



Enuresis secondary to toxidermy

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Clinical image description

An 8-year-old child with antiepileptic epilepsy as valproic acid. Three weeks after the start of treatment, he had bullous lesions that broke easily, giving way to erosions. Dermatological examination also revealed involvement of the oral and genital mucosa. The cutaneous area reached was estimated at 8%. The diagnosis of Stevens Johnson syndrome was retained. The decision was to stop any treatment. A few days later the clinical symptomatology was marked by the rapid installation of enuresis without impairing renal function. The clinical examination had objectified the presence of a fibrinous shell (Figure 1), responsible for an obstruction of the urinary meatus. Excision of this fibrin relieved the patient, allowing him to urinate (Figure2).



Figure 1





Figure 2