

Introduction

- An unidentifiable primary cause of nipple pain, with associated color changes especially blanching, is called Raynaud’s phenomenon of the nipple
- Nipple pain with color changes can be an early presenting symptom of connective tissue disorders

Case Presentation

- 63-year-old man presented with left nipple pain worsened over the last 3 years.
- He described it as starting as an ache lateral to the nipple-areolar complex with the nipple gradually turning white and erect
- Lasted 15-60 minutes and occurred 1-6 times daily
- PMHx included DM type 2 , hypertension and exposure to CARC paint and burn pits in the Gulf war
- Nitroglycerin paste, increase in amlodipine, stellate ganglion blocks, provided minimal relief.
- Paravertebral blocks with LA provided a week of relief
- Botulinum toxin injection (80 units) around the areola provided more than a month of complete relief



Raynaud’s Phenomenon of the Nipple in a Male

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Unilateral, episodic, transient painful blanching of the nipple in a male, Raynaud’s Phenomenon, managed with Botulinum Toxin



Discussion

- RP is mostly a clinical diagnosis and is classically described as having a triphasic color change
- RP of the nipple has never been reported in men
- Management of Raynaud’s Phenomenon include lifestyle modifications like smoking cessation, and avoiding cold.
- Calcium channel blockers, ACE inhibitors, angiotensin receptor blockers, nitroglycerin paste and SSRIs, phosphodiesterase type-5 inhibitors
- .Cervical sympathetic blocks have had limited success
- Botulinum toxin injection has been shown to be beneficial in some

References

1) Belch J, Carlizza A, Carpentier PH, Constans J, et al. ESVM guidelines - the diagnosis and management of Raynaud's phenomenon. Vasa. 2017 Oct; 46(6): 413-423.

2) Haque A, Hughes M. Raynaud's phenomenon. Clin Med (Lond). 2020 Nov; 20(6): 580-587.

3) Jansen S, Sampene K. Raynaud phenomenon of the Nipple : An Under-recognized Condition. Obstet Gynecol. 2019 May; 133 (5):975-977

