

**LUPUS VULGARIS IN A PEDIATRIC PATIENT:  
A CLINICO-HISTOPATHOLOGICAL DIAGNOSIS**

F. Sule Afsar<sup>1</sup>, Ilhan Afsar<sup>2</sup>, Gulden Diniz<sup>3</sup>, Suna Asilsoy<sup>4</sup>, Yelda Sorguc<sup>5</sup>

<sup>1</sup> Department of Dermatology, Dr. Behcet Uz Children's Hospital, Izmir, Turkey

<sup>2</sup> Department of Clinical Microbiology, Ataturk Research and Training Hospital, Izmir, Turkey

<sup>3</sup> Department of Pathology, Dr. Behcet Uz Children's Hospital, Izmir, Turkey

<sup>4</sup> Department of Pediatrics, Dr. Behcet Uz Children's Hospital, Izmir, Turkey

<sup>5</sup> Department of Clinical Microbiology, Dr. Behcet Uz Children's Hospital, Izmir, Turkey

Lupus vulgaris is the most common form of cutaneous tuberculosis which usually occur in patients previously sensitized to Mycobacterium tuberculosis. We present a case of a 10-year-old boy who was diagnosed as lupus vulgaris clinically and histopathologically. He had well demarcated, irregularly bordered, pink, infiltrated plaques on his left cheek showing apple-jelly appearance on diascopy. The histopathological examination showed tuberculoid granulomas with Langhans type giant cells. The Mantoux reactivity was in normal limits, and no acid-fast bacilli were found in the lesion, either by direct stained smears or by culture. The lesions showed marked improvement on anti-tubercular treatment. We want to emphasize that histopathologic examination has diagnostic value in lupus vulgaris, when direct analysis or culture is negative.