

## LETTERS TO THE EDITOR

### COINCIDENCE OF LICHEN PLANUS AND ALOPECIA AREATA

To the Editor,

Lichen planus has been associated with several disorders. With time it is becoming apparent that idiopathic lichen planus is being observed more and more in conjunction with diseases of altered or disturbed immunity. Such 'autoimmune' diseases include alopecia areata, dermatomyositis, dermatitis herpetiformis, morphoea, myasthenia gravis, pemphigus foliaceus, pemphigus vulgaris, systemic sclerosis and vitiligo.<sup>1</sup>

A 18-year-male presented with generalised itchy skin lesions and circumscribed area of loss of hair over scalp since 1 month and 15 days respectively. There was no history of any exposure to STDs and recent medication for any illness. Cutaneous examination revealed erythematous and violaceous flat topped, polygonal papules which varied in size from pin point to a centimeter all over the body sparing palms, soles, face and scalp. Many papules demonstrated Wickham's striae. Koebner phenomenon was observed over the trunk. There was circumscribed patch of loss of hair measuring 4 x 3 cms over occipital area of the scalp without any signs of inflammation. Margin of the patch demonstrated 'Exclamation point' hairs. Examination of nail, mucous membranes and other systems did not reveal any abnormalities.

Routine haematological and urine examination findings were within normal limits. Blood VDRL was negative. Histopathological examination of the biopsied cutaneous papules confirmed the clinical

impression of lichen planus.

The etiology of alopecia areata and lichen planus is not known with certainty. The clinical and laboratory evidences for AA and/or LP being an autoimmune disease is largely circumstantial. Co-existence of unrelated skin diseases is likely to be much less common. Co-existence of two disorders which possess a prominent immunological component in their pathogenesis may offer clues to their causation.

Coincidence of LP and AA has been scarcely reported in the literature.<sup>2,3</sup> The true nature of the association in the present case is difficult to determine, but seem to be casual rather than fortuitous.

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### References

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### IDIOPATHIC FAMILIAL PIGMENTATION OF TONGUE-A NEW ENTITY

To the Editor,

Various causes of oral mucosal pigmentation have been mentioned in the literature. But isolated involvement of tongue only occurs in black hairy tongue<sup>1</sup>, fixed drug