If there is more severe mouth or eye involvement, medicines taken by mouth to suppress your body’s immune system are likely to be prescribed. These medicines include corticosteroids (prednisolone), dapsone, azathioprine and mycophenolate mofetil. They all have potential side-effects and require close monitoring by the oral medicine doctors and your GP.

Anti-inflammatory antibiotics such as doxycycline and vitamin supplements such as nicotinamide may also be given.

Patients who are given corticosteroids for long periods of time will also normally be given medicines to help prevent common side effects, such as indigestion and bone thinning.

**Outcome**

MMP is a potentially serious disorder. Rarely your eye sight may be threatened.

Difficulties with swallowing, breathing or sexual intercourse may develop due to blistering and scarring. Any deterioration in your condition should prompt you to seek urgent review with the oral medicine doctors. However many patients have the disorder confined to their mouth and medication successfully controls the blistering and ulceration.

In some patients MMP appears to become inactive after a number of years.

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**Contact**

**Department of Oral Medicine**

**The Eastman Dental Hospital**

**Telephone:** 0203 456 1175 (Clinic)

**Address:** 256 Gray’s Inn Road

London WC1X 8LD

**Website:** www.uclh.nhs.uk

**For further information**


[http://pemfriends.co.uk/](http://pemfriends.co.uk/)

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**Telephone:** 020 3456 5076.

**We will try our best to meet your needs.**
**Background**

Mucous membrane pemphigoid (MMP) is a rare chronic blistering condition of the lining of the mouth, eyes and genitals (mucosa) and rarely skin. The blister is a fragile, fluid-filled skin lump which easily bursts to leave an ulcer.

Severe MMP can result in scarring when it heals. MMP was previously called 'cicatricial pemphigoid' derived from the Latin 'cicatrix' for scar.

**Who gets it?**

It is very often a condition of middle to late age, but it can affect any group, it is said to be slightly more common in women than men.

**What parts of the body are affected?**

The initial site of involvement is usually the mucosa, which may include the eyes, mouth, nose, voice box, swallowing tube or genitals.

The mouth and gums may be affected by blisters or ulcers which may heal with scarring. The skin of the scalp and, less commonly, chest and neck can also be involved initially with an itchy rash and then blisters which break down to leave crusts.

The severity and the number of sites involved varies from patient-to-patient. Many patients have MMP confined to the gums.

**What causes it?**

The body's defence mechanisms usually act to protect us against viruses and bacteria, so keeping us healthy. In a person with MMP the immune system mistakenly perceives the cells in the mucosa or skin as foreign and attacks the connections that stick the skin to the underlying tissue resulting in blister formation.

What makes a person susceptible is not yet clear, but is likely to partly involve the genes inherited from our parents. It is not an infection so you cannot pass it on.

**How is the diagnosis made?**

- **Appearance** - The appearance of the ulcers and blisters in your mouth and your description of how the disorder has affected you often suggests that you have MMP. However the diagnosis may be difficult to make as a number of skin conditions can look like MMP.

- **Biopsy** - Your doctor is likely to recommend that a small sample of the lining of your mouth is taken. This will be examined under the microscope to confirm the diagnosis.

**What treatment is available?**

At present we do not have a cure for MMP. Treatment is often quite difficult and involves using one or more drugs to dampen down the immune response which is causing your blistering.

If the MMP in your mouth is mild, mouthwashes and ointments alone may be used. These are typically topical anti-inflammatory corticosteroids and more recently tacrolimus.

Close attention to keeping your mouth clean is very important and regular appointments for tooth cleaning should be arranged with your own dentist.

**Blood investigations** - Rarely there may be specific antibodies in the blood of people with MMP and this may be helpful in making the diagnosis. Other blood tests may be required, particularly if medication you have to swallow is necessary.

Since MMP affects many different parts of the body, other specialists may be asked to see you. An appointment will be arranged for you to see an eye doctor (ophthalmologist) to make sure your eyes are not involved. If the skin or genitals are involved you may need to see a skin doctor (dermatologist).