



## 2021 Annual Spring Virtual Meeting | Abstract Submission

### **72-year-old female with one month of persistent facial swelling**

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A 72-year-old Latinx female presented with one-month history of sudden onset facial swelling. She denied itch or pain. She was previously evaluated by four specialties without diagnosis. Extensive laboratory workup returned normal. She was trialed on cetirizine, diphenhydramine, and prednisone for preliminary diagnosis of angioedema without relief. She was referred to dermatology where PE revealed waxy edematous plaques on bilateral upper and lower eyelids and indurated plaques with subcutaneous nodules along forehead, bilateral malar cheeks and bilateral ear lobules (Fig1&3). Biopsies revealed granulomatous dermatitis with vacuoles suggestive of injected material. She denied any history of injected material. She noted significant improvement and shrinking of nodules following prednisone 60mg, hydroxychloroquine 5mg/kg, and minocycline 100mg BID (Fig2&4). She later shared having a "facial" 20 years ago in the Dominican Republic and although needles were used, she denied any known/consented injection. Silicone is not approved by the FDA for cosmetic injection given the high risk of complications. Silicone may result in granuloma formation locally or at distant sites with migration.<sup>1</sup> Treatment of silicone granulomas can be challenging and should be individualized. We recommend medical management over excision for cases with widespread involvement, as surgical excision may prompt further migration of silicone to distant sites and require extensive debridement leaving patients with poor cosmesis.<sup>2</sup> Our patient had an excellent response to prednisone taper, hydroxychloroquine, and minocycline. Minocycline is useful for its anti-inflammatory and anti-granulomatous properties.<sup>3</sup> While there are limited reports of hydroxychloroquine used to treat silicone granulomas,<sup>4</sup> its use for chronic granulomatous disease is well-established.

### **References:**

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4. Jilani N, Shabbir J, Nemytova E. Liquid Silicone-Induced Extensive and Debilitating Granulomatosis Responding to Hydroxychloroquine. *Case Rep Rheumatol.* 2019;2019:8173790. Published 2019 Jul 24. doi:10.1155/2019/8173790

**Figures**

\*Patient consent has been obtained.

**Figure 1:** Waxy edematous plaques of bilateral upper and lower eyelids and indurated plaques with subcutaneous nodules along bilateral malar cheeks



**Figure 2:** Significant improvement in size of nodules and plaques following three months of treatment



**Figure 3:** Subcutaneous nodules within earlobe in earlobe



**Figure 4:** Significant reduction in size of nodules

