

Letter to the Editor

Acrodermatitis Enteropathica: A Case Report

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To the Editor,

In November 2020 issue of the *Oman Medical Journal*, Al Naamani and Al Lawati¹ described a case of a two-month-old breast-fed infant, born at 33 weeks gestation, with vesiculo-pustular lesions in the perioral region and erythematous scaly lesions in the neck, accompanied with diarrhea and alopecia. Although genetic testing for mutations in the SLC39A4 gene was not accomplished in the studied infant due to logistic reasons, Al Naamani and Al Lawati¹ surprisingly made the diagnosis of acrodermatitis enteropathica (AE) based on the constellation of the above- mentioned manifestations and the dramatic response to zinc supplements. I presume that the transient symptomatic zinc deficiency (TSZD) ought to be critically considered in the studied infant. My presumption is based on the following point. It is worthy to mention that the deficiency of zinc in breast-fed babies, caused by a low level of zinc in their mother's milk, is an under-recognized condition. Actually, preterm babies are more susceptible to develop zinc deficiency than full-term babies due to their high zinc needs, inadequate zinc body stores, and poor capability to absorb zinc from the intestine. It usually presents with AE- like clinical picture.² Additionally, mutations in the zinc transporter SLC30A2/ZnT2 gene, which result in impaired zinc secretion into mother's breast milk, ultimately predisposes to TSZD development in the exclusively breast-fed infants. Low mother's serum and milk zinc levels as well as mutational study are important hallmarks in the diagnosis. Unlike AE, the TSZD- related symptoms often resolve after weaning.³ With the advance in obstetric and neonatal care resulting in the increasing rate of preterm babies fed with only breast milk, TSZD cases have been increasingly reported.⁴⁻⁵ Regrettably, Al Naamani and Al Lawati¹ didn't take into consideration performing genetic analysis in the mother as well as measuring zinc values in her serum and breast milk. Consequently, this limitation might bring into question the diagnosis of AE in the case in question.

References

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