compartment syndrome of right hand while undergoing treatment for HSP. On examination, his right hand was grossly swollen with prolonged CRT and SpO<sub>2</sub> of 85% of all digits. Emergency fasciotomy was performed, with marked improvement of circulation after surgery. However, hemorrhagic blisters appeared on day 2 post-operation, with necrotic patches overlying the fingers. We continued to observe the patient while he underwent high-dose steroid therapy. After 7 days, the swelling reduced, and the necrotic skin started peeling off. Closure of the fasciotomy wound, and debridement of residual dry necrotic patches was performed.

### DISCUSSION:

Non-blanching purpuric rash, the hallmark of this disease, occurs due to IgA deposition in the small blood vessels. This rash typically involves the extensor surface of lower limbs, buttocks and forearms, with occasional involvement of trunk and face.<sup>1</sup> While bullous or necrotic lesions are common in adults (60%), they are a rare finding in children.<sup>2</sup> HSP is typically a self-limiting disease. Therefore, despite the gangrene-like appearance of the fingers, we decided to adopt a "wait-and-see" approach, as opposed to amputation. With appropriate medical therapy, the necrotic lesions eventually



Figure 1: Right hand day 2 post-fasciotomy



Figure 2: Right hand at follow-up (6 weeks post-fasciotomy)

resolved, and our patient managed to keep all his fingers.

### CONCLUSION:

Playing the waiting game is an acceptable strategy when managing dry gangrene in a stable paediatric patient, in view of their high healing potential and the self-limiting nature of HSP.

### REFERENCES:

1. Trnka P. Henoch-Schönlein purpura in children. *J Paediatr Child Health*. 2013 Dec;49(12):995-1003.
2. Saulsbury FT., Henoch-Schönlein purpura in children: report of 100 patients and review of the literature *Medicine*. 1999; 78: 395-409