Carbon Baby Syndrome (Universal Acquired Melanosis)

A 5-years-old girl born to non-consanguineous parents presented with progressive generalized hyperpigmentation since 3 months of age. The darkening of skin was first noticed over the feet and face at the age of 3 months and gradually progressed to involve the entire body. There was no history of prior drug intake or other skin lesions, no history of discoloration of urine or photosensitivity. On examination, baby had generalized dark-black hyperpigmentation, oral mucosa was involved; genitalia were spared. Face showed patchy areas of normal skin. [Fig.1] The skin texture and sweat secretion were normal. Systemic and ophthalmological examination was normal.

Her weight was 15 kg and blood pressure was 104/70 mm Hg. Liver function tests, electrolytes, thyroid profile, serum cortisol, and ferritin were within normal limits. Skin biopsy revealed excessive melanin pigmentation of the epidermis with few melanophages in the dermis. A diagnosis of universal acquired melanosis (carbon baby syndrome) was made.

Addison disease (low blood pressure, hyponatremia, hyperkalemia, low serum cortisol level), Cushing disease (obese patient, cushingoid habitus, hyperglycemia, hypokalemia, elevated serum cortisol level), hemochromatosis (high transferrin saturation and ferritin level, genetic tests for the C282Y and H63D), and lichen planus pigmentosus (usually macular lesions, rarely diffuse hyperpigmentation, characteristic histopathology findings—lichenoid infiltration, basal vacuolar change and prominent