

Red eyes and mucous ulcers

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CASE REPORT

A 58-year-old male presented with malaise, ocular discharge and ulceration of his oral mucosa and glans penis. His medical history lists atrial fibrillation and idiopathic pancreatitis. Approximately one week prior to presentation he experienced fatigue, diffuse myalgia and fever. Four days later, he developed redness of his sclerae, a sticky discharge in his eyes and a sore throat. His general practitioner started chloramphenicol eye drops. Since then, he developed swelling, ulceration and painful aphthous lesions of his oral mucosa and his glans penis. Two days later, an allergic reaction to chloramphenicol was suspected and his general practitioner discontinued the eye drops. Our patient was started on oral prednisolone and clemastine tablets, one day thereafter he was admitted to our hospital. There was no fever upon presentation. The patient stated that he did not have sexual relations outside his marriage. Laboratory analysis showed a mild leukocytosis of $11.6 \times 10^9/l$ (reference range $4-10 \times 10^9/l$), and an elevated C-reactive protein of 65 mg/l (reference range $< 5 \text{ mg/l}$). The chest X-ray showed no signs of infiltration. Urinalysis showed leukocyturia, mild erythrocyturia and absence of nitrite.

WHAT IS YOUR DIAGNOSIS?

See page 128 for the answer to this photo quiz.

Figure 1. *Conjunctivitis*



Figure 2. *Ulcerations and aphthous lesions of the oral mucosa*



Figure 3. *Ulcerations and aphthous lesions of the glans penis*

