Another Case with Relapsing Polychondritis-Like Ear Disease

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Abbreviation: RP: Relapsing Polychondritis;

Relapsing Polychondritis (RP) is a rare multi-systemic disorder characterized by widespread, destructive, inflammatory lesions of cartilage. Ear feature of the disease is characterized with redness without lobe involvement. There has been only a few cases in which chondritis involved only the auricles [1,2]. Some group named it “RP-like ear disease” [1]. Here, we experienced another case with “RP-like ear disease”.

A healthy 3-year-old boy presented with an erythematous right ear, excluding the lobe (Figure 1). The examination disclosed no abnormalities of the inner ear or mastoid bone. His mother reported that this phenomenon, which remitted spontaneously within a few days, had happened to him three times at approximately 10-day intervals. A small erythematous skin lesion that looked like an insect bite or scalp skin infection was noted before the “red ear” was first seen, although no lesion of psoriasis was confirmed. No other symptoms suggesting systemic cartilage involvement were seen. There was no family history of autoimmune disease or recurrent polychondritis. He was treated supportively. Since the third event, he has been symptom free.

Figure Legend

Figure. 1. Relapsing polychondritis-like ear. This appearance is seen three times in 1 month after a “trigger” without further recurrence.
Lee and Tsai, one of the groups who named the condition as “RP-like” ear disease, indicated that psoriasis could be an underlying condition [1]. The case illustrates that RP-like ear could happen without concurrent psoriasis. Generally, it is believed that inflammatory (e.g., relapsing polychondritis), infectious (e.g., mastoiditis, chondritis, and epichondritis) or reactive (e.g., allergic or hypersensitivity reactions) etiologies [3] can cause the condition seen in ours. Some groups reported that RP-like red ear could be caused with reactive etiology triggered by mosquito bite [4] or some insect bite [3]. Our patient’s symptom differed from the previous cases [3, 4] in terms of recurrence within 1 month without further recurrence. Although smallness of our report would prevent us to reach clear conclusion about the mechanism of the skin change, we believe that the case may facilitate physician and care givers to realize variable clinical feature of RP-like ear, which may lead to correct understanding of the condition and better patient management.

References