Correspondence

BLOOD PRESSURE OBSERVATIONS IN PSORIASIS, LICHEN PLANUS AND ERYTHEMATOUS LUPUS

To the Editor:—I wish to call the attention of dermatologists to some observations on blood pressure in psoriasis, lichen planus and erythematous lupus, which may or may not be of value. In the treatment of lichen planus, I am quite sure these observations are of value. In the other conditions I am strongly inclined to believe that they are at least an indication of which way the wind blows, so to speak.

In psoriasis, the blood pressure, in those patients who have come under my observation, has been uniformly low. It appears to drop as the disease progresses in point of time. Those who have had psoriasis for some time have a much lower blood pressure than those with early cases. In the old cases, the pressure is usually below 100 and often as low as 85 millimeters of mercury. Raising the blood pressure fifteen or twenty points, without any local applications, has markedly tended to dissipate the eruption: in some cases completely, in others partly. When the blood pressure falls the eruption reappears.

In lichen planus, the blood pressure appears to be low from its incipency. Raising the pressure fifteen or twenty points induces a complete subsidence of the eruption. In four cases, when the blood pressure was raised with pituitary extract, it stayed up, and the eruption had entirely disappeared within ten days, although it had existed for months. These patients have remained well for the past eighteen months.

In erythematous lupus, I have invariably found the blood pressure low, though not always as low as in cases of psoriasis and lichen planus. I have made no attempt to ascertain what effect elevation of blood pressure would have on this disease, but I shall try to discover this in the near future.

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