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Clinical vignette

Strawberry gingivitis as a manifestation of granulomatosis with polyangiitis

A 55-year old female was referred because of progressive gingivitis. Her medical history was unremarkable. Symptoms had developed over the course of a month, starting with slight redness and tenderness of her upper and lower gums, subsequently progressing into painful. easily bleeding, deeply red and swollen lesions (Fig. 1). She felt tired, had lost about six pounds and she reported a backache between her left scapula and spine. Physical examination showed good oral hygiene and symmetrically enlarged cervical lymph nodes. Laboratory evaluation only showed a mildly elevated level of CRP (18 mg/l). Additional laboratory and urinary evaluations and a chest X-ray were unremarkable. A gingival swab culture was negative. The initial gingival biopsy demonstrated extensive chronic inflammation, but was too small to find disease-specific clues. Subsequently, a consulted specialized oral surgeon recognized the gingival lesions as 'strawberry gums' indicative of granulomatosis with polyangiitis (GPA) [1]. Anti-nuclear cytoplasmic antibodies were tested and showed a cytoplasmic staining pattern directed against PR3. A repeated gingival biopsy showed inflammatory changes with granuloma formation and signs of vasculitis, confirming the diagnosis of GPA [2]. The patient received remission-induction treatment with glucocorticoids and MTX. One month later, the gingival inflammation had greatly improved and her backache had disappeared. The diagnosis of ANCA-associated vasculitis remains challenging, and recognizing mucocutaneous manifestations such as strawberry gums can be an important clue to early diagnosis of GPA.

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Fig. 1 Inflammatory changes of the gingival tissue with a strawberry-like appearance, indicative of granulomatosis with polyangiitis



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