

## **Abstract**

**Sjogren's syndrome (SS) is a chronic autoimmune inflammatory disorder characteristically leading to lacrimal and salivary gland inflammation and dysfunction. But SS can have a myriad of presentation as both exocrine and various extra glandular tissues are involved in the disease process. Exocrine gland involvement leads to dry eyes and dry mouth which are collectively known as sicca symptoms. SS may occur alone as a primary form and as a secondary form which is associated with well-defined rheumatological conditions, most commonly systemic lupus erythematosus (SLE) and rheumatoid arthritis (RA).**

**Pulmonary manifestation in SS is mainly due to involvement of the airways and lung parenchyma in the form of diffuse interstitial lung disease. Pulmonary hypertension (PH) is associated with several connective tissue diseases most commonly with scleroderma, mixed connective tissue disorder (MCTD) and SLE. However, the prevalence of PH in primary Sjögren's syndrome (pSS) is rare throughout the world.**

**Here in, we present a vignette of a 31-year-old female with progressively worsening dyspnoea which turned out to be a case of pulmonary hypertension associated with primary Sjogren's syndrome.**