# A rare von Recklinghausen's disease with oral and parapharyngeal space manifestation

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## **ABSTRACT**

Neurofibromatosis (NF) type 1 (von Recklinghausen disease) is a genetic disorder that occurs in 1 of 4000 births1. It is inherited in an autosomal dominant pattern with variable penetrance; however, as many as 50% of cases may result from spontaneous mutation. The disease results from a defect in a tumour suppressor gene on chromosome 17, which leaves affected individuals at risk for developing a variety of benign and malignant tumours. The disease is often characterised by complex and multicellular neurofibroma, café au lait spot and Lisch nodule in the iris which form the cardinal features in diagnosing Von Recklinghausen disease. It affects both genders equally and has no particular, geographic or ethnicity predilection. The anatomical compartmentalization in head and neck region leads to a multitude of variable clinical presentation, such as asymmetrical pendulose masses, when these areas are afflicted with neurofibromas. Neck neurofribomatosis usually arises from deep neck nervous structures most commonly vagus nerve and cervical spinal rootlets. We report a case of a von Recklinghausen disease patient with oral and also deep neck space manifestation.

# Evaluation of rapid test specific IgE IVT Kit (Malaysia Profile) against skin prick test in allergic rhinitis - a pilot study

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# **ABSTRACT**

Introduction: Allergic rhinitis is common in otorhinolaryngology practice. Sensitization to certain allergen need to be identified for allergen avoidance either with skin prick test or specific IgE test. Before this, specific IgE test in our centre is a laboratory investigation. This study was carried out to evaluate the result of rapid test specific IgE IVT kit (office based) as compared to skin prick test. Materials And Methods: Seven patients with allergic rhinitis underwent skin prick test and office based specific IgE test using Rapid Test Specific IgE IVT Kit (Malaysia Profile) at Allergy Unit, Otorhinolaryngology Clinic, Universiti Kebangsaan Malaysia Medical Center. The results of both tests were evaluated and compared. Results: Five patients demonstrated positive results in both skin prick test and rapid test specific IgE IVT kit. One patient had positive rapid test specific IgE but negative skin prick test. One demonstrated negative in both tests. Four of them showed comparable results of Dermatophagoidespteronyssinus, Dermatophagoidesfarina. Only one patient showed similar results of food allergens. Conclusion: Rapid test Specific IgE IVT Kit is one of the office-based tests that can be done in patient that have contraindication for skin prick test. However, further study needs to be performed to see the accuracy of the results as compared to skin prick test and laboratory quantitative specific IgE test.