

Chapped Corners of the Mouth

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A 66-year-old female presents with deep furrows at the corners of her mouth along with redness and fissuring of several years duration which are causing her discomfort.

What is your diagnosis?

Angular cheilitis or *perlèche* is a maceration with fissuring of the oral commissures. It typically presents as ill-defined thickened areas with mild erythema of the mucous membranes at the corners of the mouth. Soon, fissuring and maceration along with crust formation occurs and occasionally very small papules. Involvement is typically bilateral and is considered by some to be analogous to intertrigo elsewhere on the body.

There can be concurrent infection with *Candida albicans* and/or *Staphylococcus aureus* and other etiologic factors including iron or riboflavin deficiency may play a role. The elderly are more commonly affected due to atrophy of the alveolar ridge and the resulting overhanging of the upper lip over the lower at the commissures. Moreover, individuals with malocclusion due to ill-fitting dentures can develop this problem.



Figure 1. Chapped corners of the mouth.

The treatment of angular cheilitis depends on the cause. Anticandidal or antibacterial creams can be beneficial depending on the etiology and/or in combination with a very mild steroid.

In the elderly, there can be vertical shortening of the lower third of the face and so oral surgical intervention is then recommended. More recently, the hyaluronic acid fillers have been injected into the depressed sulcus with successful outcomes.

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