# Bullous Pemphigoid

Bullous pemphigoid is a rare disorder of the skin characterized by large blisters. Blisters are thin walled sacs that contain clear fluid. The disease is mostly seen in people over age fifty. It can flare up for weeks or months. These episodes then tend to suddenly resolve, and there can be months or years before another episode develops. The blisters may be seen most commonly in the groin, *armpits* (axillae), trunk, thighs legs and forearms. These blisters can cause great difficulty with normal daily activities. This may be associated with itching, redness, and irritation. This condition disappears within 6 years in most cases. However, relapses may occur after completion of therapy in a small number of people.

## CAUSES

The cause of this condition is thought to be a condition that arises due to formation of antibodies against one's own tissues (*autoimmune disease*). These antibodies attach themselves to the skin and cause inflammation.

## SYMPTOMS

The severity of a flare-up of this disease varies from patient to patient. Some people may have a small number of small blisters with slight redness or irritation. In severe cases, blisters are larger and there are many more of them located in more areas of the body. Itching, redness, and irritation may be severe. The blisters may break to form ulcers. Mouth sores and bleeding gums can develop. This makes eating difficult. A recurrent cough can develop or pain with swallowing, if the deeper part of the throat is affected. There may be nosebleeds if the inner part of the nose is affected.

## DIAGNOSIS

Your caregiver may take a sample of skin for testing (*biopsy*). This is done to confirm the diagnosis. The test may show the presence of abnormal antibodies in the affected area. Blood tests may be included.

## TREATMENT

The treatment is aimed at relieving the symptoms and preventing infection. Your caregiver may give you steroids (*corticosteroids*). Most patients respond well to treatment. The treatment may involve applying corticosteroid cream over the affected area. Sometimes, corticosteroids may be given orally or shots may be needed. For mild cases, medicines that kill germs (*antibiotics*) and vitamin B complex may be given for treatment and/or prevention of infection.

Severe symptoms and/or complicating infection may require hospitalization. This may be necessary for:

- Management of wounds and ulcers.
- Administration of intravenous medication.
- Help with feeding if severe blisters and/or ulcers affect the mouth.

Medicines that suppress your immune system (*immunosuppressive drugs*) may be required.

## HOME CARE INSTRUCTIONS

- Take medications as advised by your caregiver.
- If your lips or mouth are affected, your diet should only include soft foods and liquids.
- If your lips or mouth are affected, avoid very hot liquids. Allow coffee or tea to cool before drinking.
- DO NOT break or drain blisters.
- Follow the specific instructions provided by your caregiver for dressings placed over blisters and ulcers.

## SEEK MEDICAL CARE IF:

- Itching and/or pain are not controlled with medications prescribed.
- Unexplained blisters appear on your skin.
- You develop evidence of skin infections such as redness, swelling and pain extending beyond blisters and/or

ulcers, or pus begins to drain from wounds.
- You develop a fever of 100.2° F (37.9° C) or above.

**SEEK IMMEDIATE MEDICAL CARE IF:**
- Pain in the affected area(s) becomes severe.
- You cannot eat or drink due to blisters, ulcers, or pain affecting your lips and/or mouth.
- You cannot care for yourself because of blisters, ulcers, or pain affecting your hands or soles of your feet.
- You develop a fever of 102.5 ° F (39.2° C) or above.

**MAKE SURE YOU:**
- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

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