

Non-sexually acquired genital ulceration, secondary to EBV; a case report

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Introduction:

We present a case of acute genital ulceration secondary to Epstein-Barr-Virus (EBV) and aim to highlight EBV as a differential for genital ulceration. In addition we demonstrate the positive role of technology.

Case Description:

History:

- 17 year old, usually fit and well
- Four day history of labial lesions associated with general malaise, progressing to fevers and vomiting in the 24 hours prior to presenting
- No oral, conjunctival or joint involvement
- No history of sexual contact but had attended her school `prom`

Examination:

- Three painful, black vulval ulcers with central pallor
- Pyrexia and bilateral cervical lymphadenopathy, no other rash

Investigations:

- Haemoglobin 124, WBC 6.6, Platelets 152, **CRP 62**, Renal function normal, **ALT 241, ALP 173**
- Blood, throat and genital cultures were negative. Serology for HIV and CMV and autoimmune screening were also negative
- **Monospot test for EBV was positive on day 5**

Progress and Outcome:

- Due to signs of systemic infection, the patient was initially treated with broad spectrum IV antibiotics until the relevant results were known
- A diagnosis of non-sexually acquired genital ulceration, secondary to EBV was made following positive Monospot test.
- Managed conservatively with topical emollients and analgesia
- At 4 week follow up the lesions had resolved, while the liver transaminases had normalised by 6 weeks

Discussion:

- EBV has a known association with acute genital ulceration or Lipschütz ulcer. Other viruses and bacteria, including SARS-CoV-2¹, have also been associated with this condition²
- It is uncommon; this case adds to the literature and should prompt clinicians to consider this in their differential, particularly in sexually inactive young patients
- Diagnosis is mainly clinical; Monospot testing can be positive in other infections and autoimmune disease. If there is uncertainty, testing for EBV-specific antibodies is available
- Treatment is supportive; β -lactam antibiotics will cause a rash in nearly all adults with EBV
- This case demonstrated the positive role of technology by minimising the distress associated with multiple examinations whilst accurately documenting disease progression and providing a teaching resource



Day

1



3



4 (admission)



6 (discharge)



9



12



18



27

1. Krapf JM, Casey RK, Goldstein AT. Reactive non-sexually related acute genital ulcers associated with COVID-19. *BMJ Case Reports CP* 2021;14:e242653. 2. Sidbury R. Acute genital ulceration (Lipschütz ulcer). In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. (Accessed on May 10, 2022.)