A 43-year-old woman with a 3-year history of frequent sleep disturbances, dry mouth, and dry eyes presented with swelling of the upper eyelids that had progressed during the previous several months. Physical examination revealed a nontender enlargement of the lacrimal glands and submandibular salivary glands. The Schirmer’s test for tear production was positive. A salivary-gland biopsy specimen revealed lymphocytic sialadenitis. Computed tomography revealed enlarged lacrimal and salivary glands. Serologic analysis was positive for anti–extractable nuclear antigen and anti-Ro (SS-A) autoantibodies. These findings support the diagnosis of primary Sjögren’s syndrome. After the patient had been treated with prednisolone for approximately 5 months, exocrine-gland enlargement subsided and xerostomia and xerophthalmia improved. She remained free of symptoms for the next 10 months, with no recurrence of glandular enlargement. Since Sjögren’s syndrome is a systemic disorder, patients may present with variable combinations of systemic manifestations.

DOI: 10.1056/NEJMicm1210527
Copyright © 2013 Massachusetts Medical Society.