**Case Report**

**Neonatal Scalp Juvenile Xanthogranuloma**

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**Abstract**

Juvenile xanthogranuloma (JXG) is a benign histiocytic disorder of unknown etiology. We report a case of JXG in 18-day-old girl, probably the youngest reported hitherto, who presented as nodular lesion on scalp (right temporoparietal region). The lesion was excised and sent for histopathological examination. Histopathology revealed JXG with scattered mitotic figures. The girl is doing well on follow up for more than 5 years now.

**Key words:** Juvenile xanthogranuloma; Naevoxanthoendothelioma; Neonate

**Introduction**

Juvenile xanthogranuloma (JXG) is a benign histiocytic disorder of unknown etiology, characterized by yellow-red, solitary or multiple subcutaneous or dermal lesions, and, occasionally, in other organs. These nodules are commonly found in head and neck, and most lesions are under 5 mm size. Mostly JXG occurs in infancy (40%–70%) and early childhood. The lesion may regress spontaneously by the age of 6 months–3 years. JXG is classified as a non-Langerhans cell histiocytosis. Histopathologically, JXG is characterized by diffuse proliferation of foamy histiocytes, and multinucleated Touton-type giant cells, with scattered lymphocytes and eosinophils [1].

We report a case of JXG in an 18-day-old girl, probably the youngest reported hitherto, who presented as giant nodular lesion on scalp (right temporoparietal region).

**Case Report**

An 18-day-old female neonate presented with a firm, nodular lesion on the right temporoparietal region of scalp, which was 2 cm in diameter. The lesion was non-tender, yellowish-red in color, and having smooth surface. The lesion was present since birth, with no history of inflammation or trauma. No similar lesion was found anywhere in the body. Rest of the physical examination was normal. Intraoperatively, the lesion was found localized in subcutaneous plane with no deeper infiltration. The lesion was excised and sent for histopathological examination. Histopathology revealed JXG with scattered mitotic figures (Figure 1). The girl is doing well on follow-up for more than 5 years now.

**Discussion**

JXG is an uncommon histiocytic cutaneous lesion. It is a normolipemic type of non-Langerhans’s cell histiocytosis. It was previously called as naevoxanthoendothelioma.

JXG is a disease of the infancy and young childhood. Median age of onset is 2 years [2]. However, lesions may be present at birth or even in adulthood. Most JXG presents with solitary lesion (60%–82%), but lesions may be multiple. Most lesions are <5 mm in diameter, but giant nodules may increase up to 2 cm in size. Children <6 months of age tend to present with multiple lesions with a much higher male-to-female ratio (12: 1) [2]. The lesions are most commonly located on the face, scalp, and trunk and tend to show self-limited course over the course of 6 months–3 years, but an area of hyperpigmentation, slight atrophy, or anetoderma may remain [3]. We excised the lesion for cosmetic reason. JXG involving only the skin usually follows a benign course and needs no treatment. Sites
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uncommon when seen tumors still have benign behavior.

Author's contribution

All authors contributed equally in concept, design, literature review, drafting the manuscript, and approval of the final manuscript.

Consent statement

Authors declared that they have taken informed written consent, for publication of this report along with clinical photographs/materiel, from the legal guardian of the patient with an understanding that every effort will be made to conceal the identity of the patient however it cannot be guaranteed.

REFERENCES