CASUAL FINDING OF AN ACQUIRED PHLEBECTASIA OF THE INTERNAL JUGULAR VEIN IN A PATIENT WITH SJÖGREN'S SYNDROME.

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INTRODUCTION

Internal jugular vein phlebectasia (IJVP) is a rare condition presenting as a unilateral and usually painful neck swelling, mostly affecting the right side of the neck. Its etiology is uncertain, trauma and genetic factors are involved.[1] The acquired subtype of IJVP frequently affects adults and may be caused by trauma, thoracic outlet syndrome, tumors and local or systemic inflammatory conditions.[2]

OBJECTIVE

Present an unusual case of IJVP in a patient with Sjögren's Syndrome (SS), presenting it as a chance finding and analyzing a possible mechanism to associate both entities.

CASE REPORT

66-year-old female patient
Symptoms: painless swelling in the right parotid region, xerophthalmia, xerostomy and xerovagina.

4 days of evolution

PHYSICAL EXAMINATION

Firm swelling in the right parotid region with signs of inflammation and no associated fistulae.

Intraorally, the right Stenon's duct presented scarce salivary flow without signs of purulent exudate.

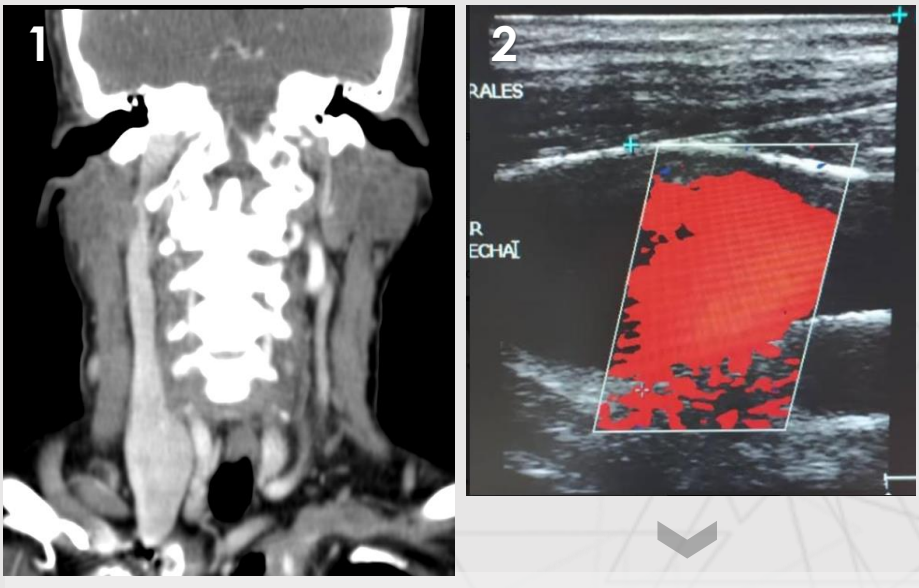

FIG 1. CT image showing Dilation of the right internal jugular vein. **FIG 2**. eco-Doppler image showing a dilation of the right internal jugular vein without intrinsic or extrinsic pathology associated, confirming the diagnosis of IJVP

DIAGNOSIS

- Sjögren's Syndrome
- Internal jugular vein phlebectasia

TREATMENT

Ampicillin-Sulbactam and Clindamycin

MULTIDISCIPLINARY APPROACH
(rheumatology and cardiovascular surgery services)

CONCLUSION

IJVP should be considered as a differential diagnosis when a cervical mass is managed despite the unusual nature of the entity. During the review carried out for this investigation, no study was found in the medical literature that reflected the association between IJVP with SS as reported in our case. Further studies are needed to corroborate an association between IJVP and SS; the latter, being considered a chronic systemic inflammatory disorder, and being this class of pathologies typified as etiological factors in the development of IJVP, could be included within the pathologies responsible for the development of the vascular affection.

THE AUTHORS DECLARE THAT THEY HAVE NO CONFLICTS OF INTEREST

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