Halo nevi and Vitiligo are quite frequently occurring conditions with their prevalence being 1% and 2% respectively. The Halo nevus phenomenon is fairly common acquired hypo- or depigmentation around preexisting nevi. Vitiligo is an autoimmune mediated depigmenting disease characterized by gradual destruction of melanocytes. Halo nevus can manifest either as an isolated condition or along with vitiligo. Whether both are same or different entities, remains questionable. We report a case of halo nevus with vitiligo, with disappearance of vitiligo patches after the removal of halo nevi.

INTRODUCTION:
Halo nevus(HN) is a halo or ring of depigmentation appearing around congenital or acquired melanocytic nevi and melanoma also. In few situations, the depigmented ring predicts the partial or complete regression of the melanocytic lesion, whereas it can remain stable or undergo repigmentation in some cases. Halo nevi is associated with Vitiligo in 26% of cases. It was described by Sutton in 1916. The exact processes involved in the development of Halo nevi and vitiligo are not known.

CASE REPORT:
A 7 year old boy came to our Dermatology OPD with complaints of lesions over face, trunk, buttocks and extremities from the past 2 years. On examination, vitiligo patches were seen on the face on bilateral eyebrows and eyelids, below the chin and over knees and elbows. Multiple halo nevi were seen on the chin, neck, upper back, trunk and gluteal region.

2 lesions of halo nevi were biopsied and sent for histopathological examination, which revealed reticulate pattern of epidermis and inflammatory infiltrate around few nevus cell nests, which was suggestive of halo nevus. On follow up after 6 weeks, it was observed that vitiligo patches from most parts of the body had disappeared.

DISCUSSION:
Halo nevi also called as 'Sutton nevus,' 'Leukoderma acquisitum centrifugum,' 'Perinevoid vitiligom,' 'Perinevoid leukoderma,' 'Leukopigmentary nevus' and 'Grunewald nevus.' It signifies the development of a halo of depigmentation around a central nevus. Acquired melanocytic nevi (junctional, compound or dermal) are most commonly associated. Halo formation around congenital melanocytic nevi has also been reported. Depigmented halo can also develop around nevocellular nevi, spindle nevi, epithelioid nevi, blue nevi, neurofibromas and melanoma too. It occurs more frequently in children and young adults of both sexes, with back being the most common site, less commonly on the head and limbs.

Halo nevus is due to immunological reaction of the host to a nevus. 4 stages of evolution of halo nevus has been postulated, i) appearance of halo, ii) loss of pigment within nevus, iii) disappearance of nevus, iv) disappearance of halo. Usually no treatment is required for cases of halo nevus. The relationship between HN and vitiligo is interesting. While its been thought that both have the same immunological mechanisms involved in their regression of the melanocytic lesion, whereas it can remain stable or undergo repigmentation in some cases. Halo nevi is associated with Vitiligo in 26% of cases.

CONCLUSION:
The exact immunopathogenic mechanism of HN and vitiligo is still arguable. Many studies report a significant association between these 2 entities whereas various studies say that they can be separate entities. HN can also be a part of clinical spectrum of vitiligo, such as it could be a forerunner of vitiligo in children. Removal of the halo nevi can induce an immunological response in the form of reverse koebnerisation causing the vitiligo lesions to disappear, the exact pathogenesis of which is not known.

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KEYWORDS
Halo nevi, Vitiligo, Reverse Koebnerisation

DISAPPEARANCE OF VITILIGO AFTER REMOVAL OF HALO NEVI – A CASE REPORT

ABSTRACT
Halo nevi and Vitiligo are quite frequently occurring conditions with their prevalence being 1% and 2% respectively. The Halo nevus phenomenon is fairly common acquired hypo- or depigmentation around preexisting nevi. Vitiligo is an autoimmune mediated depigmenting disease characterized by gradual destruction of melanocytes. Halo nevus can manifest either as an isolated condition or along with vitiligo. Whether both are same or different entities, remains questionable. We report a case of halo nevus with vitiligo, with disappearance of vitiligo patches after the removal of halo nevi.

REFERENCES
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