[PICTURES IN CLINICAL MEDICINE]

Oral Ulcers Associated with Scrub Typhus

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Picture 1.



Picture 3.

A previously healthy 71-year-old woman presented with a 5-day history of worsening myalgia, sore throat, oral ulcers and a low-grade fever. Her primary care physician suspected rheumatic diseases, so she was referred to our hospital. A physical examination revealed nonpruritic maculopapular rashes on the trunk and extremities and painful mucosal ul-



Picture 2.

ceration above the uvula (Picture 1). A painless black crust (eschar) with central necrosis was present on her left thigh (Picture 2), and non-pruritic maculopapular erythema on the abdomen was observed (Picture 3). The eschar of her thigh was positive for Orientia tsutsugamushi according to a polymerase chain reaction analysis. Doxycycline 200 mg/day was initiated. After 10 days, her symptoms disappeared. Scrub typhus is a mite-borne infectious disease caused by O. tsutsugamushi, which is endemic in Japan. Sore throat may occur (1), although oral ulceration is a rare manifestation, as in our case. Other infectious diseases that cause oral ulceration include herpes simplex virus, varicella-zoster virus (2), human immunodeficiency virus (3), syphilis (4) and tuberculosis (5). Identifying eschars through careful clinical examinations is important, as scrub typhus can mimic other infectious illnesses and rheumatic diseases.

Shotaro Suzuki (corresponding author) has obtained informed consent from the patient. The consent form is kept by the corresponding author.

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