



AUTOIMMUNE BULLOUS DISEASES

COMPARISON OF DIRECT IMMUNOFLUORESCENCE OF SKIN BIOPSY AND DIRECT IMMUNOFLUORESCENCE OF TZANCK SMEAR IN PEMPHIGUS VULGARIS PATIENTS

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INTRODUCTION: Pemphigus is a group of chronic autoimmune blistering disease of the skin and mucosa characterized by antibodies against desmoglein Dsg 3 and/ or Dsg 1. Direct immunofluorescence of skin is considered as the gold standard in diagnosis of pemphigus, however it is an invasive and expensive procedure. DIF tzanck smear is simple and rapid to demonstrate acantholytic cells. The immune deposits in the acantholytic cells makes it more sensitive. Recently DIF of tzanck smear was shown to be a useful test for early diagnosis which is a simple and non invasive procedure unlike biopsy. Our objective was to compare DIF of skin biopsy and DIF of tzanck smear.

OBJECTIVE: To compare direct immunofluorescence of skin biopsy and direct immunofluorescence of Tzanck smear in Pemphigus Vulgaris patients.

MATERIALS AND METHODS: 30 patients of Pemphigus vulgaris with skin lesions were taken for the study after obtaining legal consent. Biopsy from skin was done and sent for immunofluorescent study. Tzanck smear was prepared by derroofing and scraping the floor of the bulla. Then the obtained smear is stained with polyclonal rabbit anti human IgG & C3 and sent for immunofluorescent study.

RESULTS: Out of 30 patients, DIF of skin biopsy was positive in all patients (100%). DIF of tzanck smear for IgG & C3 was positive in 25 (83.33%) and negative in 5 (16.67%) patients.

CONCLUSION: Hence, DIF of tzanck smear could be a recommended procedure to diagnose pemphigus as it is a non-invasive, cost effective and quicker than biopsy.

