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Vanishing Bone Disease of Both Shoulders

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Case

An 89-year-old man visited our hospital with a 10-year history of gradually progressing shoulder dysfunction bilaterally. He was unable to lift his shoulders but had no problems with other joints during activities of daily living. Laboratory findings were within normal limits. The C-reactive protein, rheumatoid factor, and anti-citrullinated protein antibody were negative. Radiographs showed progressive osteolysis of both humeral heads (Figure 1A and 1B).

Vanishing bone disease (Gorham-Stout syndrome) is a rare entity of unknown etiology characterized by destruction of the osseous matrix and proliferation of vascular structures. Bone and joint manifestations of systemic diseases are important features of this osteolytic condition. Additionally, malignancy and infection should be ruled out. Treatments vary according to the individual disease condition. Vitamin K, bisphosphonates, and interferon $\alpha\text{-}2b$ are controversial treatments. This patient was satisfied with only undergoing follow-up evaluation. Since his manifestations occurred gradually, functions of his elbows, wrists, and fingers were well preserved.



Figure 1 (A and B): Radiographs showed progressive osteolysis of both humeral heads.

Conflict of Interest

The author declares no conflicts of interest concerning this article.