

Pyostomatitis Vegetans

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Article information	Abstract
<p>Article history: Received: 4 Jan 2011 Accepted: 26 Jan 2011 Available online: 26 June 2012 ZJRMS 2013; 15(1): 58-59</p> <p>Keywords: Pyostomatitis Vegetans Pemphigus Vegetans Case report</p> <p>*Corresponding author at: Department of Oral Medicine, Faculty of Dentistry, Zahedan University of Medical Science, Zahedan, Iran. E-mail: nosratzahi@yahoo.com</p>	<p>Pyostomatitis vegetans (PV) is a rare chronic inflammatory disease of unknown etiology. Oral appearance are the first symptoms. One of the less common clinical features is erosions which tend of form granulation tissue, and finally develop a vegetative looking, especially in the skin folds and heal and face. In clinical examination diffuse vegetation and snail tract was found.</p>

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Introduction

Pyostomatitis Vegetans (PV) is a rare chronic inflammatory disease which was developed by Hallopiu in 1898 for the first time. Hallopiu reported five vegetative purulent dermatitis cases at the auxiliary and genital area and only two cases out of five reported cases had oral lesions [1-5]. In 1949, McCarthy used the term Pyostomatitis Vegetans for the lesions only and without skin lesions and termed it as subset of pyodermatitis [6]. Although some articles consider pyostomatitis and pyodermatitis similar to each other, PV is very rare so that 50 cases have been reported until the year 2008 [7]. Patients usually complain of a burning mouth and wounds are seen on the oral mucosa in the examinations. One of the less common clinical features is erosions which tend to form granulation tissue and finally develop a vegetative looking, especially in the skin folds and head and face. Presenting a Pyostomatitis Vegetans (PV) case and emphasizing its uncommon oral clinical appearance is the main objective of this report.

Reported Case

The patient was a 49-year-old female who referred to Mashhad Dental Faculty clinic in the early 2008. She was complaining of pain and burning in her lower lip which

had appeared during 2 & 3 months ago. In clinical examinations of the patient (Fig. A and B), diffuse vegetations were found in the lower and upper lips and left-hand cheek. In the same direction, erosion areas and snail tract wounds were seen in the soft and hard palates. Given the mentioned clinical findings, pemphigus and pemphigoid clinical diagnoses were put forward. Since PV is appeared in the form of snail tract from among multiple and chronic ulcers, Pyostomatitis Vegetans was more likely diagnosed. For this reason, the patient was referred to a gastroenterologist in order to study ulcerative colitis and/or inflammatory bowel disease.

After undergoing endoscopy operation, the patient referred to the Dental Faculty Clinic again. No abnormal findings were observed in the patient's trials.

Topical corticosteroid was prescribed for a period of three weeks for the treatment of patient with oral lesions and the patient was monitored. Symptoms were improved after 10 months.

After undergoing biopsy operation, result of histopathology examinations revealed severe edema. There was a view of akantolithic involved in the epithelium and this edema caused by the accumulation of eosinophils in the spiny layer which was forming abscesses inside epithelial (Fig. C).

Table 1. Initial Oral Lesions without Presence of Skin and Intestinal Lesions

Author's Name	Age	Gender	GI Lesions	Skin Lesions	1 st Involvement Place
McCarty	26	Woman	-	-	Oral
Hays	61	Man	-	-	Oral
Thornhill	51	Man	-	-	Oral

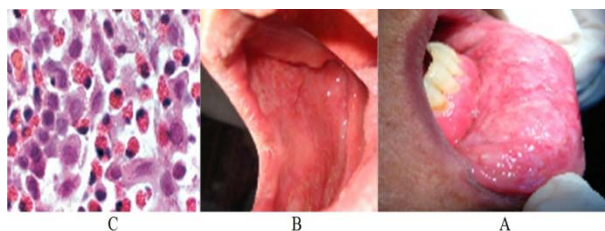


Figure A. Diffuse vegetations in the lower lip

Figure B. Diffuse vegetations in the cheek

Figure C. Akantolitic view in epithelium

Discussion

Pyostomatitis vegetans (PV) is a rare chronic inflammatory disease of unknown etiology which is seen in every age but the highest prevalence has been reported at the age group between 20 to 59 years with the average age (34 years old). This disease is more observed in men and proportion of man to woman stood at 2.1 and also 3.1 as stated in some articles [8].

Predominantly, lesions have been seen in the face and oral cavity with a similar clinical appearance. Specifically, buccal mucosa, lips, gums, palate are more involved while floor of the mouth and tongue show less involvement [9]. The surface of lesions is usually in yellow and creamy color and is covered with a fragile membrane. This membrane is easily removed and surface erosions and small ulcers are remained. With highly developed lesions, the patient may feel pain and discomfort. Pyostomatitis-based etiology is still unknown but usually is accompanied with the inflammatory bowel diseases such as Crohn's and colitis.

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Although lesions were confined to the oral mucosa in the reported patient, only three cases of initial oral lesions were shown without presence of skin and intestinal lesions among 39 Pyostomatitis vegetans cases until the year 2005, details of which are summarized in table 1 [10].

In addition to Pyostomatitis and ulcerative colitis, the patient may complain of intestinal disease such as aphthous, lichen planus or joint inflammatory processes like arthritis, dental ankylosis, and spondylitis as well as non-specific muscular pains [10]. The differential diagnosis includes pemphigus vegetans (Neumann type), different types of pemphigus vulgaris which has more than 50 percent of oral protests.)

In the reported case, lesions showed acanthosis and Eosinophilia response and formation of micro abscesses inside epithelial in clinical and histological terms and Pyostomatitis vegetans was considered as actual diagnosis [5]. The patient's laboratory tests are usually normal although in some cases, anemia caused by intestinal disease or eosinophilia may be seen [3]. So, Pyostomatitis vegetans is a good marker for the advanced intestinal inflammatory diseases. Thus, with the diagnosis of such lesions in the mouth, patient should be referred to a gastroenterologist for the evaluation

Authors' Contributions

All authors had equal role in design, work, statistical analysis and manuscript writing.

Conflict of Interest

The authors declare no conflict of interest.

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