

Response to: "Orofacial Granulomatosis in Spain"[☆]

Réplica a: «Granulomatosis orofacial en España»

To the Editor:

We are grateful for Dr Marcoval's comments concerning our recently published article in *Actas Dermosifiliográficas*: "Granulomatous Cheilitis: A Report of 6 Cases and a Review of the Literature."¹

As in the series published by Marcoval et al.,² and with the limitations noted (the small number of patients in our series and the retrospective nature of the study), none of our patients had Crohn disease. In our opinion, rather than raising doubts about our medical practice, such a finding can probably be explained, as Marcoval suggests, by the epidemiologic variation of this disease across the different populations that have been studied.³ In both Europe and the United States, the incidence and prevalence of this disease is higher in the north, and this north-south variation is present even within the same country.⁴ A 1996 study found that the incidence of Crohn disease was 80% higher in northern Europe than in Mediterranean countries.⁵ Moreover, the risk of developing inflammatory bowel disease in the United States is lowest in the population of Hispanic origin.³ We agree with Marcoval on the question of colonoscopies in patients with granulomatous cheilitis and reiterate that this procedure is not justified in patients who have no signs or symptoms suggestive of inflammatory bowel disease.

Despite the limitations that our two simultaneously published studies^{1,2} may present, it is interesting to observe

that we reached very similar conclusions. However, a larger sample size would serve to confirm the conclusions, and a multicenter study would be needed to achieve such a sample.

References

1. Martínez Martínez ML, Azaña-Defez JM, Pérez-García LJ, López-Villaescusa MT, Rodríguez Vázquez M, Faura Berruga C. Queilitis granulomatosa. Presentación de 6 casos y revisión de la literatura. *Actas Dermosifiliogr.* 2012;103:718-24.
2. Marcoval J, Viñas M, Bordas X, Jucglà A, Servitje O. Orofacial granulomatosis: clinical study of 20 patients. *Oral Surg Oral Med Oral Pathol Oral Radiol.* 2012;113:e12-7.
3. Hovde O, Moum BA. Epidemiology and clinical course of Crohn's disease; results from observational studies. *World J Gastroenterol.* 2012;18:1723-31.
4. Nerich V, Monnet E, Etienne A, Louafi S, Ramée C, Rican S, et al. Geographical variations of inflammatory bowel disease in France: a study based on national health insurance data. *Inflamm Bowel Dis.* 2006;12:218-26.
5. Shivananda S, Lennard-Jones J, Logan R, Fear N, Price A, Carpenter R, et al. Incidence of inflammatory bowel disease across Europe: is there a difference between north and south? Results of the European Collaborative Study on Inflammatory Bowel Disease (EC-IBD). *Gut.* 1996;39:690-7.

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