

Oral and Esophageal Candida Infection in a Patient with Chronic Mucocutaneous Candidiasis and White Sponge Nevus

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CASE SUMMARY

A 22-year-old woman with chronic mucocutaneous candidiasis (CMC), white sponge nevus syndrome, and a homozygous *KRT14* gene mutation, who was referred to gastroenterology for persistent dysphagia. She has 2 brothers with similar disease.

The **first image** (Figure 1) shows the patient's tongue, which exhibits thick, white plaques characteristic of *Candida* infection, a hallmark of CMC. These lesions are persistent and recurrent, often found in individuals with an underlying genetic predisposition to chronic mucosal infections.

The patient underwent an esophagogastroduodenoscopy (OGD) due to her dysphagia. The **second image** (Figure 2) shows an endoscopic view of the esophagus, revealing diffuse white plaques along the mucosa. These plaques are typical of Candida esophagitis, which is commonly seen in immunocompromised patients or those with underlying genetic conditions like CMC. Histopathology of biopsy samples from the esophagus confirmed Candida esophagitis.



Figure 1: Oral Candidiasis in Chronic Mucocutaneous Candidiasis



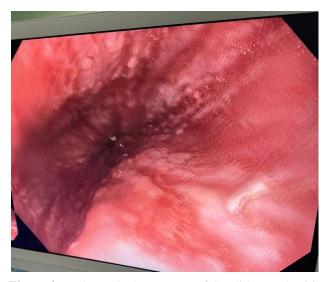


Figure 2: Endoscopic Appearance of Candida Esophagitis

DISCUSSION

This case highlights the clinical presentation of chronic mucocutaneous candidiasis, with oral and esophageal involvement. The image of the tongue clearly shows the characteristic thick white plaques indicative of *candida* infection. The endoscopic image (second image (Figure 2)) shows the extent of the infection in the esophagus, which is a common site of candida colonization in patients with CMC.

Despite a genetic mutation in the *KRT14* gene, typically associated with epidermolysis bullosa simplex, this patient did not exhibit skin fragility, highlighting the variability in clinical presentations of genetic disorders.^[1]

CONCLUSION

Oral and esophageal *Candida* infections, as demonstrated in the images, are frequently observed in patients with chronic mucocutaneous candidiasis. Early diagnosis through clinical examination, endoscopy, and histopathology is crucial for effective antifungal treatment. Genetic testing plays a key role in identifying underlying conditions, especially when there is a family history of similar mucosal disease.^[2]

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