

Nasal Septum Perforation Secondary to Lupus Vulgaris

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Abstract

Case Report

Nasal septum perforation is an uncommon and not well known feature of lupus erythematosus (LE). In general, it occurs during exacerbations and in a context of systemic vasculitis. Very rarely it can be a presenting sign, accompanying more usual manifestations of LE. We report the case of A 47-year-old female with systemic lupus erythematosus who consulted for respiratory difficulties and for whom a clinical examination plus a ct scan was performed, showing a perforation of the nasal septum.

Keywords: Nasal Septum Perforation, Lupus Erythematosus, Systemic Vasculitis, Respiratory Difficulties, CT Scan.

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INTRODUCTION

Oral ulcers, defined as oral or nasopharyngeal ulceration, is one of the American College of Rheumatology diagnostic criteria for lupus erythematosus (LE) [1, 2]. Although a recognized feature of LE, nasal septum perforation is uncommonly reported in this condition and rarely constitutes the presenting manifestation.

CASE REPORT

A 47-year-old patient with a history of lupus under treatment who presented in 2020 with a flare-up of her pathology requiring hospitalization in an intensive care unit, after stabilization and control of her pathology the patient was able to return home, after a few months the patient presented with repeated episodes of epistaxis accompanied by breathing difficulties.

The patient therefore consulted within our department where a clinical and endoscopic examination was carried out showing a perforation of the nasal septum involving the anteroinferior and anterosuperior parts of the cartilaginous nasal septum.

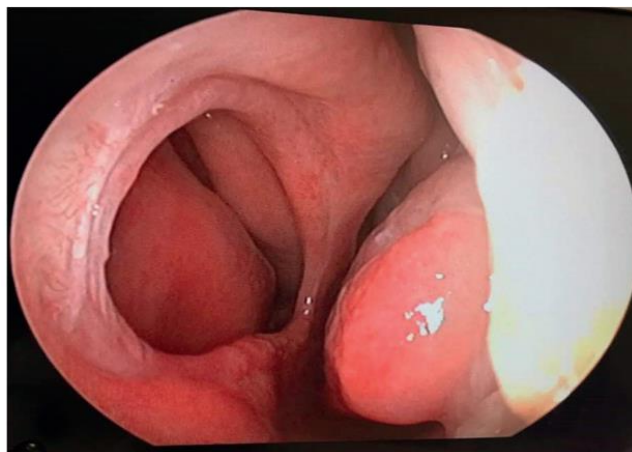


Fig 1: Endoscopic image showing septum perforation

A CT scan was also performed, showing a perforation of the nasal septum.

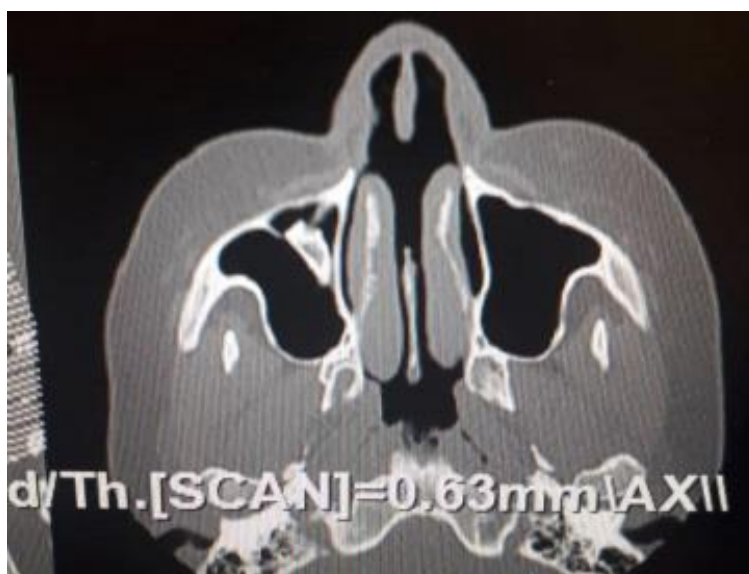


Fig 2: CT scan image showing septum perforation

She was treated with pulse methylprednisolone, mycophenolate mofetil, hydroxychloroquine, and other supportive medications. The patient attained remission over time, and periodic endoscopic examination showed the perforation to be stable in size. A surgery was performed to reconstruct the septal cartilage using a costal graft.

DISCUSSION

Systemic lupus erythematosus is a disease that affects various organs and has a wide variety of manifestations. In each manifestation, patient may have more system involvement and the patient presents with the manifestation of involvement of the same system [4].

Nasal septal perforation, a communication between the nasal passageways is usually discovered incidentally during clinical or radiological examination. A broad variety of presumed etiologies have been described, making the diagnostic approach heterogeneous [4, 5].

Vasculitis-induced septum perforation is a rare manifestation in lupus that often occurs during the disease and during periods of exacerbation and recovery in the known disease.

According to precious articles, the history of perforation in rheumatologic diseases dates back to more than 50 years. For example, a study was performed on 12 patients in 1975 [5]. Three of patients had lupus, four had rheumatoid arthritis, and other had rheumatologic diseases. The above study ultimately concluded that septal perforation could occur in these diseases with or without epistaxis, and most of these diseases were diagnosed [3].

Nasal perforation is an underdiagnosed complication of lupus because it is asymptomatic and the patients are often not aware of their nasal problem.

Nasal septal perforation in lupus may be secondary to vasculitis or to ischemia with subsequent chondrolysis [2]. Treatment should primarily be directed to control disease activity.

CONCLUSION

Systemic lupus erythematosus is a disease with various manifestations that can be easily ignored if not undergoes differential diagnosis diagnosed.

Patient Consent: Informed consent for publication was obtained from the patient

Conflict of Interest: The authors declared no conflicts of interest.

REFERENCES

1. Saurat, J. H., & Musette, P. (1999). Signes cutanés du lupus érythémateux. In: Saurat, J. H., Grosshans, E., Laugier, P., Lachapelle, J. M., (eds). *Dermatologie et Maladies Sexuellement Transmissibles*, 3e ed. Masson, Paris, 313-322.
2. Sontheimer, R. D. (1999). Lupus Erythematosus. In: Freedberg, I. N., Eisen, A. Z., Wolff, K., Austen, K. F., Goldsmith, L. A., Katz, S. I., Fitzpatrick, T. B., (eds). *Dermatology in General Medicine*, 5th ed. McGraw-Hill, USA, 1993-2009.
3. Garg, A., Wadhwa, R., Gulati, S. P., & Singh, J. (2010). Lupus vulgaris of external nose with septal perforation—a rarity in antibiotic era. *Indian J Tuberc*, 57(3), 157-159.

4. Frey, H. H., & Weinaug, P. (1968). On the frequency and etiology of nasal septum perforation. *HNO*, 16(2), 33-39. cosmetic deformity. *Indian Journal of Dermatology*, 60(1), 104. PMID: 25657427 | PMCID: PMC4318033
5. Nair, P. A., Mehta, M. J., & Patel, B. B. (2015). Ulcerative lupus vulgaris over nose, leading to