

pustular and non-inflammatory with scaling and absence of a well-defined margin.

Immunosuppression due to HIV infection might have led to this chronic non-inflammatory, non-pustular, extensive infection caused by a zoophilic species. Perhaps, this is the first report of an extensive, non-inflammatory tinea corporis caused by *Trichophyton verrucosum*.

S Arun Mozhi Balajee, Thangam Menon, S Ranganathan, Thirunavukkarasu Madras

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BENIGN FAMILIAL CHRONIC PEMPHIGUS IN A DIABETIC

To the Editor,

A 48-year-old male patient presented with recurrent vesicular eruptions on an erythematous base with a surrounding zone of hyperpigmentation appearing over axillae, groin and later on over neck and cubital fossa with no involvement of mucosal surfaces. The complaint dated back to 5 years. The course was one of remissions and recurrences. On routine hematological examination and urinalysis patient was detected to be a diabetic.

Patient did not respond to antibiotics like tetracycline and erythromycin, topical steroids and antifungals, although his diabetes was

controlled by oral antidiabetics. Later on dapsone was started and the patient improved remarkably as has been noted by other authors.¹ According to the patient his late father had similar history of recurrent lesions over his neck and flexural sites, and his only sibling was unaffected. Histopathological examination of the biopsy specimen showed features consistent with clinical diagnosis of Hailey-Hailey disease.

Benign familial chronic pemphigus (Hailey-Hailey disease) is transmitted through an autosomal dominant gene with incomplete penetrance with a family history in 70% of the cases. In our case an autosomal dominant mode of inheritance is suggested. Although non insulin dependent diabetes mellitus is known to run in families, its mode of inheritance is not known and in our case no definite family history of diabetes could be obtained. So the occurrence of diabetes mellitus in our case might be an association or is fortuitous.

J N Dave, S V Shah, N S Vora, K Roy, A Ghosh, B J Cardoso Ahmedabad

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ORAL LICHEN PLANUS CAUSED BY DENTAL AMALGAM

To the Editor,

Lichen planus and lichenoid lesions are known to be provoked by many chemicals and drugs. Dental metals like mercury and silver have been implicated in the aetiopathogenesis, probably due to contact allergy^{1,2} although an electrogalvanic effect has also been