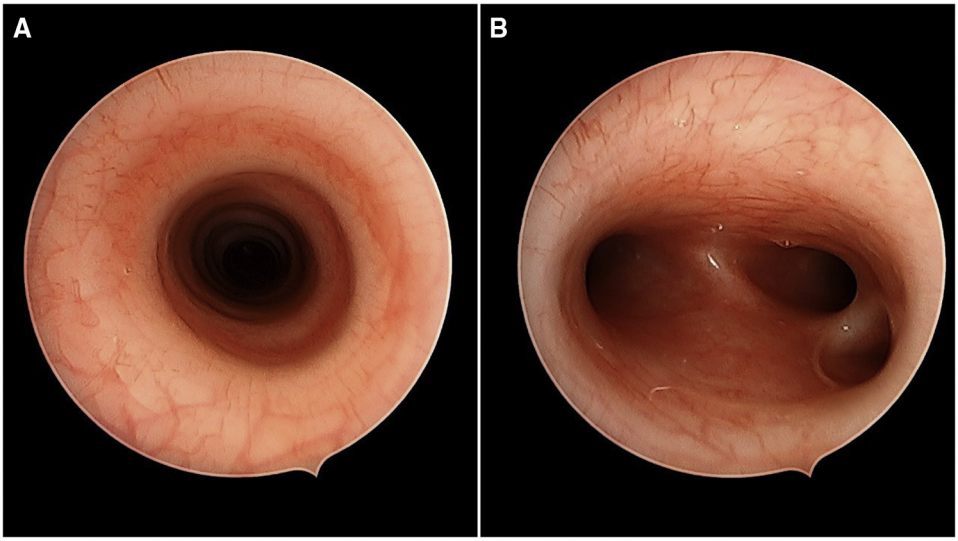

Figure 2. **A,** Midtracheal endoscopic view of complete tracheal stenosis. **B,** Tracheal origin of the right upper lobe bronchus.

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Salmon Patch Conjunctival Tumor

A 10-month-old boy presented with a salmon patch like lesion on the right superomedial conjunctiva that had been increasing in size for 3 months. Physical examination revealed an elevated pink-orange smooth surface, salmon patch-like conjunctival mass, measuring 14 mm × 8 mm, encroaching the limbus from 11 o'clock to 3 o'clock (**Figure**, A). The remainder of the ocular and systemic examination was normal.

The patient was treated with full surgical excision of the conjunctival mass. Histopathological examination (**Figure**, B-D) revealed tissue morphology and immunochemistry consistent with the diagnosis of juvenile xanthogranuloma. At a 1-year follow up, the lesion had regressed, without recurrence.

Juvenile xanthogranuloma is a non-Langerhans cell histiocytotic inflammatory disease accounting for 0.5% of pediatric tumors.[1] Ocular juvenile xanthogranuloma is a rare disease, occurring in 10% of patients with systemic juvenile xanthogranuloma.[2] The most commonly involved sites in ocular juvenile xanthogranuloma are the iris and corneoscleral limbus; conjunctival involvement is rare. Conjunctiva juvenile xanthogranuloma is frequently described as a yellowish mass on the conjunctiva.[1,3,4] In the present case, the salmon patch conjunctiva lesion hindered an accurate diagnosis, because it mimicked conjunctiva lymphoma. Consequently, histological and immunohistochemical examinations were used to differentiate juvenile xanthogranuloma from a malignant lesion (lymphoma) or other causes of histiocytosis (eg, Langerhan cell histiocytosis).

Currently, there is no consensus regarding the treatment of ocular juvenile xanthogranuloma. Successful treatment of conjunctiva juvenile xanthogranuloma has been reported with surgical excision, cryotherapy, and topical and systemic steroids.[3–5] Surgical resection can be useful in managing conjunctiva juvenile xanthogranuloma, with both diagnostic and therapeutic roles. ■

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Data Statement

Data sharing statement available at www.jpeds.com.

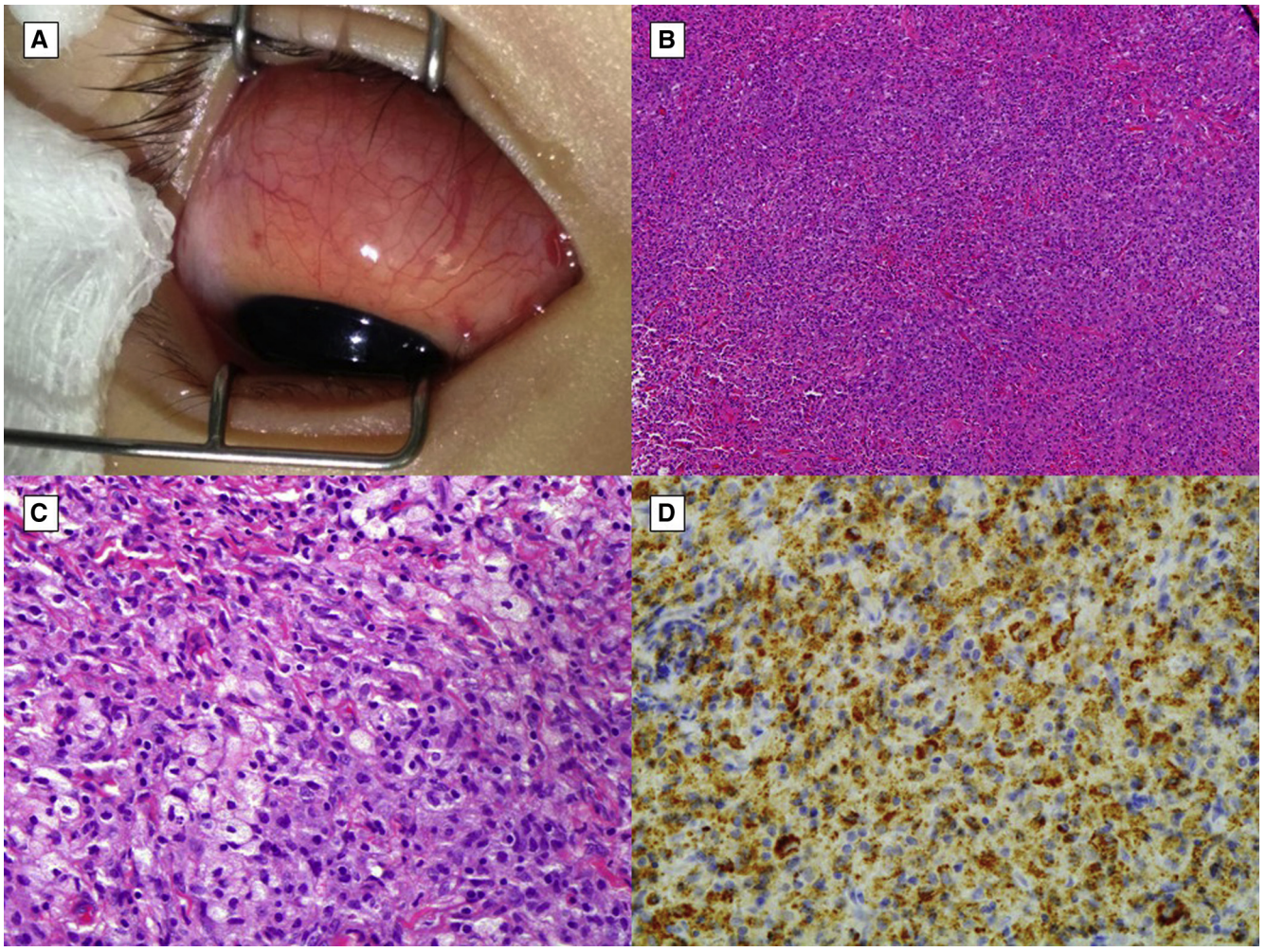

Figure. **A,** The patient had a pinkish orange conjunctival mass measuring 14 mm × 8 mm. **B,** Histopathological examination showed diffuse sheets of histiocytic cells (hematoxylin & eosin staining; original magnification 40×). **C,** Higher-magnification view showing histiocytes admixed with foamy macrophages and sprinkling of lymphocytes (hematoxylin & eosin; original magnification 400 ×). **D,** Immunohistochemistry examination showing that the lesional cells were immunoreactive to CD68 and HAM56 and negative for S100, CD1a, Langerin, and neurofilament.

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