Acute Lichen planus Treated by Sandimmun® (Ciclosporin)

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Sir,

Recent reports on the successful treatment of lichen planus appeared in the literature, so we attempted a therapy by Sandimmun® for 1 case of acute lichen planus and compared it with Tigason® (etretinate) given to the same patient 10 years before.

Case Report

A 44-year-old Luxembourg man, bus conductor, developed in June 1990 a rash with morphologically typical papules on the flexor aspects of the lower part of his arms and legs. Then it quickly spread to the palms, soles and even nails, and places scattered on the trunk. Over the following weeks, the lips, tongue and genital organs became also involved.

The itching and painful papules on hands and feet made him seek medical advice because of difficulty in driving his bus. The pruritic eruption was not controlled with topical steroids and antihistamines given by his general practitioner so he remembered the drug Tigason taken with success for the identical eruption in 1981 for over 6 months.

There was no member affected with lichen planus in his family, no predisposing conditions for lichen-planus-like eruption. In his family history there is only diabetes mellitus type II in his mother.

Initial laboratory data showed normal limits except for glucose (113 mg/dl). Cholesterol and triglyceride were normal. Renal parameters were in the normal range. Complements, immunoglobulins and immuno-complexes were normal or negative. Serological examinations showed no evidence of acute bacterial or viral infection. Interdigital scaling was due to *Trichophyton rubrum*. An X-ray of the chest was found to be normal too. Ultrasound and computer tomography excluded pathological and morphological findings. A scan of the thyroid showed a goiter with normal function. Biopsy specimens from the chest and the sole confirmed the diagnosis of lichen planus.

In July, i.e. 1 month after the beginning of the eruption, we prescribed, with the patient's consent, Sandimmun 25 mg twice a day for 7 days, then 25 mg per day until September 17th.

The painful itching of the eruption disappeared after 7 days' treatment. In November the eruption was cleared up. There was no pigmentation left and no other side effects. Renal parameters were normal at the end of the treatment.

Discussion

The 1990 relapse of lichen planus in our patient was somewhat severer and more extended than the 1981 one at the beginning of the treatment.

We could not find any explanation for the quicker result with Sandimmun in regard to Tigason 25 mg twice a day for 3 months, which was stopped due to high levels of cholesterol, glutamic

oxaloacetic and glutamic pyruvic transaminases. The rebound phenomenon was so important that in spite of the difficult situation we had to continue Tigason 25 mg per day until July, that is 6 months for a positive result.

In our opinion low doses of ciclosporin can give excellent results in acute lichen planus.

8. 84

Lecture given at the 2nd Congress on Immunointervention in Autoimmune Diseases: The role of Sandimmun (ciclosporin)

Paris. May 13–16. 1991