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DELAY IN DIAGNOSIS OF BEHCET’S SYNDROME– A CASE REPORT
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INTRODUCTION/OBJECTIVES: Behcet’s syndrome (BS) is a rare chronic multisystemic disorder with unknown etiology and a unique geographic distribution. As well as in other vasculitides, damage in BC accrues over time and could cause significant influence on functional impairment and irreversible tissue loss.

CASE PRESENTATION: A 29-year-old woman who has been suffering from BS since the age of 24 developed a full destruction of soft palate and uvula, and is associate with nasal regurgitation of food and hypernasal speech. The above symptoms developed during a 4-year period that only oral symptoms of BS were present. Oral ulcerations recurred twice a year and lasted over 10-40 days, healed with scarring and tissue loss. The patient had been treated by practitioners as a cases of Sut-ton’s disease. Cutaneous lesions on the face, hands and lower extremities were first noted a year ago and were caused by local trauma (pathergy test equivalent). The lesions were usually painful with overhanging borders and a grayish yellow necrotic base that healed with scarring within 2 to 3 weeks. The oral examination revealed well-defined, deeply punched-out, painful ulcers on hard palate and multiple scars. The patient had gone through medical evaluation. There was no other manifestation from the other system. The biopsy was unremarkable. Duration between the time onset of BS and the diagnosis was found to be 5 years.

CONCLUSION: Long-term untimely diagnosis of BS is largely due to lack of pathognomonic clinical finding and specific laboratory test. Although rare, BS should be considered in the differential diagnosis of oral ulceration of unknown etiology.