Epiglottic Aphthous Ulcers

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A 31-year-old Japanese woman presenting with an intermittent high fever and throat pain lasting for six months was referred to our hospital. Although a physical examination of the pharyngeal space revealed no abnormal findings, a further laryngoscopic study uncovered multiple epiglottic aphthous ulcers that progressed over a few days (Picture). Subsequently, pustulosis developed on the patient’s bilateral lower legs in addition to areas of oral and genital ulceration; a biopsy of these lesions disclosed neutrophil infiltration. Under a diagnosis of Behçet’s disease, the administration of oral prednisolone and colchicine improved her symptoms, including the epiglottic aphthous ulcers.

Behçet’s disease is a systemic auto-inflammatory disease of uncertain etiology that can induce multisystem complications. Although rare, Behçet’s disease may present with upper respiratory symptoms due to laryngeal involvement (1), leading to airway obstruction (2). General practitioners should therefore be aware of this potentially life-threatening condition and collaborate with ear, nose, and throat (ENT) specialists. In particular, early diagnosis and treatment is required.

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References