

Meeting January 22 1969

Cases

Crohn's Disease of the Mouth

T P Dudeny
(for I P Todd FRCS)
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London)

Mr D S, aged 36. Lettering artist
Sixteen years ago this man developed attacks of diarrhoea, nausea and vomiting with, in addition, the typical pain of peptic ulceration. The attacks became more frequent until seven years ago when laparotomy revealed a mass in the jejunum 5 in. (12.5 cm) from the duodeno-jejunal flexure. This was resected and found to have the microscopic appearances of Crohn's disease.

One year later the patient developed a perianal abscess and following this he was operated upon for fistula-in-ano. The histology was not diagnostic of Crohn's disease.

In August 1967 a barium meal showed duodenal ulceration with pyloric stenosis and a stricture of the ileum. The patient underwent vagotomy and gastroenterostomy, and a further resection of the ileum. Histology of the ileum showed Crohn's disease.

In July 1968 a swelling developed in the patient's mouth. On examination there was an area 5 × 3 cm of raised oedematous pink granulation tissue arising from the buccal mucosa on the left side. It was soft to palpation and not tender.

A biopsy taken from this lesion showed hyperplastic squamous epithelium overlying oedematous and chronically inflamed connective tissue, with dense infiltrations of plasma cells and one or two epithelioid and giant cell foci. There were no other abnormalities on physical examination and the patient had a negative Mantoux reaction and normal chest X-ray.

In view of the previous history and present histology, we think it reasonable to conclude that this is Crohn's disease of the mouth. In a review of the literature we have been unable to find any other recorded cases of the disease in this situation.

The following cases were also shown:

Malignant Melanoma of the Anus Occurring in Pregnancy

Mr N W Harrison
(for Mr P E Huddy)

Linitis Plastica of the Large Intestine

Mr T A Boxall
(for Mr J D Griffiths)

Massive Hæmorrhage from Diffuse Diverticular Disease

Dr Basil Morson
and Mr Ian Todd

Subtotal Colectomy for Ulcerative Colitis and Carcinoma Colon; Subsequent Carcinoma Rectum

Mr J L Grogono
(for Mr E C Butler)

Diverticulum of the Cæcum with Abscess Formation

Mr W S Shand
(for Mr Ian Todd)

Potassium Chloride Induced Stricture of the Small Intestine

Mr J Hardcastle
(for Mr Ian Todd)

Identical Female Twins with Long-segment Hirschsprung's Disease

Mr J D Atwell

Rectal Prolapse due to Multiple Lymphoid Polyposis

Mr J D Atwell
and Dr J E Banatvala

Carcinoma of the Colon in a 13-year-old Female Child

Mr T P Brock
(for Mr E C Butler)

Perianal Ulceration due to Chronic Lymphatic Leukæmia

Mr J C Mountain
(for Mr R Cox)