Resolution of Guttate Psoriasis Following Tonsillectomy in a Patient with Chronic Tonsillitis

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Introduction

- Streptococcal infections can trigger guttate psoriasis[1]
- Persistent infectious foci may drive immune activation
- The role of chronic tonsillitis in adults is poorly defined

Case presentation

- 28-year-old woman
- Persistent guttate psoriasis
- Chronic tonsillitis
- Bilateral extracapsular tonsillectomy (Figure 1)

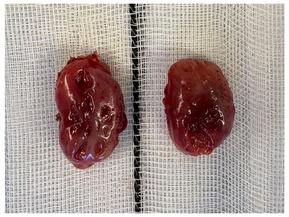


Figure 1. Both palatine tonsils after extracapsular removal.

Results

- Uneventful postoperative course
- Marked improvement in skin lesions (Figure 2)
- At 5 months, resolution of active lesions with residual hypopigmented macules



Figure 2. Lateral, anterior, and posterior views of the trunk 24 hours before, 24 hours after, and 5 months after tonsillectomy.

Discussion

- Guttate psoriasis typically erupts 1 to 2 weeks after streptococcal tonsillitis or pharyngitis[1,2]
- Case reports and small series describe improvement or clearance after tonsillectomy, including 2 sisters whose guttate lesions healed almost completely within 2 months[3,4]
- Streptococci can persist inside host cells, out of reach of penicillin and erythromycin, and are likely to recolonize the throat after antibiotics[4]
- Streptococcal M proteins and epidermal keratins share homologous peptides. T cells primed in the tonsil may cross-react with skin keratin[4,5]

Conclusions

- Chronic tonsillitis may contribute to guttate psoriasis
- Tonsillectomy may be an adjunctive treatment for adults with persistent guttate psoriasis and chronic tonsillitis

References

1. England RJA, Strachan DR, Knight LC. Streptococcal tonsillitis and its association with psoriasis: a review. Clin Otolaryngol Allied Sci. 1997;22:532-535.
2. Owen CM, Chalmers RJG, O'Sullivan T, Griffiths CEM. A systematic review of antistreptococcal interventions for guttate and chronic plaque psoriasis. Br J Dermatol. 2001;145:886-890.
3. Saita B, Ishii Y, Ogata K, Kikuchi I, Inoue S, Naritomi K. Two sisters with guttate psoriasis responsive to tonsillectomy: case reports with HLA studies. J Dermatol. 1979;6:185-189.
4. Sigurdardottir SL, Thorleifsdottir RH, Valdimarsson H, Johnston A. The role of the palatine tonsils in the pathogenesis and treatment of psoriasis. Br J Dermatol. 2013;168:237-242.
5. Wardrop P, Weller R, Marais J, Kavanagh G. Tonsillitis and chronic psoriasis. Clin Otolaryngol Allied Sci. 1998;23:67-68.