LASER THERAPY IN THE **TREATMENT OF BULLOUS PEMPHIGUS: CASE REPORT.**



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OBJECTIVE

To report about the use of Low Intensity Laser as adjuvant in the treatment of Bullous an Pemphigus.

METHOD

This is a case study of a 78-year-old woman diagnosed with Bullous Pemphigus (2022), who was followed up from February 2023 to March 2023 at a university hospital located in the south of Brazil/SC.

Data was collected from anamnesis, physical examination, review of medical records, nursing notes, application of the numerical pain scale (NDS) and photographic records.

The patient, who had insulin-dependent type 2 diabetes mellitus and systemic arterial

RESULTS

At the last visit (March 22, 2023), the patient no longer had pain, odorless lesions and a controlled inflammatory process, especially in the cervical lesions, upper limbs, lower limbs and abdomen, and was discharged from outpatient care. The lesions were epithelialized in 50 days and follow-up was maintained by telemonitoring to prevent recurrences.

Evolution of wounds



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hypertension, began her follow-up on 08/02/2023 with the Dermatology and Nursing team. She was being treated topically with sunflower oil, had severe pain (END = 10) and extensive lesions on the upper and lower limbs, abdomen and neck, with intact flictenas and some ruptured ones, as well as a foul odor. The lesions were cleaned, debrided with polyhexamethylene biguanide (PHMB) solution and the larger flictenas were ruptured without removing the skin in order to maintain the biological dressing. The therapeutic approach was hydrogel and rayon gauze in dry areas and foam with silver in places with more exudation, both fixed with a bandage.

On the second visit (15/02/2023) there was a reduction in exudation, odor and pain (END= 6), the lesions were drier and adhered to the primary covering. The hydrogel was replaced with andiroba cream and non-adherent gauze with petrolatum with good tolerance and the use of silver foam was maintained in more exudative lesions. Low-intensity laser therapy (LLLT) was started with the following dosimetric parameters: P: 100nm, 1cm² spot, red (660nm) and infrared (808nm) light applied simultaneously, 2J/point of energy using the point technique, continuous mode, weekly dosage.

22/03/2023

CONCLUSION

The use of low-intensity laser as an adjunct to topical treatment for bullous pemphigus helped minimize the risk of infection, promote pain control and speed up the healing process of complex wounds.

I have no conflict of interest