CASE VIGNETTES

A rare case of melorheostosis with oral mucosal lichen planus

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A 36-yr-old male presented to the clinic with a 4-year history of painful swelling in the right distal forearm. No history of injury was reported. His X-ray showed focal cortical thickening involving the radial shaft, without soft tissue involvement (Fig. 1). MRI images confirmed the finding. Technetium-99 isotope bone scan revealed increased tracer uptake of the rightdistal radial/mid and proximalcortical bone. No associated abnormal soft tissue was reported. There was no scintigraphic evidence of primary bone malignancy or osseus metastasis. Oral mucosal lesions noted in the patient were identified as due to lichen planus infection.

Melorheostosis is a rare mesenchymal dysplasia with characteristic candle wax dripping appearance. Its occurrence has been associated with malignancies, including osteogenic sarcoma, malignant fibrous histiocytoma and dermoid tumors. In the present case, malignancies had been ruled out by bone scan. Treatment options are limited and may include surgical interventions. There are case reports on the use of intravenous bisphosphonates including zoledronic acid for treating melorheostosis.¹



Fig. 1: X-ray showing focal cortical thickening involving the radial shaft

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Reference

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Competing interests

The authors declare that they have no competing interests.

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