

Clinical Considerations Associated with Intra-Oral Recurrent Herpes That Dermatologists Should

Consider

Alhanouf Bin Dakhil

MD candidate, Imam Mohammed Ibn Saud University, Riyadh

Introduction

Intra-oral recurrent herpes (IORH) is a rare form of recurrent Herpes Simplex Virus (HSV) infection that is different in the clinical course than recurrent herpes labialis. It is characterized by the unilateral involvement of intra-oral keratinized mucosa, commonly hard palate. Although this form of HSV infection is traditionally thought to be related to immunosuppression, it may affect immunocompetent individuals. Here we present a case of IORH in a 27-year-old male following maxillary sinus surgery.

Case report

A 27-year old Asian male presented with localized oral “texture change” involving the roof of the mouth. The patient had undergone maxillary sinus surgery for inflammatory cyst removal days before his presentation. Medical history was significant for allergic rhinitis. The patient was taking ibuprofen 400mg three times a day and oxycodone 5mg twice daily for pain. Clinical exam revealed a cluster of small and red lesions on the hard palate adjacent to teeth numbers 3 and 4. Additionally, the patient has mild facial swelling related to previous surgery. Clinical diagnosis was consistent with IORH. The patient was recommended to take valacyclovir 500mg three times a day for one week. However, the patient elected to use palliative therapy due to taking other medications for surgical pain. Two weeks later, the lesions resolved. The patient later developed recurrent herpes labialis in the side, for which the patient was prescribed valacyclovir 2000mg twice for one day with significant benefit.

Conclusion

IORH clinical presentation can mimic several conditions affecting the oral cavity. Even in an immunocompetent patient, dermatologists should consider IORH in the differential diagnosis of unilateral intraoral ulceration of the keratinized mucosa. Additionally, local trauma should be considered as a trigger for IORH.



Figure 1



Figure 2