Clinical characteristics and course of pemphigus

Huseyin Cahit Ulker
Antalya State Hospital, Turkey

Many factors affect the clinical course of pemphigus. At this study, we aimed to investigate the effects of factors other than the ones reported at literature, such as delay at diagnosis, compliance to follow ups, treatment protocols, site of lesion and site of lesion resistant to treatment, on clinical course of pemphigus. A total of 61 pemphigus patients (mean age=53.03±13.86; F/M=1.2/1; follow up duration =37.7±32.2 months) who were followed at our clinics between the years 2005 and 2010, diagnosed by DIF, IIF and ELISA methods besides histopathological evaluation were included in the study. The effects of sociodemographical characteristics of patients, chronological localization sites of lesions, delay at diagnosis and compliance to treatment on clinical course were evaluated. Factors that may affect the development of resistant lesions, intensity of disease and remission were investigated and side effects of treatment and factors that may contribute to occurrence of these were evaluated. Levels of PDAI, VAS, Dsg1, Dsg3 were recorded at the time of diagnosis and at remission period. It was observed that at patients who had an oral lesion as the onset lesion, recurrences and treatment-resistant lesions occurred mostly at mouth. At patients with PF, it was detected that patients who had onset lesions on their bodies had resistant lesions on their bodies as well. It was demonstrated that intralesional CS treatment added to CS treatment provided a decrease at VAS and oral PDAI scores, compared to CS treatment alone. It was observed that treatment-related side effects were more frequent at CS treatment. Besides osteoporosis was related to duration of CS use. It was observed that familial history of DM and high BMI increased the risk of treatment-related DM. It was considered that compliance to follow ups may positively affect clinical course. It must be considered that treatment-resistant lesions and recurrences occur mostly at onset site of disease. Intralesional CS may be recommended additional to systematical CS, especially at treatment of oral lesions. The relation of osteoporosis development with duration of CS use, and DM development with familial DM history and BMI should be warning for detection and prevention of side effects.

Biography

Hüseyin Cahit Ulker  specialized in dermatology from Antalya Meditennian University Hospital,Turkey.He was a faculty of Medicine at Ege University ,Turkey. Currently working as Physician of antalya ataturk state Hospital, Antalya
cahitantalya@hotmail.com

Notes: