

CASE REPORT



Pain and swelling in the left cheek and parotid region and facial paralysis

In the inspection examination, sagging was observed in the corner of the mouth on the left side.



- Diabetes
- Hypertension

Cigaret Weight loss

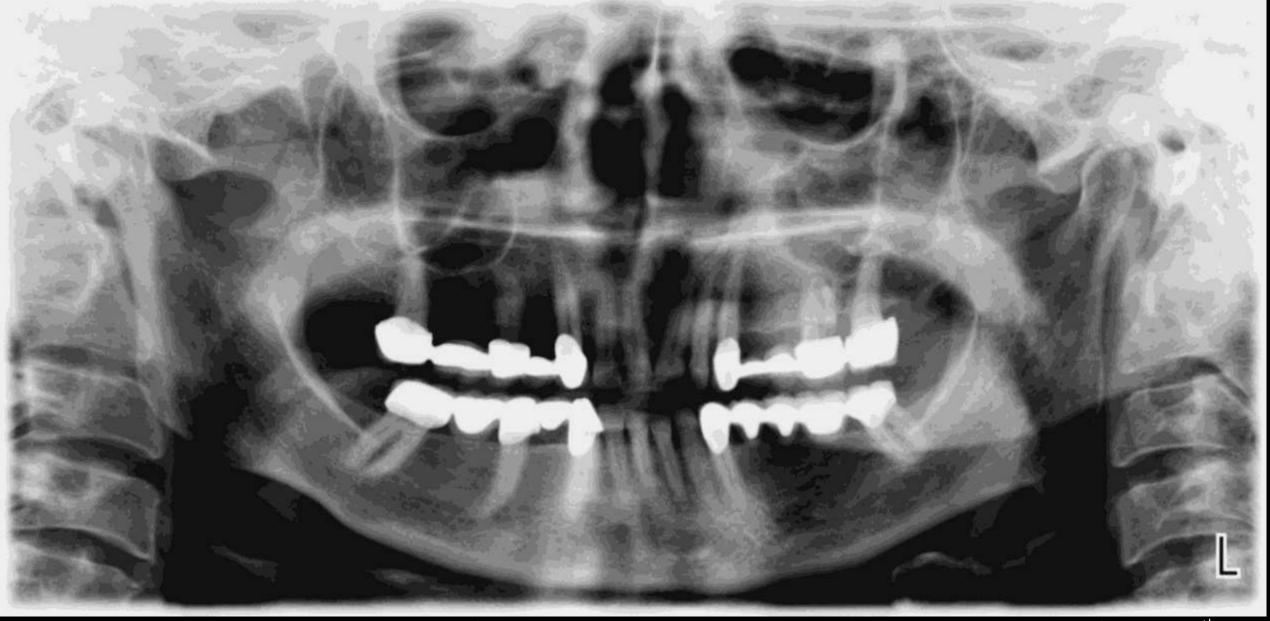




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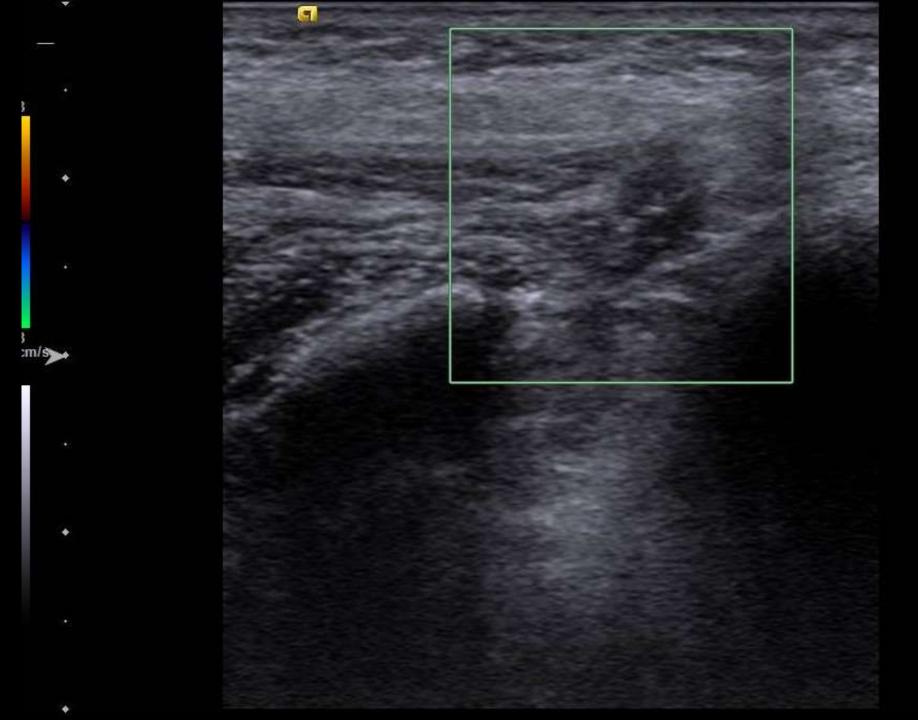


 A widespread lesion containing painful, erythematous, and hyperkeratotic areas and not separated from the tissue by finger pressure was observed in the left cheek mucosa.



• In the panoramic radiograph taken from the patient, a periapical lesion was observed in the left upper 6th tooth and radiopaque bridge restorations were observed.

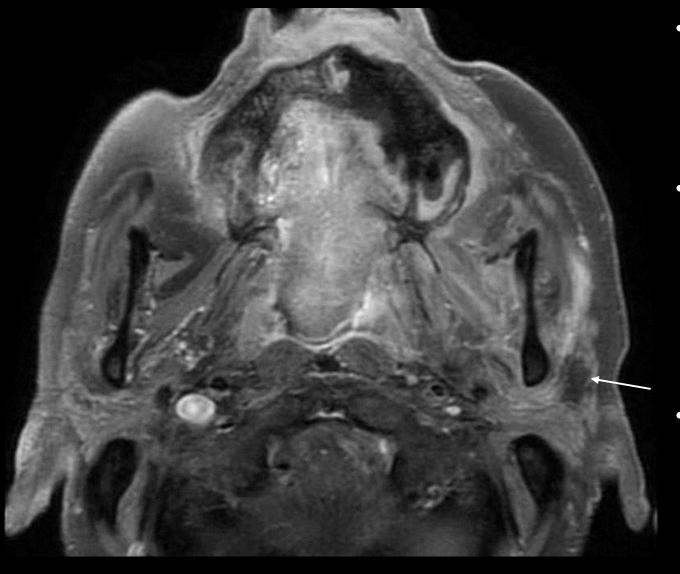
Apart from this, no anomaly was observed in the radiograph.





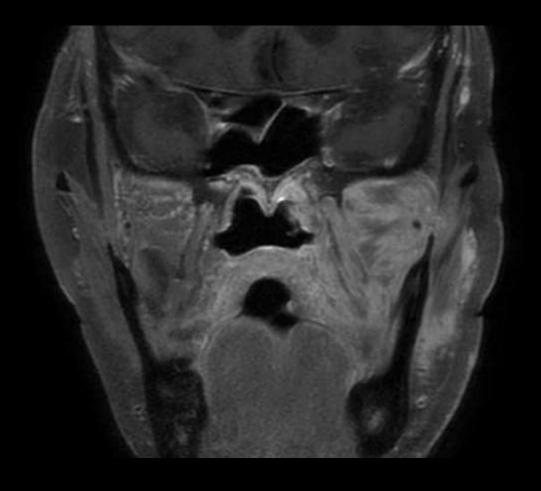
Multiple reactive lymph nodes, the largest of which was 2 cm in diameter, were detected on both sides of the neck, on the cheek, and in the parotid neighborhood.





- On physical examination, a small, pressure-sensitive, palpable mass is suspected in the left parotid gland.
- In neurological
 examination, other cranial
 nerve examinations were
 normal, except for right
 peripheral facial paralysis.
- Cystic lesions were detected on the right side in MRI examination.

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- Heterogeneous contrast enhancement was observed, after contrast injection.
- In the mediastinal CT image, no findings were found in the apical segments of the upper lobes of both lungs and the posterior segments of the lower lobes.

Heerfordt Syndrome-Facial Sarcoidosis

- Heerfordt syndrome is a form of neurosarcoidosis with the combination of fever, enlargement of the parotid gland, anterior uveitis, and facial nerve paralysis.
- Sarcoidosis is a multisystem disease of unknown etiology characterized by the formation of non-caseating epithelioid granulomas. The organs most commonly affected include the lungs, lymph nodes, eyes, and skin.
- Skin involvement that occurs at the onset of the disease occurs in 25 percent of cases and is classified as specific or nonspecific.

- Specific lesions histologically show granulomas and include maculopapular, nodules, plaques, subcutaneous nodules, scar infiltration, and lupus pernio. Nonspecific lesions not related to the underlying granulomatous disease include erythema nodosum, calcinosis cutis, prurigo, erythema multiforme, and nail changes.
- In sarcoidosis, skin involvement is observed at a rate of 30% (25-37) and skin lesions are very diverse.
- Nervous system involvement has been reported in 5% of sarcoidosis. It frequently causes cranial neuropathy and most commonly affects the 7th nerve (unilateral facial paralysis) from the cranial nerve.
- The case of facial sarcoidosis seen in our case is very rare.
- In conclusion, although Heerfordt syndrome is a rare form of neurosarcoidosis, it should be considered in the differential diagnosis of facial nerve palsy.

References

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 - 4. Mangas C, Fernandez-Figueras M, Fite E, et al. Clinical spectrum and histological analysis of 32 cases of specific cutaneous sarcoidosis. *J Cutan Pathol*. 2006;33:772-77.

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