AUTOIMMUNE CONNECTIVE TISSUE DISEASES

TWO-FACE: A CASE REPORT ON PARRY ROMBERG SYNDROME

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Background: Parry Romberg syndrome is a rare neurocutaneous disease with gradual and progressive hemifacial atrophy. It may involve the skin, subcutaneous tissue, fat, muscle and bone. It is usually accompanied by neurologic and ophthalmologic manifestations. Etiology is still unclear.

Observation: A 17-year old female complained of hyperpigmentation, hypopigmentation and depression of the right lower face. Progressive atrophy and tightening of the skin were present. Lesions stabilized and no progression noted at 15 years of age. No histories of trauma or infections. No neurologic and ophthalmologic compliants. On examination, face is asymmetric. Right eyebrow and eye were lower. Nose and lips were ipsilaterally deviated. Right part of the tongue was smaller than the left with median sulcus not centrally located. Tongue deviates to the right on protrusion. Atrophy and deviation of the lips to the right with exposure of the tooth were observed. No sensory and motor deficits. Radiologic examination of the mandible was unremarkable. Ultrasound suggested atrophy of the subcutaneous tissue and muscle layer. Biopsy showed slightly thickened collagen bundles in upper dermis and sparse superficial perivascular infiltration of lymphocytes. Patient underwent autologous fat transplant, which greatly improved the atrophied areas.

Key message: The course of Parry Romberg syndrome is variable but observed to be self-limited. Diagnosing Parry Romberg syndrome is largely dependent on history and clinical examination, which can be supported by histopathologic and imaging findings. Psychosocial effects are inevitable secondary to facial deformities hence a common treatment for a stable disease is a surgical procedure.