CLINICAL APPROACH TO CHELITIS GRANULOMATOSA– A CASE REPORT

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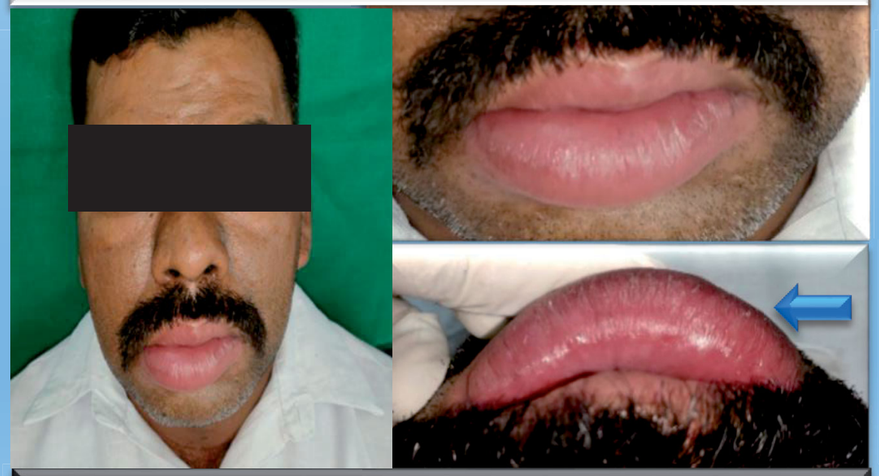
INTRODUCTION

Chelitis granulomatosis(CG) is a rare, persistent, painless, idiopathic chronic swelling of the lip.

- Manifestations of orofacial granulomatosa (OFG) are characterized by non- necrotizing granulomatous inflammation of the oral and maxillofacial region.
- Incidence is 0.08 % in the general population.
- Clinical features - labial enlargement, perioral and mucosal swelling, oral ulcerations.

CASE DESCRIPTION

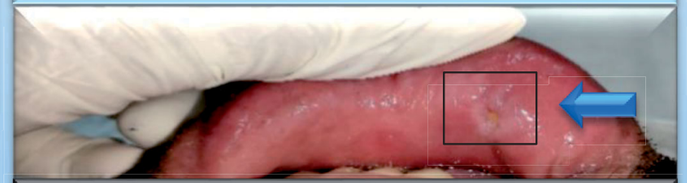
- A male patient aged 45 years referred from the Department of Dermatology with complains of swelling of the lip for the past 6 months with no history of any systemic disease.



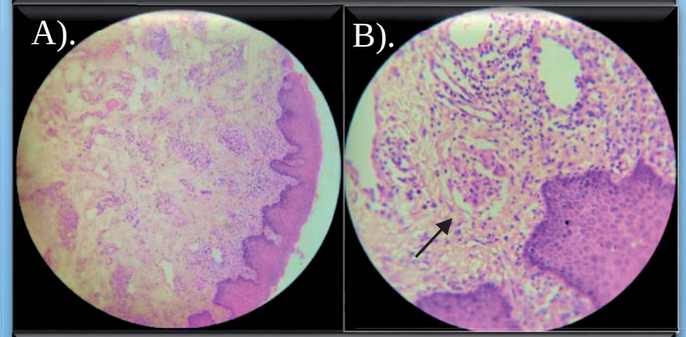
On examination - Clinical image showing mild generalized puffiness present over the face with localised enlargement in lower and upper lip.

INVESTIGATIONS TO RULE OUT

1.Complete blood count, ESR - Infections
2.Chest x-ray -Sarcoidosis,Tuberculosis
3.Mantoux test - Tuberculosis
4.GIT Endoscopy - Crohn's disease
5. Biopsy (confirmatory test)- Chelitis Granulomatosa



Incisional Biopsy was performed in lower right labial mucosa for confirmation



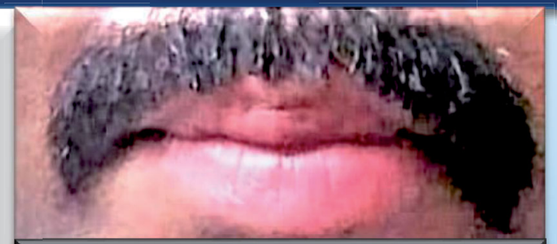
Histopathological –a) Peri &paravascular inflammatory infiltrate in fibrous connective tissue b) Non-caseating granulomas made up of Langerhans type of giant cells are present

Final diagnosis- chelitis granulomatosa

Differential diagnosis- Crohn's disease, sarcoidosis, angioedema, tuberculosis, elephantiasis nostras,etc.,

TREATMENT PLAN

- ✓ Advised oral Clofazimine 50mg & Antihistamine (levocetrizine) 5mg once daily for 2weeks.
- ✓ Topical corticosteroid (clobetasol ptopionate 0.05%) to be applied twice for 14 days.



Patient reviewed after 14 days. Post treatment image shows reduction in swelling size of lower and upper lip.

DISCUSSION

- ✓ CG is rare noncaseating granulomatous disorder. It can be considered a monosymptomatic variant of Merkelsson Rosenthal syndrome, which is a triad of granulomatous chelitis, fissured tongue and facial palsy.
- ✓ In this case the presence of non syndromic CG without the other two manifestations were noted and hence referred to as Miescher's syndrome / Mieshcher's chelitis granulomatosa.
- ✓ Appropriate investigations are done which helps us to exclude other granulomatous conditions.

CONCLUSION

- ✓ Present case highlights the importance of thorough investigations in the diagnosis of the lesion which has been treated by conservative approach.
- ✓ Clinician should know about the comprehensive approach to diagnose, so as to provide various means of treatment planning.

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