

MUCOSAL DISEASES (ORAL, ANOGENITAL), EXTERNAL EYE DISEASE

CHEILITIS GLANDULARIS: CASE REPORT AND DIAGNOSTIC CRITERIA.

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Introduction: Cheilitis glandularis (CG) is a chronic inflammatory disease of unknown etiology that affects the minor salivary glands. Its manifests clinically with macroqueilia and discharge of thick mucous and/or purulent material through dilated ductal orifices. The diagnosis is based on clinical and histopathological criteria.

Objective: Report a typical case of CG that filled all the diagnostic criteria.

Case Report: Patient 68-years-old, male, born in Petrópolis/RJ, Brazil. He reported the emergence of papular lesions in the lower and upper labial mucosa 60 days ago, leading to macroqueilia. He denied procedures for lip augmentation with fillers and refferred episode of pus draining. On physical examination, there was lip augmentation with the presence of papular lesions in the mucous membranes and discharge of thick labial salivary secretion. Upper labial mucosa biopsy was performed and the histopathological examination showed dilatation of ductal structures with thickening of the duct wall and chronic inflammatory infiltrate. There were highlighted areas of mucous and oncocytic metaplasia.

Discussion: The main differential diagnoses of the disease are reaction to lip augmentation fillers, orofacial granulomatosis, multiple mucocele, angioedema and cysts and tumors of minor salivary glands. Reiter et al. performed a review of 81 cases (1950-2010) and proposed diagnostic criteria. The clinical criteria were: involvement of more than one minor salivary gland and purulent or mucoid discharge of the involved glands. The histological criteria were: sialectasia, chronic inflammation, ductal mucous/oncocytic metaplasia and presence of mucin in ducts. The presence of two clinical criteria and two or more histological criteria are required for the diagnosis. Our patient had all the criteria proposed, setting up a classic case of the CG.

Conclusion: It is very important that the clinicians and pathologists are familiar with the diagnostic criteria of CG and remember to include this disorder in the differential diagnosis of macroqueilia.





