Blistering Disorders

- In general, blistering skin disorders can be divided into: immunobullous diseases (e.g. bullous pemphigoid, pemphigus vulgaris), blistering skin infections (e.g. herpes simplex) and other (e.g. porphyria cutanea tarda).
- The fragility of blisters depends on the level of split within the skin an intraepidermal split (a split within the epidermis) causes blisters to rupture easily; whereas a sub-epidermal split (a split between the epidermis and dermis) causes blisters to be less fragile.
- The common causes of blisters are impetigo (*see below*), insect bites, herpes simplex infection (*see page 34*), herpes zoster infection (*see page 36*), acute contact dermatitis, pompholyx (vesicular eczema of the hands and feet, see below) and burns.
- Bullous pemphigoid (see page 53) and pemphigus vulgaris (see page 54) are uncommon conditions due to immune reaction within the skin.



Bullous impetigo in a new tattoo



Pompholyx

Learning outcomes:

- 1. Ability to recognise common causes of blisters
- 2. Ability to recognise:
 - Bullous pemphigoid
 - Pemphigus vulgaris

Bullous pemphigoid

Description	 A blistering skin disorder which usually affects the elderly
Cause	 Autoantibodies against antigens between the epidermis and
	dermis causing a sub-epidermal split in the skin
Presentation	 Tense, fluid-filled blisters on an erythematous base
	• Lesions are often itchy
	 May be preceded by a non-specific itchy rash
	 Usually affects the trunk and limbs (mucosal involvement less
	common)
Management	 General measures – wound dressings where required, monitor
	for signs of infection
	 Topical therapies for localised disease - topical steroids
	• Oral therapies for widespread disease – oral steroids, combination
	of oral tetracycline and nicotinamide, immunosuppressive agents
	(e.g. azathioprine, mycophenolate mofetil, methotrexate, and
	other)



Bullous pemphigoid

Pemphigus vulgaris

Description	 A blistering skin disorder which usually affects the middle-aged
Cause	 Autoantibodies against antigens within the epidermis causing an
	intra-epidermal split in the skin
Presentation	 Flaccid, easily ruptured blisters forming erosions and crusts
	• Lesions are often painful
	 Usually affects the mucosal areas (can precede skin involvement)
Management	• General measures – wound dressings where required, monitor for
	signs of infection, good oral care (if oral mucosa is involved)
	 Oral therapies – high-dose oral steroids, immunosuppressive
	agents (e.g. methotrexate, azathioprine, cyclophosphamide,
	mycophenolate mofetil, and other)



Pemphigus vulgaris



Pemphigus vulgaris affecting the oral mucosa