

Clinical Image

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Unveiling the truth: Recurrent mastitis in an adolescent

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Description

An 11-year-old adolescent with a personal and family history of depression presented to the Emergency Department (ED) five times within one month. She reported pain, swelling, erythema, and itching in the left breast (Figure 1). Bloody nipple discharge was noted during the initial episode.

Ultrasound examinations during the first three ED visits showed findings consistent with inflammation/infection, despite the absence of elevated inflammatory markers. She was hospitalized four times and underwent three cycles of intravenous antibiotic therapy, yet her symptoms recurred repeatedly. During hospitalizations, she consistently reported disproportionate pain to the observed inflammatory signs.

Discussion

Initially, bacterial infections such as mastitis or cellulitis were considered, prompting antibiotic therapy. However, the lack of

resolution and the absence of elevated inflammatory markers made these diagnoses unlikely. Other conditions such as non-infectious mastitis, and breast masses were also considered, but did not fully explain the symptoms or their recurrency. During the final hospitalization, the erythema extended to the left abdomen (Figure 1) but disappeared after alcohol cleaning. The adolescent confessed to initially having a true mastitis during her first hospitalization, which was completely resolved. However, she tried to perpetuate the clinical situation by repeatedly applying lipstick to the area to simulate inflammatory signs. She cited increased parental attention and avoidance of school due to bullying as motives. Factitious Disorder (FD) is a psychiatric condition in which physical or psychological symptoms are intentionally fabricated [1-3]. Particularly in adolescents, early diagnosis is challenging but crucial to limit patient harm and avoid unnecessary medical interventions [2-3]. This case highlights the importance of a comprehensive approach that includes consideration of psychological factors in the differential diagnosis process.



Figure 1: Erythema of the left breast and abdomen.

Declarations

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