Progressive facial hemiatrophy (Parry-Romberg syndrome) and antibodies to Borrelia

To the Editor: Abele et al recently reported (J AM ACAD DERMATOL 1990;22:531-3) a case of progressive facial hemiatrophy (PFH) with high titers of antibodies to Borrelia detected by indirect immunofluorescence (IF) (IgM 1:16 and IgG greater than 1:128). In addition, they found in skin sections of the patient, microorganisms compatible with Borrelia sp. when these sections were stained with the Steiner silver impregnation procedure and by direct IF with the use of a monoclonal antibody specific for Borrelia. They therefore propose to examine patients with PFH for borreliosis because early antibiotic therapy could offer the cessation of disease progression.

We became interested in the subject, and we have tested the sera from four patients (one man, three women) with PFH to investigate the presence of antibodies to B. burgdorferi by enzyme-linked immunosorbent assay (ELISA) (Diamedix Corporation, Miami, Fla.) and by indirect IF to detect IgG and IgM antibodies (Scimedx Corporation, Danville, N.J.). The patients' ages ranged from 8 to 40 years, and the duration of the disease from 2 to 11 years. None of the patients recalled a tick bite. As a control group we studied 17 healthy persons.

Antibodies to B. burgdorferi were negative with both methods in all four patients with PFH and in the control group. These results suggest that there is no relation between B. burgdorferi infection and PFH. However, we are aware that the current system of laboratory confirmation of infection by B. burgdorferi is not perfect.1,2 Currently, we are doing some studies to determine the kind of ticks that are more prevalent in our geographic area, and the prevalence of infection with B. burgdorferi in those Ixodes (Esugleyes-Ribot et al., manuscript in preparation). More studies are needed before a positive correlation can be established between PFH and Borrelia infection.

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REFERENCES