

10. Vion B, Frenk E. Erworbene reaktive Kollagenose des Erwachsenen: Erfolgreiche Behandlung durch UV-B-Licht. *Hautarzt* 1989; 40: 448–450.

Accepted August 14, 2000.

Peter Kurschat, Anette Kröger, Karin Scharffetter-Kochanek and Nicolas Hunzelmann
Department of Dermatology, University of Cologne, Josef-Stelzmann-Str. 9, 50924, Cologne, Germany.
E-mail: nico.hunzelmann@uni-koeln.de

Acyclovir Prophylaxis of Recurrent Herpes Labialis Before Electrolysis

Sir,

Recurrent facial–oral herpes simplex infection is a common viral dermatosis which affects 25–40% of the population. Certain triggering factors such as exposure to ultraviolet light, emotional stress, menstruation and skin trauma cause the reactivation (1). Here, 2 patients with recurrent herpes labialis are presented, in whom reactivation occurred with electroepilation. The patient responded well to oral acyclovir prophylaxis.

CASE REPORTS

Case 1

A 24-year-old girl with facial hirsutism was treated with electroepilation applied monthly. Episodes of herpetic vesicles in the perioral area were observed after all 3 treatments. She informed that she had had no recurrence for years. Treatment with oral acyclovir (200 mg 3 times daily), given for 5 days beginning 2 days before the epilation, was successful and no recurrence was observed during 9 months.

Case 2

A 31-year-old woman who had been treated with electroepilation complained of recurrent herpetic lesions. Lesions occurred in the epilated area after 2 treatments. She had no history of recurrent herpes simplex in the last 10 years. Acyclovir (200 mg 3 times daily) was used for 5 days beginning 2 days before the electrolysis. At first, epilation was performed every 3 weeks, then the treatment intervals were increased up to 6–8 weeks. Herpes simplex did not occur within 1 year, while epilation was performed.

DISCUSSION

Skin trauma is one of the most important triggering factors of recurrent herpes simplex infections (2–4). Chemical peeling and dermabrasion have been shown to reactivate the lesions. Epilation was also mentioned as a possible triggering factor (5). In both patients reported here, herpes simplex in the perioral region recurred after epilation treatments and no recurrence was observed with prophylactic acyclovir use. The antiviral prophylaxis in such patients will prevent the reactivation of herpetic lesions in the treated area.

REFERENCES

1. Spruance SL. The natural history of recurrent oral–facial herpes simplex virus infection. *Semin Dermatol* 1992; 11: 200–206.
2. Hill TJ, Blyth WA, Harbour DA. Trauma to the skin causes recurrence of herpes simplex in the mouse. *J Gen Virol* 1978; 39: 21–28.
3. Hedner E, Vahlne A, Bergström T, Hirsch JM. Recrudescence of herpes simplex virus type 1 in latently infected rats after trauma to oral tissues. *J Oral Pathol Med* 1993; 22: 214–220.
4. Bobrowski PJ, Capiola R, Centifanto YM. Latent herpes simplex virus reactivation in the guinea pig. An animal model for recurrent disease. *Int J Dermatol* 1991; 30: 29–35.
5. Olsen EA. Methods of hair removal. *J Am Acad Dermatol* 1999; 40: 143–155.

Accepted August 16, 2000.

Isil Inanir, MD
Department of Dermatology, Celal Bayar University, Manisa, Turkey.
E-mail: isilinanir@hotmail.com.