Focal Facial Dermal Dysplasia Type 4

17-year old girl presented with asymptomatic, atrophic scars on both cheeks since birth. Her parents gave a history of unassisted vaginal delivery, following an uncomplicated pregnancy. There was a history of fluid filled lesions (2 years ago), on the site of hypopigmented atrophic scars. The lesions used to accumulate clear fluid, despite multiple attempts of draining the fluid. The lesions were not accompanied by any erythema or discomfort, and did not increase in number. Family history was non-contributory. Cutaneous examination showed three circular to oval, hypopigmented, atrophic scars of 1-1.5 cm in diameter, over the right pre-auricular region [Figure 1]. One similar oval lesion of 2 cm diameter, accompanied by a tiny similar lesion at its lower pole, was noted in the left pre-auricular region [Figure 2]. Some of these lesions showed a hyperpigmented rim with long thin fine hairs, resembling membranous aplasia cutis congenita. Computed tomography scan of the skull did not show any anatomical abnormalities. A clinical diagnosis of focal facial dermal dysplasia type 4 (FFDD4) was made based on clinical findings, and biopsy could not be performed.

Focal facial dermal dysplasias (FFDDs) are a group of inherited developmental facial defects that occur at the site of the dermal fusion along the fronto-nasal and maxillary prominences (types 1, 2, and 3) or along the maxillary and mandibular prominences (type 4) and resemble lesions of membranous aplasia cutis congenita clinically.^[1,2]

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have given his/her/

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Figure 1: Three atrophic, hypopigmented scars in the right pre-auricular region



Figure 2: One large atrophic, hypopigmented scar and a similar tiny lesion in the left pre-auricular region

their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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Conflicts of interest

There are no conflicts of interest.

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