



DERMATOPATHOLOGY

MELKERSSON-ROSENTHAL SYNDROME: A CASE REPORT

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Introduction: MELKERSSON-ROSENTHAL syndrome is a rare pathology characterized in its complete form by the triad: labial edema, peripheral facial palsy and plicatured tongue. The etiopathogenesis is unknown. The positive diagnosis is essentially clinical. The histology reveals lymphoepithelioid granulomas, sometimes gigante-cellular without caseous necrosis. The treatment is not well codified, it is primarily symptomatic, medical sometimes surgical.

Observation: We describe the case of a 29-year-old woman from a first-degree relative marriage, with no particular pathological history, who has had recurrent peripheral (3 episodes) facial palsies since the age of 14 years. Etiological that was negative, seen at the dermatology consultation for labial edema evolving for 4 years. The clinical examination revealed a machrochelium, a plicated tongue and a sequential facial asymmetry. Lip biopsy showed a microscopic appearance of an epithelioid granuloma without caseous necrosis with the presence of an inflammatory lymphocytic infiltrate. Biopsy of the salivary glands revealed a discrete chronic nonspecific sialadenitis. The sarcoidosis balance was negative. The patient was placed on oral corticosteroid treatment 1 mg / kg / day and then under intralesional injections of betamethasone with good clinical progress.

Key message: Melkersson Rosenthal syndrome is a rare entity that represents a diagnostic and therapeutic challenge.

