

Pool Palms: Children and Swimming Pool Problems

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CASE REPRESENTATION

A 5-year-old male was consulted due to the appearance of skin lesions of one week's evolution. On examination, they were asymptomatic, located exclusively in the convex (protruding) areas of the palmar aspect of both hands and constituted erythematous papulo-plaques, some of which formed small distal blisters. In the directed anamnesis, they

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Figure 1: Skin lesions at the time of consultation: Erythematous papulo-plaques, some of which formed small distal blisters on the palmar side of both hands.

reported the appearance of the same lesions in the previous two years, and always during a summer period. Specifically, they commented on a clear association with exposure to the water in their pool, especially with repeated entry and exit and rubbing their fingers against the edge of the pool.

Given the suspicion of pool pulpitis (“pool palms”), the main therapeutic measure was the reassurance of the parents, explaining its benign etiology, as well as the need to avoid continuous rubbing on the pads of the fingers as a fundamental pillar of the treatment. The clinical response was spectacular, being asymptomatic in a few days.

DISCUSSION

Pool pulpitis or “pool palms” is a frictional contact dermatitis, probably underdiagnosed, that typically occurs in young children, and is manifested by the appearance of erythematous palmar (and sometimes also plantar) papulo-plaques in areas rubbed against swimming pools, sometimes with the formation of blisters, most frequently on the balls of the fingers [1,2].

The diagnosis is eminently clinical, and the therapeutic pillar is based on abstinence from swimming in the pools for a few days, with a generally excellent clinical response [3].

With this clinical case, we emphasize the need for knowledge of a probably underdiagnosed entity: pool palms. Its recognition is essential to avoid greater therapeutic gestures that could lead to iatrogenesis.

CONFLICT OF INTEREST

The authors declare no conflicts of interest.

AUTHOR CONTRIBUTIONS

MMP, MRS, and DMT managed clinical treatment and procedures, contributing to the development of this paper. CAP directed the writing of the manuscript and follow-up of the patient. ITN and RBE supervised the work.

DECLARATIONS

Ethics: Procedures followed here were following the ethical standards of the responsible committee on human experimentation and with the Helsinki Declaration of 1975, as revised in 1983. We have not used patients’ names, initials, or hospital numbers.

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CONSENT FOR PUBLICATION

Oral and written consent was obtained to publish this image.

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