Dermabrasion may improve the appearance of the skin, chemical skin peeling, and blepharoplasty [Bannerot et al 1998].

Carbon dioxide laser surgery has been successful in treating thickened vocal cords and beaded eyelid deposits in some studies [Rosenthal et al 1997, Kroukamp et al 2007, Çaliskan et al 2015].

D-Penicillamine. In a 13-year-old girl treated with 600 mg/day of D-penicillamine for two years, reported decreased itching, less hoarseness, and softening of the cutaneous lesions [Kaya et al 2002].

Dimethyl sulfoxide (DMSO). Results for use of DMSO are contradictory. A 41-year-old man reported successful treatment of skin lesions, hoarseness and abnormal esophageal function using oral DMSO60 mg/kg/day for three years. In contrast, subsequent reports failed to reproduce the results in three patients treated for an average of three years [Wong et al 1998, Ozkaya-Bayazit et al 1997].

Corticosteroids. Topical corticosteroids in a 4-year-old girl with eroded lesions resulted in significant healing of skin lesions and prevented new lesion formation [Kaya et al 2003].

Etretinate. A 30-year-old woman showed significant improvement in lesions on the knees, elbows, and palms at a dose of 1.0 mg/kg daily for the first two months and 0.75 mg/kg daily for the next two months [Gruber et al 1996].

Acitretin. 0.5 mg/kg/day in a 3-year-old with erosive and vesiculobullous lesions improved hoarseness in the sixth month of treatment, but did not change cutaneous lesions significantly [Toosi & Ehsani 2009].

A 21-year-old treated with acitretin 0.5 mg/kg/day for six months showed improved hoarseness but no change in cutaneous lesions [Gündüz et al 2012].

Two patients showed some regression and softening of skin lesions with acitretin; however, no histopathologic change in PAS-positive deposition could be detected [Akoglu et al 2011].

In ten patients treated with acitretin 0.5 mg/kg/day for six months, the following results were noted: cutaneous papules and plaques disappeared (7), hoarseness receded (7), vesiculobullous lesions were reduced (3), and the frequency of oral ulcers decreased (3), palmoplantar hyperkeratosis disappeared completely (1) [Dertlioğlu et al 2014].

References


