Red Blotch on the Neck

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six-month-old infant presents with erythematous patches on the nape of the neck. The lesions have been present since birth. The colour of the lesions deepens with crying.

What is your diagnosis?

Salmon patches are composed of ectatic dermal capillaries that represent the persistence of fetal circulating patterns in the skin. The lesions are flat, scarlet to pink in colour, can be totally blanched and usually deepen in colour with vigorous activity, crying, or changes in ambient temperature. In white infants, they are usually bright red or pink in colour, while in Oriental or black infants, they are darker.

In the Caucasian population, salmon patches are present in approximately 44% of all neonates. They are less common in dark-skinned neonates. Both sexes are equally affected.

The lesions are most commonly found on the nape, followed by the glabella and eyelid. Salmon patches are generally not associated significantly regress with time. The lesions are with extracutaneous anomalies. In spite of their rarely detected after six-years-of-age. midline location, most salmon patches, except those in the sacral area, are not associated with spinal dysraphism.

The condition should be differentiated from nevus flammeus (also known as port-wine stain). Nevus flammeus is a capillary malformation characterized clinically by persistent macular



Figure 1. Red patch on the neck.

erythema and pathologically by ectasia of the papillary and superficial reticular dermal capillaries, which are otherwise lined by normalappearing, flat endothelial cells. The capillaries become more ectatic with age and the colour gradually deepens.

Treatment consists of providing reassurance to the parents that the lesion will disappear or

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