

Recurrent Aphthous Stomatitis: Treatment with Pentoxifylline

Sir,

We read with great interest the letter by Wahba-Yahav (1). The author reports 3 patients with severe recurrent aphthous stomatitis (RAS), successfully treated with a short course of oral pentoxifylline (PTX), 400 mg t.i.d., without side-effects and with a prolonged remission. Wahba-Yahav asserts that his study is the first attempt to treat idiopathic RAS with PTX (1). However, we have reported previously 6 cases of RAS successfully treated with PTX (2, 3). Oral therapy with PTX (400 mg twice to three times daily) suppressed recurrence of aphthae in 5 patients and led to a reduction in the number of ulcers, with symptomatic improvement, in one patient (3). Recently we have conducted an open trial on a new series of 22 patients with minor RAS (4). All the patients received oral therapy with PTX at a dosis of 400 mg three times daily during a 6-month period. No relapses of aphthous ulcers during the course of treatment were observed in 11 patients (50%); 6 patients (27%) showed recurrence of the lesions with sympto-

matic improvement; 3 patients (14%) showed recurrence of aphthous ulcers without symptomatic improvement; finally, 2 patients (9%) noted gastrointestinal intolerance and the treatment was discontinued in the first month. Taken together, all these observations suggest that PTX may play a role in the treatment of most patients with idiopathic RAS. In addition, a beneficial effect of PTX on aphthous ulcers in patients with HIV-1 infection has been observed by us (5) and other authors (6). In agreement with Wahba-Yahav (1) we think that additional controlled studies on large numbers of patients are warranted in order to confirm the usefulness of PTX for the treatment of RAS, as well as to determine the optimal dose and duration of therapy.

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