AUTOIMMUNE BULLOUS DISEASES

BULLOUS PEMPHIGOID :EXPERIENCE OF THE MORROCAN POPULATION

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Introduction: Bullous pemphigoid (BP) is a group of heteregenous sub epidermal autoimmune bullous dermatoses. Their management is very variable and has experienced multiple therapeutic advances.

Objective: To evaluate the epidemiological-clinical, therapeutic and evolutionary profile of BP.

Materials and method: This is a prospective study conducted in dermatology department of the university hospital of Fez over 5 years (from 2013 to 2018). Data were entered on Excel and analyzed by using the statistical software package SPSS 17.0.

Results: 43 patients were included with a mean age of 53. Pruritus was present in 88% of cases. Skin lesions were multiple and polymorphous, mainly made of erosions, bullae, urticarial and eczematiform lesions. Nikolski's sign was negative in 84% of patients. When it was positive, it was associated with skin infection. Mucosal involvement was present in 20 patients, dominated by oral erosions. Nail involvement was present in 15 patients dominated by distal onycholysis. Direct immunofluorescent was positive in 71% of patients. All cases were treated by very high potent dermocorticoids protocol, while 2 required boluses of corticosteroids whereas 4 others required the use oral corticosteroids at low dose, with association of DDS in one case. Evolution was favorable in 75% of cases; relapses were noticed in 2 patients mainly due to skin surinfection. Therapeutic failures were seen in 3 patients due to poor therapeutic compliance, whereas 2 patients with late-stage and late-onset BP died following septic shock.

Conclusion: In our series, cases of late-onset pemphigoid were severe and associated with significant mortality. Thus, the need of early diagnosis and codified management with close monitoring to watch signs of therapeutic failure.