A Rare Case of Orofacial Granulomatosis

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ABSTRACT

Case Report: A 49-year-old woman presented with possible chronic angioedema. She has experienced chronic lower lip swelling over the past 9 years with intermissions lasting for 2 years. She had a past medical history of inflammatory bowel disease. She had been taking Clofazimine and Dapsone for 8 years for Crohns disease. She had recently been experiencing lip swelling and increased labial swelling. A biopsy was performed and diagnosed with CG. She has been taking anti-inflammatory medication for the swelling and anecdotally has noted improvement in her swelling.

CONCLUSION: CG is a rare disorder but must be evaluated in a patient with the presentation to do with its association with more severe debilitating diseases.

INTRODUCTION

Orofacial Granulomatosis (CG) is a rare, non-infectious disease with unknown etiology. It is more common in females and affects the skin, oral mucosa, and paraoral tissues. The lips are involved in 91% of cases and the maxillary tissues and alveolar ridge are involved in 62% of cases. CG is a rare diagnosis and its treatment is not definitive. There is no specific cure for CG and treatment is focused on the patient’s symptoms.

CASE REPORT

Our patient is a 49-year-old African American female with a history of Crohns disease, glomerulonephritis, and pernicious anemia. She was diagnosed with CG in 2007 but had been taking Clofazimine and Dapsone for 8 years for Crohns disease. She had recently been experiencing lip swelling and increased labial swelling. A biopsy was performed and diagnosed with CG. She has been taking anti-inflammatory medication for the swelling and anecdotally has noted improvement in her swelling.

RESULTS SUMMARY

- Our patient is a 49-year-old African American female with a history of Crohns disease, glomerulonephritis, and pernicious anemia. She was diagnosed with CG in 2007 but had been taking Clofazimine and Dapsone for 8 years for Crohns disease. She had recently been experiencing lip swelling and increased labial swelling. A biopsy was performed and diagnosed with CG. She has been taking anti-inflammatory medication for the swelling and anecdotally has noted improvement in her swelling.

DISCUSSION

CG is a rare condition and its treatment is not definitive. In all patients presenting with chronic labial swelling, the diagnosis should be primary evaluated for in those with ulceration, and oral paraoral and perioral involvement as well as harboring me at their practice for a month. I would like to sincerely thank Dr. Robert Hostoffer, Dr. Hajig Tchourekijian, Dr. David Swender and Dr. Leah Chemin for encouraging and helping guide this presentation as well as harnessing me at their practice for a month.

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REFERENCES


Figure 1: Significant chronic lip swelling in our patient

Figure 2: Possible early fissuring of tongue

Figure 3: Biopsy of lip showing edematous edema as well as granuloma with focal histiocytic and multinucleated phagocyte...