



TROPICAL DERMATOLOGY

## **BORDERLINE TUUBERCULOID LEPROSY MASQUERADING AS CHELITIS GRANULOMATOSA**

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**BACKGROUND:** Cheilitis Granulomatosa is an uncommon condition presenting as lumpy, chronic swelling of lips due to granulomatous inflammation. Also defined as persistent inflammation of one or both lips for more than 8 weeks. Causes are multiple including granulomatous, infective, non-infective. Leprosy is one of the rare causes.

**OBSERVATION:** 50 years female with persistent asymptomatic swelling of the lower lip for two years duration. Started as reddish patch that later developed an erythematous patch over the chin. No history of wheals, angioedema or atopy. No history of trauma. On examination, swelling of the lips with an erythematous plaque of size (1x1.5)cm over the chin and upper lip. No sensory deficit over the skin lesions. No nerve thickening, no fissuring of tongue, no lymph node involvement, no intraoral lesions. With differentials of Cutaneous TB, Mantoux sent but was negative. Slit skin smear done considering leprosy as differential diagnosis, but was also negative. Incisional biopsy taken from the skin showed periadnexal and perineural lymphocytic infiltration. Granuloma formed by epithelioid histiocytes. Fite-Faraco Stain revealed occasional acid fast bacilli. Thus diagnosis of Borderline Hansen's was made. Patient was started on Multibacillary- Multi Drug Therapy in view of atypical presentation. The patient improved with medication.

**KEY MESSAGE:** Chronic lip swelling may be an atypical and rare presentation of leprosy. In an endemic country like Nepal, leprosy should always be considered in the differential diagnosis of chronic macrocheilia. But, ultimately the diagnosis depends upon historical and clinical data with histopathological findings.

