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## A case of mixed connective tissue disease (MCTD) associated with perforated nasal septum, heliotrope rash and a typical presentation responding to pulse therapy

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**Case:** A 35-year-old female was admitted to our hospital (Wad Medani, Gazera State, Sudan) on April 10, 2015 with the complaint of generalized weakness, multiple joint pain and swelling mainly in the wrist and knee joint since 3 years. After 2 months, patient developed high grade, intermittent fever especially during nights.

**Examination:** Physical examination revealed swollen hands with bilateral rheumatoid deformities (swelling, hotness, pain and restriction of movement), nose scleroderma, small mouse and nasal septum perforated which leaded to bloody sputum. Patient also have sclerodactyly and heliotrope rash but there is no Raynaud's phenomenon. The body temperature was fluctuated but most of the time was febrile. Laboratory data showed thrombocytopenia (62 x 10<sup>3</sup>) and anemia (RBCs 2.61 x 10<sup>12</sup>, HB 6.9 g/dl). Serological examination revealed ESR 130, RF positive more than 8 Iu/ml and anti-RNP antibody was positive, anti- ds DNA +ve, neither anti-DNA antibody nor anti-Sm antibody were detected. Also serum C3 and C4 were not detected.

**Treatment:** Treatment with prednisolone 10 mg (2 tabs in morning and 2 tabs in the evening) daily was started. Besides, Refina (as prophylaxis for TB, so she has a history of chronic cough) 300 mg, 2 tabs morning and Azathioprine 50 mg once daily. Next day, the treatment with 1000-mg intravenous daily pulse of methyl prednisolone for 3 days was started. Ten days after the pulse therapy, joint examination revealed better and pain was subsided. Laboratory data showed improvement as RBCs changed to  $4 \times 10^{12}$ , platelet changed to  $112 \times 10^3$  and HB to 10 g/dl. Prednisolone was slowly tapered to 20 mg daily.

## **Biography**

Asaad T Abdelhalim completed his MBBS in January, 2012 from Omdurman Islamic University and Diploma in Molecular Biology from Sudanese Center of Biotechnology in March, 2013. He is a Junior Registrar in training program leading part-1 examination in Clinical Immunology at Sudan Medical Specialization Board. He has published one paper related to detection of defective genes using software tools.

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