

CLINICAL IMAGE

Hormone spiral in treatment of progesterone-induced stomatitis

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Abstract

Hormonal changes in the menstrual cycle may cause autoimmune progesterone-induced stomatitis. This case illustrates that insertion of a hormone spiral can be a treatment option to reduce mucosal lesions and symptoms.

KEYWORDS

dentistry, dermatology, ear, nose and throat

A 34-year-old woman presented with a cyclic monthly onset of painful blisters and ulcerations on her lips and tongue (Figure 1). She also had palmar lesions and lesions on the extremities. She did not take any contraceptive at the time. She was negative for a panel of antinuclear antibodies (ANA), antineutrophil cytoplasmic antibodies (ANCA), herpesvirus and adenovirus, vitamin deficiencies, and fungal infection. No infectious or drug reactions could be identified, and due to the cyclic monthly clinical presentation, progesterone-induced stomatitis was considered the most likely diagnosis. Systemic prednisolone was initially administered with some effect, but with recurrence of lesions. After assessment by a gynecologist, a levonorgestrel hormone spiral (Mirena, Bayer AB) was inserted. Following this, the patient had no exacerbations of the mucosal lesions. Autoimmune progesterone dermatitis and stomatitis are very rare but develop as an autoimmune reaction to hormonal changes in the menstrual cycle, and the severity can range from barely visible to anaphylactic.¹ Onset of symptoms is typically in the luteal phase of the menstrual cycle.² In the present case, downregulation of progesterone receptors by a hormone spiral resulted in remission of the mucosal lesions.



FIGURE 1 The patient presented with monthly blisters on the dorsum of the tongue that ruptured spontaneously

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CONFLICT OF INTEREST

None declared.

AUTHOR CONTRIBUTIONS

FJS and TØP were involved in the clinical assessment of the patient, drafted the manuscript, and approved the final version. SL was involved in clinical assessment of the patient, critically revised the manuscript and approved the final version.

ETHICAL APPROVAL

Consent from the patient was considered sufficient, and additional ethical approval was not required.

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