

LETTERS TO THE EDITOR

Sir,

I read the article 'Perioral Dermatitis' — a preliminary report (Vol. 39 : p 92, March/April, 1973) with great interest as I feel that this entity is relatively uncommon in this country.

In the very first sentence of the paper the author uses the term 'Perleche' synonymously with 'Perioral Dermatitis'. These two conditions are entirely different and have no connection, whatsoever with each other.

The Perleche is a French word and is applied to inflammatory processes at the angles of the mouth. Literally it is derived from 'leche' meaning to lick and 'per' means all around or thoroughly. The word might have been chosen for this condition because the disease may be caused by or at least promoted by the habit of licking the angles of the mouth or that the persons suffering from this entity lick angles of their mouth to allay the discomfort.

The entity now known as Perioral Dermatitis was first described by Frumess and Lewis in 1957 under the title of 'Light Sensitive Seborrhoeid'. The lesions are discrete papules or pustules, develop as irregular clusters or plaques of erythema and edema. These are localised around the mouth sparing a narrow zone adjacent to vermilion border.

The author has in fact beautifully described cases of perleche due to tobacco and betel chewing. I must congratulate her on her keen observation. She should not have given it a wrong title. She has described perleche but in the discussion has referred to works of Marks and Blank (1971) which is on Perioral Dermatitis.

I have also observed that cracks and fissures at angles of mouth of varying degrees of severity are frequently seen in chain 'betel chewers'. I have given this entity a title of "Betel Chewers' Perleche" and described as a brief communication in British Journal of Dermatology. The lesions are characterised by soddened areas at angles of mouth chiefly on the cutaneous side of muco-cutaneous junction. This is not associated with any vitamin deficiency. Candida species may be isolated in few cases which is very likely a secondary invader.

Continuous chewing of betel keeps the mouth full of saliva which becomes highly alkaline due to the presence of lime. Saliva trickles slightly at the angles of the mouth and keeps it constantly hydrated. Lips are also constantly moving in the process of chewing. The continuous friction of moist opposing surfaces at angles of the mouth causes maceration, erosion and cracks. This condition is in fact Interlabial Intertrigo.

REFERENCES :

1. Frumess GM and Lewis H : Light Sensitive Seborrhoeid, Arch Derm, 75 : 245, 1957.
2. Marks R and Black MM : Perioral Dermatitis, Brit J Derm, 84 : 242, 1971.

Varanasi }
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