

World Journal of *Clinical Cases*

World J Clin Cases 2020 October 26; 8(20): 4688-5069



MINIREVIEWS

- 4688 Relationship between non-alcoholic fatty liver disease and coronary heart disease
Arslan U, Yenerçaz M

ORIGINAL ARTICLE

Retrospective Cohort Study

- 4700 Remission of hepatotoxicity in chronic pulmonary aspergillosis patients after lowering trough concentration of voriconazole
Teng GJ, Bai XR, Zhang L, Liu HJ, Nie XH

Retrospective Study

- 4708 Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas
Noh JH, Kim DH, Kim SW, Park YS, Na HK, Ahn JY, Jung KW, Lee JH, Choi KD, Song HJ, Lee GH, Jung HY
- 4719 Observation of the effects of three methods for reducing perineal swelling in children with developmental hip dislocation
Wang L, Wang N, He M, Liu H, Wang XQ
- 4726 Predictive value of serum cystatin C for risk of mortality in severe and critically ill patients with COVID-19
Li Y, Yang S, Peng D, Zhu HM, Li BY, Yang X, Sun XL, Zhang M
- 4735 Sleep quality of patients with postoperative glioma at home
Huang Y, Jiang ZJ, Deng J, Qi YJ
- 4743 Early complications of preoperative external traction fixation in the staged treatment of tibial fractures: A series of 402 cases
Yang JZ, Zhu WB, Li LB, Dong QR
- 4753 Retroperitoneal vs transperitoneal laparoscopic lithotripsy of 20-40 mm renal stones within horseshoe kidneys
Chen X, Wang Y, Gao L, Song J, Wang JY, Wang DD, Ma JX, Zhang ZQ, Bi LK, Xie DD, Yu DX
- 4763 Undifferentiated embryonal sarcoma of the liver: Clinical characteristics and outcomes
Zhang C, Jia CJ, Xu C, Sheng QJ, Dou XG, Ding Y
- 4773 Cerebral infarct secondary to traumatic internal carotid artery dissection
Wang GM, Xue H, Guo ZJ, Yu JL
- 4785 Home-based nursing for improvement of quality of life and depression in patients with postpartum depression
Zhuang CY, Lin SY, Cheng CJ, Chen XJ, Shi HL, Sun H, Zhang HY, Fu MA

Observational Study

- 4793** Cost-effectiveness of lutetium (^{177}Lu) oxodotreotide *vs* everolimus in gastroenteropancreatic neuroendocrine tumors in Norway and Sweden
Palmer J, Leeuwenkamp OR
- 4807** Factors related to improved American Spinal Injury Association grade of acute traumatic spinal cord injury
Tian C, Lv Y, Li S, Wang DD, Bai Y, Zhou F, Ma QB
- 4816** Intraoperative systemic vascular resistance is associated with postoperative nausea and vomiting after laparoscopic hysterectomy
Qu MD, Zhang MY, Wang GM, Wang Z, Wang X

META-ANALYSIS

- 4826** Underwater *vs* conventional endoscopic mucosal resection in treatment of colorectal polyps: A meta-analysis
Ni DQ, Lu YP, Liu XQ, Gao LY, Huang X

CASE REPORT

- 4838** Dehydrated patient without clinically evident cause: A case report
Palladino F, Fedele MC, Casertano M, Liguori L, Esposito T, Guarino S, Miraglia del Giudice E, Marzuillo P
- 4844** Intracranial malignant solitary fibrous tumor metastasized to the chest wall: A case report and review of literature
Usuda D, Yamada S, Izumida T, Sangen R, Higashikawa T, Nakagawa K, Iguchi M, Kasamaki Y
- 4853** End-of-life home care of an interstitial pneumonia patient supported by high-flow nasal cannula therapy: A case report
Goda K, Kenzaka T, Kuriyama K, Hoshijima M, Akita H
- 4858** Rupture of carotid artery pseudoaneurysm in the modern era of definitive chemoradiation for head and neck cancer: Two case reports
Kim M, Hong JH, Park SK, Kim SJ, Lee JH, Byun J, Ko YH
- 4866** Unremitting diarrhoea in a girl diagnosed anti-N-methyl-D-aspartate-receptor encephalitis: A case report
Onpoaree N, Veeravigrom M, Sanpavat A, Suratannon N, Sintusek P
- 4876** Paliperidone palmitate-induced facial angioedema: A case report
Srifuengfung M, Sukakul T, Liangcheep C, Viravan N
- 4883** Improvement of lenvatinib-induced nephrotic syndrome after adaptation to sorafenib in thyroid cancer: A case report
Yang CH, Chen KT, Lin YS, Hsu CY, Ou YC, Tung MC
- 4895** Adult metaplastic hutch diverticulum with robotic-assisted diverticulectomy and reconstruction: A case report
Yang CH, Lin YS, Ou YC, Weng WC, Huang LH, Lu CH, Hsu CY, Tung MC

- 4902** Thrombus straddling a patent foramen ovale and pulmonary embolism: A case report
Huang YX, Chen Y, Cao Y, Qiu YG, Zheng JY, Li TC
- 4908** Therapeutic experience of an 89-year-old high-risk patient with incarcerated cholecystolithiasis: A case report and literature review
Zhang ZM, Zhang C, Liu Z, Liu LM, Zhu MW, Zhao Y, Wan BJ, Deng H, Yang HY, Liao JH, Zhu HY, Wen X, Liu LL, Wang M, Ma XT, Zhang MM, Liu JJ, Liu TT, Huang NN, Yuan PY, Gao YJ, Zhao J, Guo XA, Liao F, Li FY, Wang XT, Yuan RJ, Wu F
- 4917** Woven coronary artery: A case report
Wei W, Zhang Q, Gao LM
- 4922** Idiopathic multicentric Castleman disease with pulmonary and cutaneous lesions treated with tocilizumab: A case report
Han PY, Chi HH, Su YT
- 4930** Perianorectal abscesses and fistula due to ingested jujube pit in infant: Two case reports
Liu YH, Lv ZB, Liu JB, Sheng QF
- 4938** Forniceal deep brain stimulation in severe Alzheimer's disease: A case report
Lin W, Bao WQ, Ge JJ, Yang LK, Ling ZP, Xu X, Jiang JH, Zuo CT, Wang YH
- 4946** Systemic autoimmune abnormalities complicated by cytomegalovirus-induced hemophagocytic lymphohistiocytosis: A case report
Miao SX, Wu ZQ, Xu HG
- 4953** Nasal mucosa pyoderma vegetans associated with ulcerative colitis: A case report
Yu SX, Cheng XK, Li B, Hao JH
- 4958** Amiodarone-induced hepatotoxicity — quantitative measurement of iodine density in the liver using dual-energy computed tomography: Three case reports
Lv HJ, Zhao HW
- 4966** Multisystem involvement Langerhans cell histiocytosis in an adult: A case report
Wang BB, Ye JR, Li YL, Jin Y, Chen ZW, Li JM, Li YP
- 4975** New mutation in EPCAM for congenital tufting enteropathy: A case report
Zhou YQ, Wu GS, Kong YM, Zhang XY, Wang CL
- 4981** Catastrophic vertebral artery and subclavian artery pseudoaneurysms caused by a fishbone: A case report
Huang W, Zhang GQ, Wu JJ, Li B, Han SG, Chao M, Jin K
- 4986** Anastomosing hemangioma arising from the left renal vein: A case report
Zheng LP, Shen WA, Wang CH, Hu CD, Chen XJ, Shen YY, Wang J
- 4993** Bladder perforation caused by long-term catheterization misdiagnosed as digestive tract perforation: A case report
Wu B, Wang J, Chen XJ, Zhou ZC, Zhu MY, Shen YY, Zhong ZX

- 4999** Primary pulmonary plasmacytoma accompanied by overlap syndrome: A case report and review of the literature
Zhou Y, Wang XH, Meng SS, Wang HC, Li YX, Xu R, Lin XH
- 5007** Gastrointestinal stromal tumor metastasis at the site of a totally implantable venous access port insertion: A rare case report
Yin XN, Yin Y, Wang J, Shen CY, Chen X, Zhao Z, Cai ZL, Zhang B
- 5013** Massive gastrointestinal bleeding caused by a Dieulafoy's lesion in a duodenal diverticulum: A case report
He ZW, Zhong L, Xu H, Shi H, Wang YM, Liu XC
- 5019** Plastic bronchitis associated with *Botrytis cinerea* infection in a child: A case report
Liu YR, Ai T
- 5025** Chest, pericardium, abdomen, and thigh penetrating injury by a steel rebar: A case report
Yang XW, Wang WT
- 5030** Monocular posterior scleritis presenting as acute conjunctivitis: A case report
Li YZ, Qin XH, Lu JM, Wang YP
- 5036** Choriocarcinoma with lumbar muscle metastases: A case report
Pang L, Ma XX
- 5042** Primary chondrosarcoma of the liver: A case report
Liu ZY, Jin XM, Yan GH, Jin GY
- 5049** Successful management of a tooth with endodontic-periodontal lesion: A case report
Alshawwa H, Wang JF, Liu M, Sun SF
- 5057** Rare imaging findings of hypersensitivity pneumonitis: A case report
Wang HJ, Chen XJ, Fan LX, Qi QL, Chen QZ
- 5062** Effective administration of cranial drilling therapy in the treatment of fourth degree temporal, facial and upper limb burns at high altitude: A case report
Shen CM, Li Y, Liu Z, Qi YZ

ABOUT COVER

Peer-reviewer of *World Journal of Clinical Cases*, Dr. Aleem Ahmed Khan is a Distinguished Scientist and Head of The Central Laboratory for Stem Cell Research and Translational Medicine, Centre for Liver Research and Diagnostics, Deccan College of Medical Sciences, Kanchanbagh, Hyderabad (India). Dr. Aleem completed his Doctorate from Osmania University, Hyderabad in 1998 and has since performed pioneering work in the treatment of acute liver failure and decompensated cirrhosis using hepatic stem cell transplantation. During his extensive research career he supervised 10 PhD students and published > 150 research articles, 7 book chapters, and 2 patents. His ongoing research involves developing innovative technologies for organ regeneration and management of advanced cancers. (L-Editor: Filipodia)

AIMS AND SCOPE

The primary aim of *World Journal of Clinical Cases* (*WJCC*, *World J Clin Cases*) is to provide scholars and readers from various fields of clinical medicine with a platform to publish high-quality clinical research articles and communicate their research findings online.

WJCC mainly publishes articles reporting research results and findings obtained in the field of clinical medicine and covering a wide range of topics, including case control studies, retrospective cohort studies, retrospective studies, clinical trials studies, observational studies, prospective studies, randomized controlled trials, randomized clinical trials, systematic reviews, meta-analysis, and case reports.

INDEXING/ABSTRACTING

The *WJCC* is now indexed in Science Citation Index Expanded (also known as SciSearch®), Journal Citation Reports/Science Edition, PubMed, and PubMed Central. The 2020 Edition of Journal Citation Reports® cites the 2019 impact factor (IF) for *WJCC* as 1.013; IF without journal self cites: 0.991; Ranking: 120 among 165 journals in medicine, general and internal; and Quartile category: Q3.

RESPONSIBLE EDITORS FOR THIS ISSUE

Production Editor: Ji-Hong Liu; Production Department Director: Xiang Li; Editorial Office Director: Jin-Lai Wang.

NAME OF JOURNAL

World Journal of Clinical Cases

ISSN

ISSN 2307-8960 (online)

LAUNCH DATE

April 16, 2013

FREQUENCY

Semimonthly

EDITORS-IN-CHIEF

Dennis A Bloomfield, Sandro Vento, Bao-Gan Peng

EDITORIAL BOARD MEMBERS

<https://www.wjgnet.com/2307-8960/editorialboard.htm>

PUBLICATION DATE

October 26, 2020

COPYRIGHT

© 2020 Baishideng Publishing Group Inc

INSTRUCTIONS TO AUTHORS

<https://www.wjgnet.com/bpg/gerinfo/204>

GUIDELINES FOR ETHICS DOCUMENTS

<https://www.wjgnet.com/bpg/GerInfo/287>

GUIDELINES FOR NON-NATIVE SPEAKERS OF ENGLISH

<https://www.wjgnet.com/bpg/gerinfo/240>

PUBLICATION ETHICS

<https://www.wjgnet.com/bpg/GerInfo/288>

PUBLICATION MISCONDUCT

<https://www.wjgnet.com/bpg/gerinfo/208>

ARTICLE PROCESSING CHARGE

<https://www.wjgnet.com/bpg/gerinfo/242>

STEPS FOR SUBMITTING MANUSCRIPTS

<https://www.wjgnet.com/bpg/GerInfo/239>

ONLINE SUBMISSION

<https://www.f6publishing.com>



Nasal mucosa pyoderma vegetans associated with ulcerative colitis: A case report

Shu-Xia Yu, Xian-Kui Cheng, Bin Li, Jing-Hua Hao

ORCID number: Shu-Xia Yu 0000-0003-3755-2530; Xian-Kui Cheng 0000-0001-7518-9416; Bin Li 0000-0002-9826-2222; Jing-Hua Hao 0000-0002-9144-9019.

Author contributions: Yu SX and Cheng XK contributed to this article equally; Yu SX provided data acquisition and data analysis; Cheng XK provided the pathological reports; Li B collected the patient's information; Xu HW took apart in the treatment of the patient; Hao JH supervised the study and was responsible for ensuring the integrity of the work from inception to published article.

Supported by Shandong Medical and Health Science and Technology Development Plan Project, No. 2018WS275.

Informed consent statement: Informed written consent was obtained from the patient for publication of this report and any accompanying images.

Conflict-of-interest statement: The authors declare that they have no conflict of interest.

CARE Checklist (2016) statement: The authors have read the CARE Checklist (2016), and the manuscript was prepared and revised according to the CARE Checklist (2016).

Shu-Xia Yu, Bin Li, Jing-Hua Hao, Department of Gastroenterology and Hepatology, Shandong Provincial Hospital Affiliated to Shandong First Medical University, Jinan 250021, Shandong Province, China

Xian-Kui Cheng, Department of Pathology, Shandong Provincial Hospital Affiliated to Shandong First Medical University, Jinan 250021, Shandong Province, China

Corresponding author: Jing-Hua Hao, MD, Chief Doctor, Department of Gastroenterology and Hepatology, Shandong Provincial Hospital Affiliated to Shandong First Medical University, No. 324 Jingwu Road, Jinan 250021, Shandong Province, China. jinghua_hao@hotmail.com

Abstract

BACKGROUND

Pyoderma vegetans (PV) is not a common extra-intestinal manifestation of ulcerative colitis (UC), while nasal mucosa PV associated with UC is particularly rare.

CASE SUMMARY

We report a 28-year-old female with a history of UC and pyoderma gangrenosum who presented with nasal pain. A nasal lesion could be observed in her nose, and histopathological examination was indicative of PV. The patient was treated with oral prednisone (40 mg per day) with good response and became symptomatically free. There was no recurrent attack after 1 year of follow-up.

CONCLUSION

Inflammatory bowel disease patients presenting with nasal pain should be further investigated to rule out the coexistence of nasal mucosa PV.

Key Words: Pyoderma vegetans; Extra-intestinal manifestations; Ulcerative colitis; Nasal lesion; Case report

©The Author(s) 2020. Published by Baishideng Publishing Group Inc. All rights reserved.

Core Tip: Pyoderma vegetans (PV) is not a common extra-intestinal manifestation of ulcerative colitis (UC), while nasal mucosa PV associated with UC is particularly rare. We present herein a rare case of PV with nasal pain that evolved in a patient with

Open-Access: This article is an open-access article that was selected by an in-house editor and fully peer-reviewed by external reviewers. It is distributed in accordance with the Creative Commons Attribution NonCommercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited and the use is non-commercial. See: <http://creativecommons.org/licenses/by-nc/4.0/>

Manuscript source: Unsolicited manuscript

Received: May 29, 2020

Peer-review started: May 29, 2020

First decision: June 13, 2020

Revised: June 23, 2020

Accepted: September 2, 2020

Article in press: September 2, 2020

Published online: October 26, 2020

P-Reviewer: Choi YS, Ierardi E

S-Editor: Ma YJ

L-Editor: Filipodia

P-Editor: Wu YXJ



ulcerative colitis. A nasal lesion could be observed in her nose and histopathological examination was indicative of PV. This case highlights that inflammatory bowel disease patients presenting with nasal pain should be further investigated to rule out the coexistence of nasal mucosa PV.

Citation: Yu SX, Cheng XK, Li B, Hao JH. Nasal mucosa pyoderma vegetans associated with ulcerative colitis: A case report. *World J Clin Cases* 2020; 8(20): 4953-4957

URL: <https://www.wjgnet.com/2307-8960/full/v8/i20/4953.htm>

DOI: <https://dx.doi.org/10.12998/wjcc.v8.i20.4953>

INTRODUCTION

Pyoderma vegetans (PV) is not a common extra-intestinal manifestation of ulcerative colitis (UC), while nasal mucosa PV associated with UC is particularly rare. We present herein a rare case of PV with nasal pain that evolved in a patient with UC.

CASE PRESENTATION

Chief complaints

A 28-year-old female presented to the hospital in January 2018 for the first time. She complained of six to seven bowel movements per day with pus and blood for 1 mo. Associated symptoms included cramping abdominal pain before bowel movements, nausea, anorexia, and a 3 kg weight loss. She had no fevers or night sweats.

History of present illness

Colonoscopy was performed, and she was diagnosed as UC limited to her left colon with a Mayo endoscopic subscore of 3 (severe disease, [Figure 1](#)). With treatment of mesalazine for 10 d, she was improving but developed skin lesions on her legs and right inguinal region, which appeared as skin pustules and then became burrowing ulcers between 2 cm and 10 cm in diameter. The skin lesions were finally diagnosed as pyoderma gangrenosum ([Figure 2](#)) by histology.

History of past illness

She had a history of hemorrhoids for more than 10 years. She had no family history of cancers or inflammatory bowel disease.

Laboratory examinations

On admission, laboratory investigations revealed a drop in hemoglobin to 73 g/L and increases in C-reactive protein, erythrocyte sedimentation rate, and fecal calprotectin to 63.38 mg/L, 61 mm/h, and 249.05 µg/g, respectively. The patient had a very low albumin at 22.2 g/L. Stool studies revealed numerous leukocytes and red blood cells but were negative for infectious etiology, including *Clostridium difficile*.

Medical management

The patient was then started on intravenous methylprednisolone. Daily medications with fibroblast growth factor gel and sodium fusidate ointment were also given to the patient for the treatment of pyoderma gangrenosum. At 1 wk after the steroid treatment, a clear improvement of the cutaneous lesions was observed with down-trending C-reactive protein and erythrocyte sedimentation rate. The patient was hereby transitioned to oral prednisone and discharged home.

One year later, the patient returned to the hospital and reported compliance with oral mesalamine and had been doing well since tapering off steroids 3 mo prior. At 1 wk before admission, she had defecation with mild bleeding two to three times daily and had severe nasal pain. She had no fever or abdominal pain. On physical examination, her vital signs were within the normal range. The only remarkable findings were old skin scars on her extremities. A colonoscopy was performed and revealed mild-to-moderate left-sided colitis consistent with a Mayo endoscopic subscore of 2, which was improved from her previous colonoscopy in May 2018.

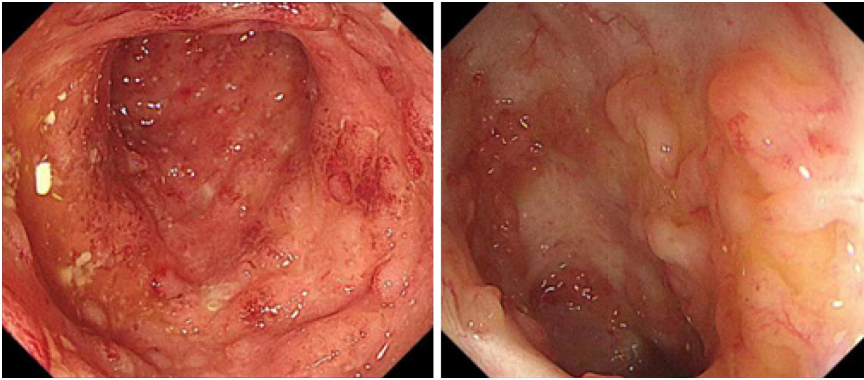


Figure 1 Colonoscopy showed severe ulcerative colitis.



Figure 2 Skin lesions on the legs.

She was then referred to an otolaryngologist. Her nasal mucosa was hyperemic, and nasal septum mucosa was remarkably thickened (Figure 3). Biopsies from left nasal septum mucosa revealed plasma cell and eosinophils infiltration, some neutrophil and lymphocyte infiltration, interstitial edema of mucosa, and fibrocyte and fibroblast hyperplasia (Figure 4). Based on the clinical and pathological findings, the patient was diagnosed with PV.

FINAL DIAGNOSIS

The final diagnosis of this case is nasal mucosa PV.

TREATMENT

The patient was hereby given oral prednisone (40 mg/d).

OUTCOME AND FOLLOW-UP

The bowel movements of this patient became normal in 1 wk. Notably, her nasal pain disappeared quickly. The patient was recovered from PG, and the skin lesions completely cleared after steroid treatment. Steroids were tapered off in 4 mo, and there were no recurrent attacks after 1 year of follow-up.



Figure 3 The patient's nasal mucosa was hyperemic and nasal septum mucosa became remarkably thickened.

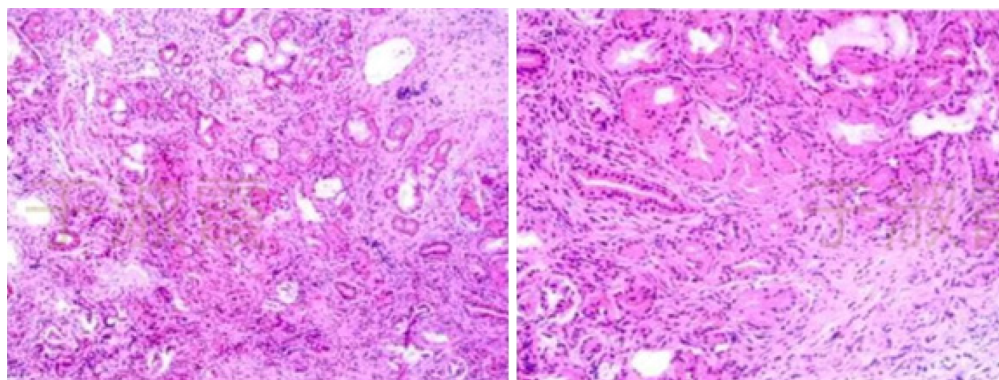


Figure 4 Photomicrograph of hematoxylin and eosin stain ($\times 20$) showing plasma cell and eosinophil infiltration, some neutrophil and lymphocyte infiltration, interstitial edema of mucosa, and fibrocyte and fibroblast hyperplasia.

DISCUSSION

Extra-intestinal manifestations (EIMs) in patients with inflammatory bowel disease (IBD) are quite common. The organs most commonly involved are the skin, joints, the biliary tract, and the eyes. A Swiss IBD Cohort Study showed that 31% of UC patients developed EIMs, such as arthritis, uveitis, pyoderma gangrenosum, erythema nodosum, aphthous stomatitis, ankylosing spondylitis, primary scleroscholangitis, *etc*^[1].

PV is a rare benign cutaneous, chronic, inflammatory, pustular condition clinically characterized by raised, erythematous, exudative, vegetating plaques. This disease of unknown etiology is often associated with bacterial infections in immunocompromised patients^[2]. The association of PV and UC has rarely been reported in the literature^[3].

Nearly one quarter of EIM affected IBD patients suffers from a combination of several EIM. More than one organ involved may suggest a common pathogenic pathway^[4]. However, the underlying mechanisms are not completely understood yet. As for this patient, PG was first diagnosed in her legs and right inguinal region, and her nasal mucosa subsequently suffered from PV. Till now, there is only one case report of nasal mucosa PVs in a patient with UC^[5].

PV can heal spontaneously but usually recurs and becomes chronic. There are no standard treatment modalities. Systemic steroids and local wound care could control the disease^[6]. Considering the patient had severe UC accompanied with EIM, we suggested using infliximab, which is an appropriate option for the patient who does not respond to routine treatments. However, the patient refused the infliximab treatment due to the expensive cost. Finally, the patient got improved with the treatment of systemic steroids. Luckily, she had no recurrent attacks after 1 year of follow-up.

CONCLUSION

This case highlights that IBD patients presenting with nasal pain should be further investigated to rule out the coexistence of nasal mucosa PV.

REFERENCES

- 1 **Vavricka SR**, Brun L, Ballabeni P, Pittet V, Prinz Vavricka BM, Zeitz J, Rogler G, Schoepfer AM. Frequency and risk factors for extraintestinal manifestations in the Swiss inflammatory bowel disease cohort. *Am J Gastroenterol* 2011; **106**: 110-119 [PMID: [20808297](#) DOI: [10.1038/ajg.2010.343](#)]
- 2 **Fantus SA**, Zech LA, Hensley J, Norton SA, Dugan EM. Vegetating Plaques on the Lips. Pyostomatitis vegetans. *Am J Dermatopathol* 2015; **37**: 699-700, 730-732 [PMID: [26291419](#) DOI: [10.1097/DAD.0000000000000217](#)]
- 3 **Bianchi L**, Carrozzo AM, Orlandi A, Campione E, Hagman JH, Chimenti S. Pyoderma vegetans and ulcerative colitis. *Br J Dermatol* 2001; **144**: 1224-1227 [PMID: [11422046](#) DOI: [10.1046/j.1365-2133.2001.04237.x](#)]
- 4 **Das KM**. Relationship of extraintestinal involvements in inflammatory bowel disease: new insights into autoimmune pathogenesis. *Dig Dis Sci* 1999; **44**: 1-13 [PMID: [9952216](#) DOI: [10.1023/a:1026629528233](#)]
- 5 **Vahedi H**, Nozari N, Sotoudeh M. Report of a Rare Case of Nasal Mucosa Pyoderma Vegetans in a Patient with Ulcerative Colitis. *Middle East J Dig Dis* 2015; **7**: 104-106 [PMID: [26106471](#)]
- 6 **Canpolat F**, Cemil BÇ, Yilmazer D, Yeşilli O, Eskioglu F. Pyoderma vegetans associated with ulcerative colitis: a case with good response to steroids. *Case Rep Dermatol* 2011; **3**: 80-84 [PMID: [21503165](#) DOI: [10.1159/000327221](#)]



Published by **Baishideng Publishing Group Inc**
7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA

Telephone: +1-925-3991568

E-mail: bpgoffice@wjgnet.com

Help Desk: <https://www.f6publishing.com/helpdesk>

<https://www.wjgnet.com>

