Henoch Schonlein Purpura (HSP) is the commonest vasculitis of childhood. To the best of our knowledge only two cases of hepatitis A virus (HAV) infection associated with cutaneous vasculitis have been reported out of which one was a child(1,2). We describe a 2 y 9 mo old girl with acute hepatitis A infection who developed cutaneous vasculitis during the first month of her illness. She presented to us with yellowish discoloration of eyes and skin for 1 month associated with mild fever and loss of appetite. After 3 weeks of jaundice, she developed swelling over dorsum of hands and feet with bluish palpable rash on both lower limbs with arthritis in right knee joint (Fig. 1). A day prior to admission, child passed small amount of blood in stool. Liver was palpable 3 cm below the costal margin in mid clavicular line. Rest of the systemic examination was within normal limits. Past history was unremarkable. Investigations showed leukocytosis with low hemoglobin. Her platelets, ESR, kidney function tests and autoimmune markers were normal. ALT and AST were 599 IU/L and 288 IU/L, respectively while PT and PTTK were normal. Her anti, HAV IgM antibody was positive and all immunoglobulin subtype levels were raised. As she satisfied all the criteria set by European League Against Rheumatism and Pediatric Rheumatology(3), we kept a diagnosis of Henoch Schonlein Purpura and performed a skin biopsy which was suggestive of leukocytoclastic angitis. She was put on analgesics and gradually improved within 4 days. On a followup of 9 months, child is doing well with no recurrence of symptoms.

HSP has been reported in infections with streptococci, hepatitis B, herpes simplex virus, parvo B 19, coxsackie virus, adenovirus, H. pylori, MMR, Mycoplasma etc(4). Hepatitis A virus, unlike hepatitis B virus, has rarely been associated with extrahepatic features. Two adult patients have been reported with relapsing hepatitis A complicated by arthritis and only one patient has been reported with cutaneous vasculitis(5). One pediatric case has been reported with vasculitis and confirmed cholestatic hepatitis A virus infection(2). Most cases are self limiting and require no treatment except symptom control but disease may relapse in a third of cases. Henoch Schonlein purpura may be a rare extrahepatic manifestation of viral hepatitis A infection in children.

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