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= Abstract =

A Case of Herpes Zoster in a 9-month-old Infant

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We experienced a case of herpes zoster in a 9-months aged infant as followings; The patient had no history of chickenpox or varicella vaccination. Also, her mother had no history of varicella infection and no contact history with varicella during pregnancy. The patient had only a history of exposure to chickenpox patient at 7th days after birth, but fortunately chickenpox was not developed. Sequentially, symptoms of cough with fever and tachypnea were developed on admission date(7 days had passed already after development of the initial skin lesion). On physical examination, multiple grouped painless erythematous papulovesicles with small crusts were observed on the right lower back, flank and abdomen along the T11 dermatome. Coarse breathing sound was auscultated, and increased linear infiltrations on both parahilar areas were seen on chest radiography. Liver enzymes were slightly elevated. Tzanck test was negative. The initial titers of anti-VZV IgM and IgG on admission were negative, but the following titers of anti-VZV IgM and IgG were positive. The patient received treatment of acyclovir for 7 days, and healed completely without sequelae. We report this case with brief review of related literatures.

Key Words : Varicella zoster virus, Herpes zoster, Infancy

VZV)가

(sensory ganglia)
(varicella-zoster virus,

VZV

1, 2)

(Fig. 1).

3, 4)

3
 1, 5, 6)
 7
 가
 9
 11

12.5 g/dL, 36.3%, 8,600/
 mm³(34%, 52%, 12%,
 1%), 470,000/mm³ .
 22 mm/hr , C-

: 00, 9 ,
 :7
 : 7
 가,

: 41 3 , 3.2 kg

가 : 28

: 38°C, 35
 / , 122 /

가
 11
 가 가

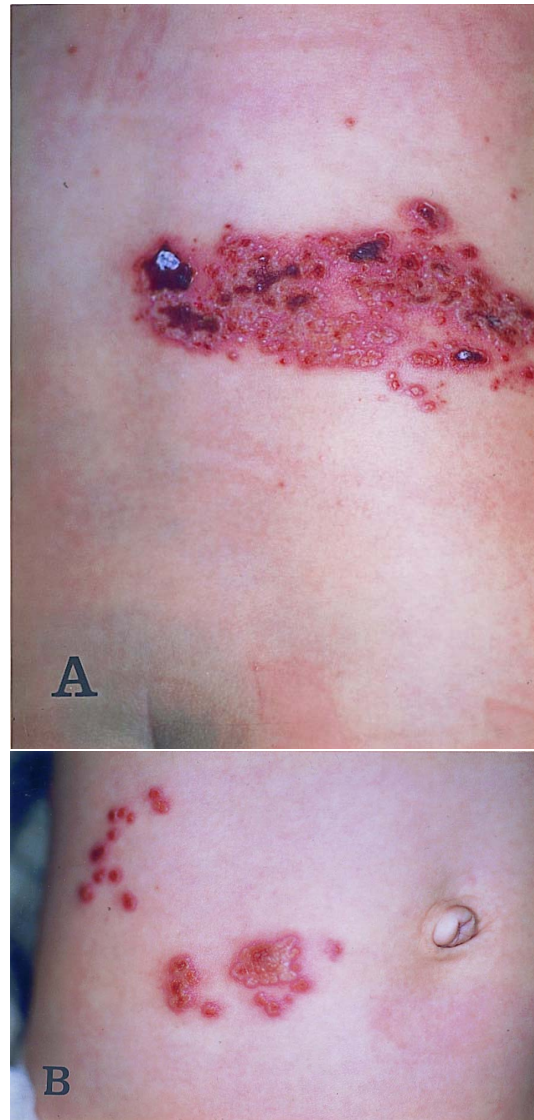


Fig. 1. Crops of papulovesicular eruptions and crusts scattered on right lower back, flank and lower abdominal area, corresponding to T11 dermatome. (A) On right lower back and flank area. (B) On right lower abdominal area.

102 mg/dL, BUN
 11.8 mg/dL, Cr 0.4 mg/dL, Na 140 mEq/L, K 4.2
 mEq/L, AST/ALT 49/34 U/L, 7.0 g/dL,
 4.6 g/dL
 CD3 59.27%, CD4 44.95%, CD8
 14.98%, CD19 9.58%, CD56 8.23%
 7 () Enzyme immunoassay

(EIA) anti-VZV IgM IgG 0.67
 0.98 (; <0.8,
 >1.0), 21 anti-VZV IgM
 IgG 2.10 4.89
 :
 4 (10)
 가가
 Tzanck : 2 (8)

vir acyclovir acyclo-
 vir 2
 37.8°C 38°C
 , 4
 AST/ALT가 67/57 U/L 가
 가가 acyclovir
 3
 6 (12)
 가 가
 anti-VZV IgM IgG
 anti-VZV IgM IgG ,



Fig. 2. The skin lesions were almost healed with some remained small pigmentation. (A) On right lower back and flank area. (B) On right lower abdominal area.

(Fig. 2A, 2B).

VZV
 가 VZV가 가
 (reactivation)
 가
 10% 75
 % 45
 가 VZV

1, 2). (natural killer cell), (cytokine mediator)가

2 VZV가

3, 4) 가 9, 14).

VZV (neuronal latency) 가 7

5, 7-9) 가

VZV (cicatrix), zigzag

(congenital varicella syndrome), VZV - 7

(zoster in infancy) 3가 가

10). 가 7

VZV 가 5) 100

가 6 12 11

16~20 1) 가

6 20 - 6) 가

2% 가

가 5 가

2

17%

30% 가 (post-herpetic neuralgia) 10). 가

VZV가 (thoracic nerve)

11). (dis-

VZV seminated cutaneous zoster) 4

VZV 11 20

VZV 가 14, 15).

가

VZV

9-13) (virus specific antibodies)

10) 11

7

acyclovir 10) acy-

clovir 가

AST/ALT 1~2 16)

가

acyclovir

acyclovir

17) acyclovir 가

72 20 mg/kg/ dose

800 mg

72

75% acyclovir 500 mg/m² 10 mg/kg

가, VZV가 8 7 ,

10) 48

Wright Giemsa Tzanck

4 acyclovir

가 5) (sensitivity)가

3

7~10 10) 7

(complement fixation test) ELISA 가 가

VZV

anti-VZV IgM ,

12 anti-VZV

IgG 가 VZV 가

9) 7

anti-VZV IgM IgG 가 0.67 0.98 9 11

, 2 2.10 4.89 ,

가

acyclovir

가 B T CD4

44.95%, CD8 14.98% CD4/CD8 가 3

가 ,

가 가

1) , .

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