

## Sarcoidosis Presenting As Tongue Ulcer

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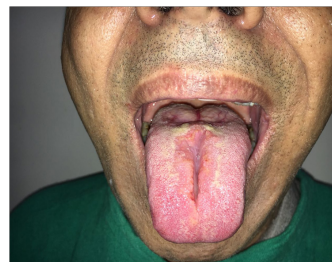
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### 1. Clinical Image

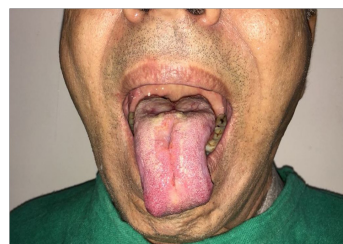
#### 1.1. Description

Oral sarcoidosis is a rare entity. Scroff in 1942 reported first case of oral involvement in a patient with sarcoidosis. Oral manifestations are usually seen in known cases of generalized sarcoidosis. Rarely, like in the present case, oral involvement may be the first or only presentation of the disease.

A 58 year old male presented in the otorhinolaryngology outpatient department with persistent nonhealing tongue ulcer. Patient had difficulty in eating and there was documented weight loss of 1.5 kg over three months period. Local examination demonstrated a single midline ulcer over the anterior two-third of the dorsal surface of the tongue (**Figure 1**). The ulcer was irregular in shape with everted edges, irregular and nodular floor and tender indurated base. Tongue mobility was normal. There was no palpable cervical lymphadenopathy. Punch biopsy was taken and histopathological examination showed non caseating epitheloid cell granuloma with Langerhans type multinucleated giant cells. The Ziehl-Neelsen stain for acid fast bacilli was non contributory. Further radiological and blood investigations were carried out based on this report. Chest X ray showed bilateral hilar lymphadenopathy. Pulmonary function tests were normal. His serum Angiotensin converting enzyme levels (124 U/L normal range 8 - 52 U/l), serum calcium( 10.9 mg/dl normal range 8.5-10.5 mg/dl) and ESR were found to be raised. In view of all these findings, a diagnosis of sarcoidosis was suspected and it was further confirmed by revelation of eye and liver involvement on detailed disease oriented investigations. Patient was put on prednisolone 30 mg per day and within 3 weeks patient showed improvement in tongue ulcer (**Figure 2**).



**Figure 1:** Images before and after NCMT



**Figure 2:** Slight improvement in the tongue ulcer after starting corticosteroids.

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