

## Trigeminal Trophic Syndrome: An Exuberant Case

### Síndrome Trófica do Trigémio: Um Caso Exuberante

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**Figure 1** – Left nasal ala ulcer at the time of diagnosis (1.0 x 0.5 cm) (A) and a few months later (3.0 x 2.0 cm), following increased psychological stress and skin manipulation (B).

A 47-year-old woman presented with a 1.0 x 0.5 cm ulcer in the left nasal ala. One month earlier, she suffered a medullary ischemic stroke and developed left facial paresis and anesthesia. A punch biopsy revealed ulceration, dermal fibrosis, and a neutrophilic infiltrate. Tissue cultures were negative. A diagnosis of trigeminal trophic syndrome (TTS) was made.

During the following year, significant worsening due to stress with increased skin manipulation was noted. A multidisciplinary approach (Plastic Surgery, Psychiatry) and the use of topical chloramphenicol, occlusive dressings, systemic gabapentin, doxycycline, tapentadol, and amitripty-

line led to gradual improvement.

Trigeminal trophic syndrome is a self-inflicted entity, secondary to central (stroke), or peripheral (ablation, herpes zoster) causes of trigeminal damage.<sup>1,2</sup> Any trigeminal distribution can be affected, and the differential diagnosis includes non-melanoma skin cancer, pyoderma gangrenosum and factitious dermatitis.<sup>3,4</sup>

Occlusive dressings to limit skin manipulation and treatment with carbamazepine or amitriptyline<sup>1,3,5</sup> are essential for ulcer healing. Facial reconstruction may be offered to patients able to refrain from self-manipulation.

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## AUTHOR CONTRIBUTIONS

MSC: Conception and design of the work; acquisition, analysis, and interpretation of data for the work; drafting the work and reviewing it critically for important intellectual content; final approval of the version to be published.

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## PROTECTION OF HUMANS AND ANIMALS

The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in 2013.

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## DATA CONFIDENTIALITY

The authors declare having followed the protocols in use at their working center regarding patients' data publication.

## PATIENT CONSENT

Obtained.

## COMPETING INTERESTS

The authors have declared that no competing interests exist.

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