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LETTER TO EDITOR

Pediatric Purpura: A Diagnostic Challenge of Sweet Indulgence with Bitter Consequence

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ABSTRACT

Suction purpura is an uncommon cause of localized facial purpura in children and may be overlooked when a history of suction is not initially elicited¹. We report a 7-year-old girl who presented with sudden-onset reddish discoloration over the upper lip. She was otherwise healthy, with no relevant cutaneous or systemic disease or significant family history. The lesion had appeared approximately 15–20 minutes after consumption of chocolate milk. Examination revealed a well-circumscribed, non-blanchable purpuric lesion encircling the upper lip. Dermoscopy demonstrated homogeneous erythema with an irregular purpuric pattern. Although the initial history was negative for trauma, further questioning revealed that the child had consumed the milk from a bottle and had sucked on it for a prolonged period. A diagnosis of suction purpura was made. The lesion resolved completely within one week without treatment. This case highlights the importance of recognizing the characteristic morphology and distribution of suction purpura and obtaining a detailed history of local mechanical factors in children presenting with localized purpura.

Keywords: Pediatric purpura, Suction purpura, Purpura

TO THE EDITOR

A 7-year-old girl presented to the OPD with one day history of reddish discoloration over her upper lip. She was otherwise healthy without any relevant skin or systemic diseases and had no significant family history. On initial questioning, there was no history of trauma, and the mother did not recall any precipitating event. However, she reported that the lesion had appeared approximately 15–20 minutes after the child consumed chocolate milk.

Examination revealed a well circumscribed, non-blanchable purpuric lesion encircling the upper lip (Fig.

1). Dermoscopy revealed homogenous erythema with an irregular purpuric pattern (Fig. 2). “A similar dermoscopic evaluation has previously been reported in a case of facial suction purpura². In light of cutaneous findings, upon further questioning, the mother subsequently mentioned that the child consumed milk from a bottle and the child confirmed to have sucked the bottle for a prolonged period, leading to diagnosis of suction purpura. The lesion completely subsided in one week (Fig. 3).

Suction purpura is an important diagnostic consideration in children presenting with a localized, well-demarcated purpuric lesion over the perioral region. In the absence of



an initially volunteered history of suction or trauma, the clinical appearance may prompt consideration of other causes of purpura. In our case, the temporal association with chocolate milk initially appeared noteworthy; however, detailed questioning regarding the method of consumption revealed prolonged bottle sucking as the likely precipitating factor.

The characteristic perioral distribution, together with the history of prolonged sucking, helped establish the diagnosis and avoided the need for further evaluation. The spontaneous resolution within one week further supported the benign nature of the condition.

This case emphasizes the importance of careful history taking in children with localized purpura. Specifically, enquiring about bottle feeding, prolonged sucking, and other forms of local mechanical trauma may help identify suction purpura and prevent unnecessary investigations and parental anxiety^{1, 2}.



Fig. 1: A well circumscribed, non-blanchable purpuric lesion localized to the perioral region, specifically encircling the upper lip

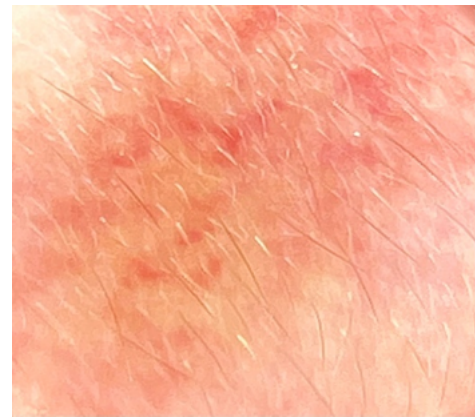


Fig. 2: Dermoscopy revealing homogenous erythema with an irregular purpuric pattern



Fig. 3: Complete resolution of the lesion

DISCLOSURE

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