

Relapsed Knee Arthritis during Horton's Disease

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ABSTRACT

Introduction: Articular manifestations of Horton's disease (HD) are by far dominated by rhizomelic pseudopolyarthritis noted in 20 to 86% of cases (Buttgereit F et al 2016); the other clinical presentations like seronegative chronic polyarthritis or oligoarthritis of large joints are much rarer (Arlet P et al 1990, Gran JT et al 2000). The mono-arthritis is exceptional and pose a diagnostic challenge during this angiitis. We report an original observation of recurrent monoarthritis of the knee during HD.

Observation: A 66-year-old patient was admitted to hospital for isolated long-term fever. The patient did not report any functional signs and the clinical examination was without abnormalities, biology noted a marked biological inflammatory syndrome; particularly an ESR at 110m/H1. The infectious screening was negative. A HD was then suspected and biopsy of the temporal artery was performed confirming the diagnosis. Under systemic corticosteroids, the evolution was favorable. During her follow-up, the patient presented 3 episodes of mono-arthritis of the left knee without specific systemic signs of a HD flare. The puncture of the articular fluid each time brought back a turbid liquid with altered polynuclear cells, a negative culture and absence of crystals. Radiography of both knees showed linear opacities at the joint line. The diagnosis of chondrocalcinosis was retained and the patient was treated by Colchicine with marked improvement.

Comments and conclusion: The association of HD with articular chondrocalcinosis remains exceptional and unusual; indeed in the series of Rachdi I et al, 112 cases of HD, only one case or 0.89% had this association (Rachdi I et al 2014). This diagnosis is worthy of mention in the case of peripheral arthritis in a patient followed for HD.