

## Trichloroacetic acid as a treatment for persistent oral mucosal lesions in pemphigus vulgaris



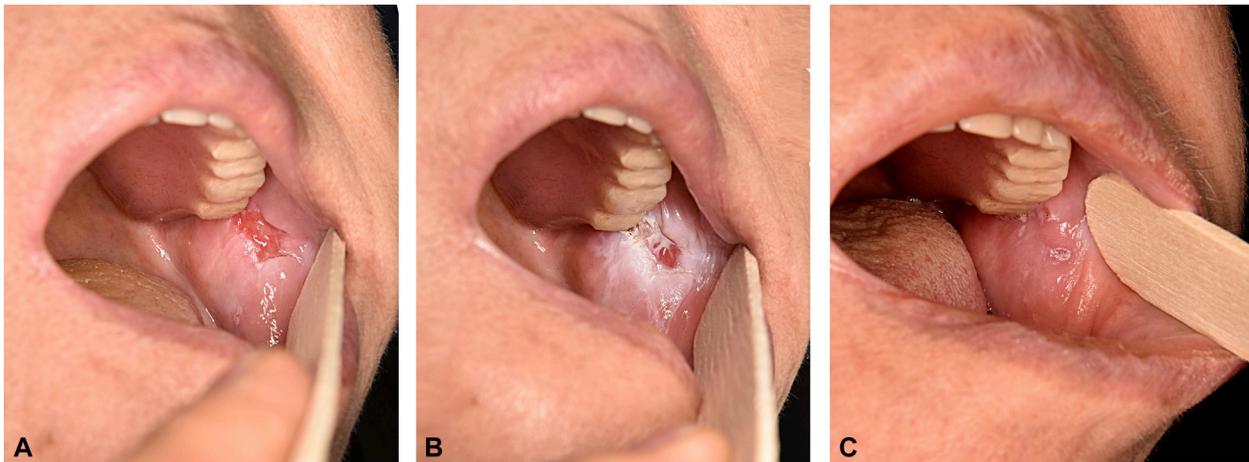
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### THERAPEUTIC CHALLENGE

Pemphigus vulgaris (PV) is an autoimmune bullous disease that usually affects the oral mucosa. The delayed healing process of oral ulcers, especially on the buccal mucosa, is among the challenges in treating it.<sup>1</sup> Despite the efficacy of systemic therapies and intralesional steroids for accelerating the healing process, they may not be effective in all persistent lesions.

### SOLUTION

Topical trichloroacetic acid (TCA) 33% is a caustic agent that has been used as an inexpensive treatment for aphthous stomatitis.<sup>2</sup> We are sharing our experience in using TCA 33% to treat PV by presenting its efficacy for persistent buccal lesions (Fig 1, A). These resistant buccal lesions have not responded to different systemic and topical drugs, and they have remained unchanged for months. We applied topical TCA 33% monthly by using a cotton-tipped swab to paint the border of the lesion. Caution should be observed to avoid dripping from the swab during application. The end point is a white frost that appears within a few seconds (Fig 1, B). The treatment is associated with a transient mild burning sensation. Even 2 to 3 weeks after the first application, some improvement may be noted (Fig 1, C). The treatment can be repeated monthly depending on response. Worsening of the lesion or serious side effects have not been observed. The most critical point is patient selection, as topical TCA is



**Fig 1.** Pemphigus vulgaris. Persistent oral lesion (A), 1 minute after local application of trichloroacetic acid 33% (B), and complete healing 6 weeks after application of trichloroacetic acid 33% (C).

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not recommended in patients with active disease. In conclusion, application of TCA seems promising for the treatment of persistent, old, refractory oral PV lesions in a patient who is otherwise in clinical remission.

**REFERENCES**

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