

totic cells were still present. Perivascular infiltrates of chronic inflammatory cells in the dermis were not found. There was no relapse or exacerbation of the disease even 4 months after cessation of treatment.

Comments

To the best of our knowledge corticosteroids have not been used in this disease. The lesions in our study showed improvement (good response in 40%, moderate response in 20%). No worsening of existing lesions was observed.

No fresh lesions appeared. Though it is reported that porokeratosis of Mibelli may follow immunosuppression following the use of azathioprine and prednisolone,¹ in the present study no such phenomenon was observed.

Since there is no satisfactory treatment available, corticosteroids may be used.

References

1. Macmillan AL and Roberts SOB : Porokeratosis of Mibelli after renal transplantation, *Brit J Dermatol*, 1974; 90 : 45-51.