

LETTERS TO THE EDITOR

Cyclosporin A and Pityriasis Rubra Pilaris

Sir,

The therapeutic activity of cyclosporin A (CycA) in severe psoriasis is well documented (1, 2, 3). However, it has recently been reported that CycA had no effect on Pityriasis Rubra Pilaris (PRP) (4). We report here a case of PRP type I showing dramatic improvement of the lesions after CycA treatment.

A 36-year-old Moroccan man had had palmo-planar keratoderma and follicular papules all over his body since 1985. PRP was clinically diagnosed and confirmed by histological examination. Previous treatments with topicals steroids, PUVA and Methotrexate were unsuccessful; Tigason (etretinate) was not tolerated and caused serious hair loss.

In May 1989, the disease became widespread and nearly erythrodermic, with classical islands of apparently normal skin. The patient was hospitalized and treatment with CycA 5 mg/kg/day (one oral daily dose) was started. A spectacular clinical improvement of his condition was noted during the first week and the patient was completely cleared after 4 weeks of treatment. No side effects were recorded during this period. The patient is still taking 3 mg/kg/day of oral CycA, and the disease is under control since June 1989, without any relapse so far.

Many workers have observed that epidermal cell renewal is increased in PRP (5, 6). CycA has been proved to inhibit the proliferation of normal and

transformed keratinocytes in vitro (7). This could be the mode of action of CycA on PRP.

We consider that CycA is an effective therapeutic remedy for PRP.

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