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A Case of Pediatric Sarcoidosis with Pulmonary Involvement

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Introduction: Sarcoidosis is a multisystemic, granulomatous disease affecting the lungs, peripheral and mediastinal lymph nodes, liver, spleen, skin, eye and parotid gland. It is a rare disease in children and the etiopathogenesis is not fully elucidated.

Case Presentation: The patient was a 10-year-old girl. She had pain in the legs and knees for 3 years. Two years ago rashes were considered as erythema nodosum in the legs. Her history was unremarkable but in the family history his mother had sarcoidosis. In her physical examination, the respiratory sounds were bilaterally equal and the basals had rhonchi. Liver and spleen could not be palpated. She had no lymphadenopathy. Heart sounds were rhythmic; any murmur and additional sounds could not be heard. Her neurological examination was unremarkable. ACE level was > 84.3 U/L. Other laboratory tests were observed in the normal range. Tuberculin skin test was anergic, There were mediastinal and hilar pathological lymph nodes in the thorax CT. Ground glass opacities were present in the lung. A small number of micronodular opacities were observed. The patient was followed up with the diagnosis of sarcoidosis and had a history of joint, heart, lung involvement and erythema nodosum and in the family history his mother had sarcoidosis. Prednisolone 1 mg/kg/day treatment was started by pediatric rheumatology. The patient is on follow up in our outpatient clinic.

Conclusion: There is no adequate data regarding the prognosis of sarcoidosis in childhood. However, the prognosis of patients with severe findings and multiorgan involvement is poor compared to adults. There are also self-limiting and non-treatment-improving cases. Pulmonary function tests and radiology are used in the follow-up of these patients. Since it is a very rare disease in childhood, it was aimed to emphasize sarcoidosis in a pediatric case.

Keywords: Pediatric, sarkoidozis, hilar pathological lymph nodes