

Recurrent Swelling of Parotid Glands and Sjögren's Syndrome

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ABSTRACT

Introduction: Primary Sjögren Syndrome (SS) is an autoimmunedisorder characterized by chronic lymphocytic infiltration of exocrine tissues. SS may occur either alone (primary SS) or in association with a connective tissue disorder (secondary SS). Major salivary gland enlargement occurs in 25–66% of patients with primary SS.

Observation: Subjects were 3 women and a man, with a mean age of 64 years. All patients consulted for recurrent painful parotidomegaly. Two patients had swelling of both the left and right parotid gland. All patients had been given courses of different antibiotics elsewhere for several days with no improvement in their condition. All the patients complained from xerostomia and xerophthalmia. Serological results revealed a positive ANA, strongly positive anti-Sjögren's syndrome-A (SS-A) and positive anti-Sjögren's syndrome-B (SS-B). Labial salivary gland biopsy (LSGB) was performed for all the patients and confirmed the presence of SS based on the American-European Consensus Group 2002 criteria. In one case Biopsy of the parotid gland tissue was performed and confirmed malignant transformation into MALT lymphoma. For 3 patients ; A low-dose corticosteroid was prescribed; a complete remission of SS was evident. Chemotherapy for treatment of MALT lymphoma was prescribed but the patient died after suffering from a severe infection.

Conclusion: Bilateral parotid swelling is not an uncommon occurrence and numerous causes have been identified. Imaging is a valuable and useful method for diagnosis of salivary gland diseases. In Sjogren's syndrome the dry mouth and poor salivary flow may be considered to account at least partly for the recurrent swellings found in this condition by predisposing to ascending infection. The reduction in size of the glands after treatment with corticotrophin indicates that there is also inflammatory swelling of the interstitial tissues.