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Anogenital Warts in Children Always Means Sexual Abuse?

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CLINICAL IMAGE

Figure 1 Condyloma acuminatum before treatment

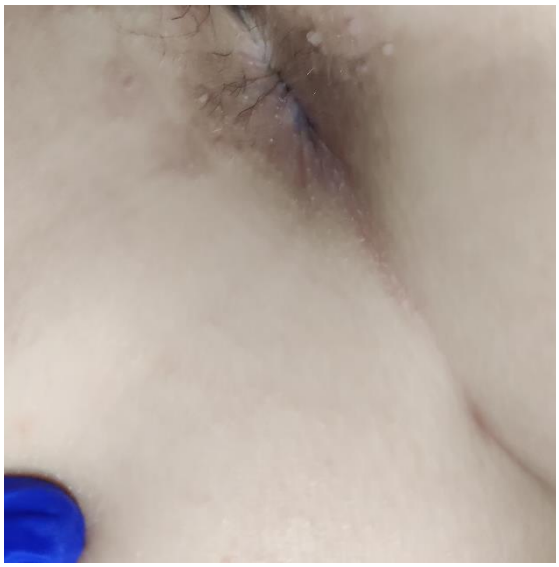

Figure 2 Condyloma acuminatum after treatment

Previously healthy 8-year-old female patient with multiple anogenital lesions with "cauliflower appearance", which were increasing in size, and causing some pain **(Figure 1)**. After assessment, the diagnosis of condyloma acuminatum was made and treatment with imiquimod was started. The child lived with her mother and older sister, and neither of them had condylomatosis. Facing the positivity of HPV infection, analytical study to exclude other sexually transmitted diseases was made (negative). Psychologic and forensic evaluation concluded that the child was stable at a behavioral and emotional level, with no signs of sexual abuse. Due to persistence of lesions under imiquimod, cryotherapy was started with a subsequent improvement **(Figure 2)**.

Anogenital warts are manifestations of HPV infection.[1] Epidemiologic data in children are limited and the exact prevalence of this condition is unknown. A female predominance is suggested by several studies. [2,3,4] In children, the serotypes detected are variable and the possibility of sexual abuse is a major concern[1,2]. Nevertheless, other modes of viral transmission may account for most of pediatric cases. [1,2,6]. The identification of the virus transmission route is hindered by the HPV variable incubation period. [6]The diagnosis is made via clinical examination.[1] Viral serotyping isn't routinely performed since it's not necessary for diagnosis and is not reliable for identifying the source of infection. [2,3,4,8] Interviews with the caregivers and the child, as well as clinical and laboratory testing to evaluate for sexual abuse and other sexually transmitted infections are important parts of the patient assessment. [1,8] If any signs of sexual abuse are noted, the case must be reported to child protective services according with local policies. [7]

With this case the authors pretend to enhance that the origin of pediatric anogenital HPV infections remains often untraced, with no indication of sexual abuse, although this possibility should always be considered.

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