

# The Simultaneous Occurrence of Hailey-Hailey Disease, Graves' Disease and Multiple Sclerosis in the Same Patient

Sir,

Familial benign chronic pemphigus, (Hailey-Hailey disease) is a chronic vesiculo-bullous disease, characterized by its distribution along the sides of the neck, axillae and groin areas. This condition may have a hereditary auto-immune basis (1).

Multiple sclerosis is a disorder of the brain, optic nerves and spinal cord, characterized by areas of demyelination. This condition is thought to be of hereditary auto-immune basis, associated with HLA-DR2 antigen (2).

Graves' disease is an auto-immune disorder of the thyroid, characterized by the presence of circulating antibodies directed against different fractions of the thyroid gland. This disorder is also of a hereditary origin in the vast majority of cases and also has a 10:1 predilection for young women between 20-40 years (3). We report a case of a 35-year-old woman with the coexistence of Hailey-Hailey disease, Graves' disease and multiple sclerosis.

## CASE REPORT

We have been following a 35-year-old white female, who for the last 15 years has had Hailey-Hailey disease. Her occasional exacerbations were controlled with topical 2% erythromycin solutions and an occasional intramuscular injection of 40 mg triamcinolone acetonide for her more severe outbreaks. More than one dozen biopsies were performed over the last 15 years to make sure that this was not some other disease process in evolution, but the biopsies always came back as consistent with Hailey-Hailey disease. Two years ago the patient stated that she was experiencing weight loss, palpitations and extreme anxiety attacks. A laboratory thyroid profile (T3, T4 and TSH) as well as levels of antimicrosomal and antithyroglobulin antibodies were indicative of Graves' disease, at which point she was referred to an endocrinologist for further evaluation and treatment. Her thyroid condition was successfully treated with radioactive iodine ( $I^{131}$ ). One year later, after she had developed limb weakness, diplopia, and

retrobulbar neuritis, her family physician referred her to a neurologist for further work-up. At this point it was decided that she was developing multiple sclerosis.

She is currently under the care of her neurologist and her multiple sclerosis is causing a deteriorating condition which is progressing rapidly. Her outbreaks of Hailey-Hailey have become almost generalized and basically unresponsive to all forms of treatment at this point in time. It is interesting to note that the patient's mother also has Graves' disease and Hailey-Hailey disease. Both the patient and her mother express HLA-DR2 antigen. Whole phenotyping of the patient and her mother was not performed. This is a most curious situation, in which a previously healthy young woman now has a barrage of three auto-immune diseases, which appear to be refractory to all forms of therapy at this point. Tests for HIV, lupus and other immunological conditions have all been negative up to now.

We wish to alert our dermatologic colleagues who have occasion to treat Hailey-Hailey disease, to be on the look-out for other potential immunological abnormalities. We believe this to be the first case report of an association between Hailey-Hailey disease, Graves' disease and multiple sclerosis in the same patient.

## REFERENCES

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