



CARROT BABY

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INTRODUCTION

Hypercarotenemia signifies the presence in large quantity of carotene in the blood and carotenoderma high levels in the skin. Yellow color discoloration of the skin maybe associated with carotenemia, hypothyroidism, diabetes mellitus, liver and kidney disease.

CASE REPORT

8 months old Malay girl with history of prolonged jaundice presented with yellowish-orange discoloration over nasolabial folds, palm and sole but no yellow sclerae. Upon history taking, it became apparent that patient and her mother were heavy consumer raw carrots. She eats one carrot daily for two months before presentation to emergency department. Upon biochemical examination, serum bilirubin, kidney function test, thyroid function test and sugar is normal. Serum beta carotene was not taken because this investigation is not available in our hospital.

DISCUSSION AND CONCLUSION

The most characteristic sign of hypercarotenemia is yellow pigmentation in areas of thickened stratum corneum including palms, soles and nasolabial folds while yellow sclerae are found in patients with all causes of hyperbilirubinemia due to the predilection of bilirubin for elastic tissue. The most important finding was that her sclerae were uninvolved, leading us to consider other causes of yellow-orange discoloration. The localization of the pigment to the palms and soles is consistent clinically with the diagnosis of hypercarotenemia. Despite the striking dermatological finding, patients usually lack any constitutional symptoms. Patient had history of prolonged jaundice however a bilirubin level of 4micromol/l was not sufficient to result in jaundice. In this case, the carotenemia was due to the ingestion of raw carrots, which the patient and mother had consumed in great quantities. Due to the lipophilic nature of the carotenoids, sufficient amounts remained in the tissue to produce discoloration for up to five months.

