

Mucous Membrane Pemphigoid

What is mucous membrane pemphigoid?

Mucous membrane pemphigoid (MMP) is an uncommon chronic blistering disease that usually affects patients over the age of 50. The mucous (“wet”) membranes of the mouth, throat, eyes, nose and genital area may be affected to varying degrees. Lesions often begin in the mouth and in some cases, may spread to involve other sites.

Oral lesions often appear on the gums that then become bright red, inflamed and sore making eating and tooth brushing difficult. Other areas of the mouth may also become involved.

What causes mucous membrane pemphigoid?

MMP is an autoimmune disease, which means that your own immune system, that normally helps you stay healthy by fighting off infections such as common colds, becomes confused and attacks your own body by mistake. Unfortunately, we do not know why this happens. MMP is not infectious in nature and you cannot spread it to family members or friends.

How do we know it is mucous membrane pemphigoid?

The only way to diagnose MMP is by biopsy since many different conditions may cause similar-appearing lesions in the mouth. A special test called the direct immunofluorescence study will be performed on the biopsy and this almost always provides a definite diagnosis.

What can I expect?

MMP is a chronic condition that may fluctuate in severity but is always present. Oral lesions may lead to difficulties in eating, maintaining good oral hygiene, and scarring. One of the most serious complications of this condition is scarring of the eyes. This is why this condition is sometimes called cicatricial (“scarring”) pemphigoid. Scarring can be prevented or slowed if caught early. As such, we advise that an ophthalmologist follow you regularly. Luckily, scarring in the mouth does not occur very often. If you feel pain, burning or other symptoms related to the eyes, throat, nose, skin or genital area, you should contact your specialist and primary care doctor immediately and not wait for your next scheduled appointment.

How do we treat mucous membrane pemphigoid?

There is no known cure for MMP. How it is treated depends on the severity of the condition. Mild oral involvement can be managed with topical (surface) applications of steroids. The most effective topical steroid gels are fluocinonide and clobetasol applied 2-3 times a day. Steroid rinses are also sometimes used for hard-to-reach areas. In more severe cases, steroid pills may need to be taken for a period of time to help clear the lesions. If you are given a steroid preparation, please be aware that you may develop a yeast infection in your mouth. Your doctor may prescribe an anti-yeast (anti-fungal) rinse (nystatin) or a troche (clotrimazole) to treat the yeast infection. You are particularly susceptible to this if you have diabetes, or a history of yeast infections. Your doctor may also prescribe a numbing agent such as viscous lidocaine or Kaopectate or even

Benadryl for pain control. Other systemic medications that may be prescribed include dapsone, azathioprine, and tetracycline and nicotinamide.

If you are prescribed a steroid gel, you may notice that the packaging of the steroid may have the following warning: “Not for internal use” or “For external use only”. Such topical steroids have been used for decades to treat MMP in the mouth effectively. The warning is there because those steroids were not originally tested for treating oral MMP.

After cleaning your mouth, gently pat the affected area(s) dry with some cotton gauze. Place a small amount of gel on a clean finger, dab it onto the area that hurts and do not eat or drink for 30 minutes for the steroid to be absorbed. It will not hurt you to swallow some of this gel.

After MMP has been brought under control, you may use the gel two or three times a day only during a flare-up for up to one week. It is a good idea to let your mouth rest rather than use the steroid continuously when you are not experiencing pain. If you have lesions mainly on your gums, you may have a soft splint (like a bleaching tray) made by your dentist. You simply apply the gel to the inside of the tray and wear the tray for 30 minutes 2-3 times a day.