

Clinical Images of a Morbihan disease associated to scrotal lymphedema

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Morbihan disease, also known as rosaceous lymphedema, is characterized by persistent erythema and solid edema of the upper two thirds of the face. Genital elephantiasis is characterized by massive growth of genitals [1] as a result of chronic lymphedema caused by numerous infectious and noninfectiuos triggers [2].

We report a case of a 52-year-old man presented with a 2-year history of swelling and redness on the upper part of his face. He also had a 6-year history of rosacea and rhinophyma without any treatment. He was recently diagnosed with primary scrotal lymphoedema, which has been evolving for 3 years. Physical findings revealed erythema and hard, non-pitting, persistent edema on both his eyelids, forehead, glabella and cheeks. Also, a rhinophyma nose was observed (Fig. 1a), telangiectasias, pustules and scaly plugs were noted on the nose. Genital examination found edema of the scrotum with deformity and scrotal lymphangiectasia (Fig. 1b). Dermoscopic examination of the lesions on the face revealed linear vessels, follicular plugs, white scales, clinically nonvisible pustules. Ophthalmological examination found blepharitis. All laboratory investigations including hematologic, biochemical and serological investigations were normal. head CT scan was also normal. Rhinocavoscopy found voluminous left anterior septal deviation completely obstructing the nasal cavity. Histopathological examination of a punch biopsy from the nose revealed a fibrous dermis with telangiectasia and perivascular nodular lymphatic infiltration with presence of plasmocytes and histiocytes. Histological findings lead to a diagnosis of Morbihan disease. Histopathological examination of the scrotal skin revealed lymphangiectasia associated to a pustular folliculitis. Considering all the findings, the patient was diagnosed as a case of Morbihan disease associated to scrotal lymphedema. Along with



Figure 1: (a) Erythema, edema on both his eyelids, forehead, glabella and cheeks, also a rhinophyma nose. (b) Edema of the scrotum and scrotal lymphangiectasia.

sun-protective measures and a broad-spectrum sunscreen application, He was treated with oral doxycycline at 200 mg/day and metronidazole topical.

Consent

The examination of the patient was conducted according to the principles of the Declaration of Helsi

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