

EPIDEMIOLOGY

CLINICAL, HISTOLOGIC AND TREATMENT PROFILE OF CHRONIC MACROCHEILIA IN TUNISIA

Asma Toumi (1) - N Litaiem (1) - M Jones (1) - S Gara (1) - S Rammeh (2) - F Zeglaoui (1)

Charles Nicolle Hospital, Dermatology, Tunis, Tunisia (1) - Charles Nicolle Hospital, Pathology, Tunis, Tunisia (2)

Introduction: Chronic macrocheilia (CM) is a multi-etiological entity which is often a diagnostic and therapeutic challenge. The data in the literature on this subject are scarce, limited to granulomatous cheilitis.

Objective: The purpose of the study was to outline the epidemiological, histological and etiological spectrum of CM in Tunisia.

Materials and Methods: We performed a detailed clinico-pathological analysis of all patients diagnosed with CM in the Department of Dermatology, Charles Nicolle Hospital in Tunis during the last 17.5 years (from January 2000 to August 2018). CM was defined as persistent enlargement of one or both lips for at least 60 days.

Results: Of the 51 patients identified, 20 had cutaneous leishmaniasis, 14 had sarcoidosis, 9 had granulomatous cheilitis of Miescher, 4 had Melkersson-Rosenthal syndrome, one had lepromatous leprosy, one had systemic amylosis and 2 were diagnosed with "nonspecific" MC. Ulcerations were significantly associated with leishmaniasis (p<0.05). Histological study showed a granulomatous infiltrate in 83% of cases. Medical treatment (both local 28% and systemic 68%) was based on the etiology. Surgery was performed in 2 cases. An improvement of the macrocheilia was noted in 75.8% of patients and a stabilization in 24.1%. Recurrences were noted in 3 cases after complete regression.

Conclusions: This retrospective study, the largest to date enrolling 51 patients with CM, broadens our understanding of CM causes. Mucosal leishmaniasis, a rare and emerging clinical form of leishmaniasis in the Old World was the most common etiology in our series and should be suspected especially in case of ulceration. Interestingly, inflammatory conditions were the second most frequent causes of CM in this series, but represent the most prevalent etiologies of CM in developed countries. Therefore, a high index of suspicion for locally prevalent etiologies is important to establish an adapted diagnostic algorithm in different parts of the world.





