

Snapshot

Lingual Raynaud phenomenon



An 18-year-old Australian, Indigenous woman with no medical history presented with five months of small joint polyarthralgia and Raynaud phenomenon. She reported intermittent, well demarcated tongue pallor associated with altered sensation, triggered by cold exposure. She had strongly positive speckled anti-nuclear antibodies, with anti-U1RNP (anti-U1 ribonucleoprotein), anti-SSA (anti-Sjögren's-syndrome-related antigen A), anti-SSB (anti-Sjögren's-syndrome-related antigen B), anti-Ro52, and anti-double-stranded DNA antibodies and rheumatoid factor identified. The patient was diagnosed with an undifferentiated connective tissue disease at risk of evolving into mixed connective tissue disease (MCTD) or another autoimmune rheumatic disease (AIRD) over time. Limited data exist on the prevalence of AIRDs in Indigenous Australians and, to the authors' knowledge, there have been no published cases of undifferentiated connective tissue disease reported in this population.¹

Lingual Raynaud phenomenon is a rare clinical sign but has been reported in several AIRDs, most commonly MCTD and systemic sclerosis.²⁻⁵

Patient consent: The patient gave written consent for publication.

Competing interests: No relevant disclosures. ■

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