

## Orofacial Granulomatosis in Crohn's Disease

Luke Chmielecki, MD¹; Neal D. Dharmadhikari, MD¹; Ansu Noronha, MD¹¹Boston University School of Medicine, Boston Medical Center, Boston, MA

## Introduction

- Extra-intestinal manifestations (EIMs) affect 6-25% of inflammatory bowel disease (IBD) patients
- 25% of patients have more than one EIM
- Orofacial granulomatosis (OFG) is characterized by orofacial swelling with non-caseating granulomas seen on pathology







Picture 2: Lip Swelling (internal)



Picture 3: Transverse Colon, showing endoscopic remission

## Case Report

- 23 year-old male with history of Crohn's colitis (diagnosed age 15) presented with hematochezia for 7 months and left sided lip swelling for 1 year
- PMH: supraglottic edema s/p tonsillectomy with pathology showing non-caseating granulomas
- Exam notable for left-sided lip and cheek swelling without mass or lesion
- Bloodwork notable for ESR of 19 and CRP of 7.5
- Lip biopsy showed non-caseating granulomas consistent with OFG
- Treated with oral prednisone as bridge to 6-mercaptopurine
- OFG was treated with intralesional corticosteroids without relief
- Recent colonoscopy showed endoscopic and pathologic remission of Crohn's despite on-going OFG symptoms

## Discussion

- OFG is a rare EIM of Crohn's Disease and requires a high clinical suspicion and biopsy to diagnose
- Treatment includes topical steroids and calcineurin inhibitors
- Recent data suggests cinnamon/benzoate free diets may benefit patients
- Adequate treatment of IBD is equally as important
- Patient likely had OFG undiagnosed for >1 year based on reported symptoms and tonsil pathology
- This case demonstrates that EIM can be present despite satisfactory control of IBD symptoms