To the Editor:

Brooke-Spiegler syndrome is a rare genodermatosis that causes a predisposition to adnexal tumors due to alterations in the folliculosebaceous apocrine unit.1-4 It is an autosomal dominant condition with variable penetrance and is characterized by the simultaneous and progressive appearance of multiple cylindromas on the scalp, facial trichoepitheliomas, and, occasionally, eccrine spiradenomas.1-4

The locus implicated in this condition is found on chromosome 16q12-q13, a region that holds the CYLD1 tumor suppressor gene, which is involved in the regulation of proliferation of the skin appendages.5 There is marked phenotypic variability within families, such that members of a single family with identical mutations can present isolated or multiple trichoepitheliomas, cylindromas or, less frequently, eccrine spiradenomas.1-4

Trichoepitheliomas present clinically as small, translucent papular lesions that are painless and are most commonly found in groups in the nasolabial sulci, on the nose, and on the forehead. Histologically there are multiple islets of basaloid cells arranged in a jigsaw-puzzle pattern and surrounded by a highly eosinophilic material.

Both trichoepitheliomas and cylindromas tend to increase in size and number over time and can lead to pronounced cosmetic alterations with psychological, social, and occupational repercussions. Early treatment is therefore indicated in order to reduce postsurgical sequelae and increase patient satisfaction.

Various palliative treatment approaches have been described in the literature, including electrocoagulation, cryotherapy, dermabrasion, tricholoracetic acid, retinoic acid, carbon dioxide (CO2) laser, radiation therapy, and surgery.8,9

We present 2 cases of multiple trichoepitheliomas treated using CO2 laser. The first patient was a 43-year-old woman with Brooke-Spiegler syndrome. Over 9 years she had received 4 sessions of continuous-wave CO2 laser vaporization (sessions every 2 years) with a power setting of 3 to 5 W and 1 to 3 passes (Figures 1 and 2). The second patient was a 43-year-old man with Brooke-Spiegler syndrome. Since 2003 he had undergone sessions every 2 years of continuous-wave CO2 laser vaporization using a power of 5 W (Figure 3).

In both cases the cosmetic result had been satisfactory, achieving a significant reduction (flattening) of the lesions, though they had never disappeared completely. Over time there had been a gradual recurrence, associated with the appearance of new lesions, but there was an adequate response to further CO2-laser treatments.

The CO2 laser is a surgical instrument that emits energy in the form of infrared light at a wavelength of 10,600 nm; this wavelength is absorbed by water, leading to vaporization of the skin with coagulative necrosis in the remaining dermis. Used in continuous mode it produces a surgical cut (focused beam) or vaporization (defocused beam). The most important characteristics of this laser are its rapid action, permitting large areas to be treated, the selectivity and precision of its effects, and its high specificity of tissue damage, producing highly localized destruction and enabling multiple lesions to be treated with minimal bleeding. The complications of treatment include erythema, edema, a burning sensation, Herpes simplex

References

Carbon dioxide laser therapy, ever more widely used in dermatology, was a good therapeutic option in the cases of Brooke-Spiegler syndrome described here, as the large number of facial lesions can often produce a significant psychological impact and we were able offer a treatment that, although not curative, achieved good cosmetic results with minimal side effects.

**Conflict of Interest**

The authors declare that they have no conflict of interest.

**References**