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BAMBOO NODES ASSOCIATED WITH VASCULITIS OF VOCAL CORDS AS INITIAL MANIFESTATIONS OF RHUPUS SYNDROME

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BACKGROUND

Rheumatic manifestations in the larynx are rare. Heterogeneous incidence of 1 to 30% based on reports and case series. Most described in systemic lupus erythematosus and rheumatoid arthritis. Nine types of lesions have been reported, including: rheumatoid nodules (bamboo nodes) and laryngeal vasculitis.

CASE REPORT

Female, 31 years old, black, previously healthy and without addictions. Forty days ago, she started polyarthralgia of small and large joints, with asymmetric and migratory onset, evolving with symmetry and addition, inflammatory rhythm and prolonged morning stiffness. Associated with dysphonia and odynophagia, without previous vocal effort or local trauma. Concomitant to toxemic constitutional symptoms, weight loss, daily fever, diffuse myalgia, in addition to spontaneous gingival bleeding, with tooth brushing worsening.

X-ray of hands with global periarticular demineralization and decreased joint space in the carpal bones. Leukopenia ($3.1 \times 10^3 \text{ mm}^3$), lymphopenia with $680/\text{mm}^3$, thrombocytopenia $45 \times 10^3/\text{mm}^3$. CRP: 2 mg/dL. ESR: 77 mm/h. Absence of urinary sediment or proteinuria. Viral infections ruled out (syphilis, hepatitis B and C, HIV, cytomegalovirus, mononucleosis and toxoplasmosis). ANA: 1/320 nuclear homogeneous, anti-dsDNA: 200 U/mL, C3: 66 mg/dL, C4: 16.1 mg/dL, anti-Ro: 119 U/mL, latex: positive, anticardiolipin IgM: 36 MPL/U/mL, anti-SM, anti-cardiolipin IgG, lupus anticoagulant and anti-CCP: nonreactive. Normal thyroid function.

Diagnosis of Rhupus syndrome was made. Flexible nasofibrolaryngoscopy was requested: symmetrical and mobile vocal folds with bilateral middle third nodules, hyperemia and friable areas in the mucosa of both folds with a discrete anteroposterior fusiform cleft. In view of the autoimmune active condition, hypothesis of vasculitis in the larynx and nodules in bamboo, prednisone 1 mg/kg/day, hydroxychloroquine 5 mg/kg/day plus methotrexate 20 mg/week were started. Four-week reassessment with complete clinical resolution.

CONCLUSION

A rare case with two groups of laryngeal lesions was described: nodules and vasculitis, both in initial manifestation in disease overlap syndrome (Rhupus syndrome), opted for moderate to high immunosuppressive therapy with effective response.