

Pyoderma gangrenosum Treated with Clofazimine: Clinical Evaluation of 7 Cases

IDA RASMUSSEN

Department of Dermatology, Marselisborg Hospital, DK-8000 Aarhus C, Denmark

Rasmussen I. Pyoderma gangrenosum treated with clofazimine: Clinical evaluation of 7 cases. *Acta Derm Venereol (Stockh)* 1983; 63: 552-553.

Seven patients with pyoderma gangrenosum have been treated with clofazimine. In contrast to the beneficial effect described in other articles only one healed. (Received March 27, 1983.)

I. Rasmussen. Department of Dermatology, University of Aarhus, Marselisborg Hospital, DK-8000 Aarhus C, Denmark.

Clofazimine (Lamprene[®]) is a substituted iminophenazine dye widely used as an anti-leprosy drug. Several investigations have been published concerning the clinical effect of clofazimine in the treatment of pyoderma gangrenosum (1, 2, 3, 4). Most of these studies present rather convincing results with respect to healing of the ulcers.

MATERIAL AND METHODS

During 1978-82 7 patients with pyoderma gangrenosum and a duration of the disease for 2-36 months were treated with 2-300 mg clofazimine daily for 2-16 months. The patients were between 30 and 87 years old, 4 females and 3 males. This study is a retrospective clinical evaluation.

RESULTS

The results are presented in Table I. In patient 3 a regression of symptoms and clinical signs occurred during treatment with clofazimine. In the other 6 patients the effect of treatment was disappointing. In the present study we found that two patients with

Table I. Clinical results and side-effects in 7 patients with pyoderma gangrenosum treated with clofazimine

R.E. = regional enteritis, C.U. = colitis ulcerosa, P. = paraproteinæmia

Pt. no.	Sex	Age, y.	Duration before treatment (months)	Concurrent diseases	Clofazimine dosage (mg daily)	Duration of treatment (months)	Results	Side-effects	Prednisone added
1	f	87	3		300	4	Poor*	None	
2	m	74	36		300	6	Poor*	Diarrhoea	+
3	m	71	24	R.E.	200	12	Good	Redness	
4	m	59	5	P.	300	1½	Poor*	None	
5	f	42		C.U.	300	2	Poor	Redness	+
6	f	41	3		300	5½	Poor*	Diarrhoea, Redness	+
7	f	30	2	C.U.	300	15½	Poor*	None	+

* Initial tendency to healing followed by relapse or new ulcers.

accompanying gastrointestinal diseases remained without occurrence of new ulcers after intestinal surgery was performed.

DISCUSSION

The precise mode of action of clofazimine is not yet fully known. Brandt et al. (1) described a case with pyoderma gangrenosum and regional enteritis, and they were able to demonstrate impairment in oxygen consumption in neutrophils under phagocytosis using a highly sensitive phagocytic capacity test. Following clofazimine administration healing of the ulcers occurred and the oxygen consumption normalized.

In the present retrospective clinical evaluation the only patient that remained in remission had the same combination of pyoderma gangrenosum and regional enteritis.

Although no severe side effects appeared after clofazimine treatment, for most patients the healing time was increased probably due to the trial. On prednisone treatment all patients subsequently healed. Although the results of treatment with clofazimine in these patients with pyoderma gangrenosum were negative in six out of seven and thus in contrast to other studies, further investigations seem necessary to evaluate the effect of clofazimine in the treatment of pyoderma gangrenosum.

ACKNOWLEDGEMENT

I thank Ms Lene Lyck Poulsen for her secretarial assistance.

REFERENCES

1. Brandt L, Gärtner I, Nilsson P, Olofsson T. Pyoderma gangrenosum associated with regional enteritis. *Acta Med Scand* 1977; 201: 141-144.
2. Kark E, Davis B, Pomeranz J. Pyoderma gangrenosum treated with clofazimine. *Am Acad Dermatol* 1981; 4: 152-159.
3. Michälsson G, Molin L, Ohman S, Gip L et al. Clofazimine: A new agent for the treatment of pyoderma gangrenosum. *Arch Dermatol* 1976; 112: 344-349.
4. Thomsen K, Rothenborg H. Clofazimine in the treatment of pyoderma. *Arch Dermatol* 1979; 115: 851-852.