

peelinglips
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User: *lipshitz*

December 2010, after two weeks in high pollution environment and high-acid diet, following night of binge drinking. Full buildup shown.

April 2013 after course of antibiotics, 7 day peeling cycle, left side peeled, right side shows full buildup

- 32 year-old Caucasian American male, ex-smoker, no known allergies, has lived in high pollution urban centers his whole life, computer user, bruxism and TMJ pain (grinds teeth in sleep), past oral bit nails and cuticles), and often finds himself pressing tongue to roof of mouth and sucking moisture, ridges on nails, recalls having flaky scalp only since the onset of condition, and torus mandibularis developed near onset of condition
- Family history: depression, anxiety, OCD, father has psoriasis
- Condition began winter of 2006-07, possible causes include poor diet, heavy alcohol and marijuana use, dusty house, severe acute anxiety and chronic depression, damage to lips from rough kissing, peeling and biting chapped lips, dental work including mercury filling removal, throat infection treated with 5-day course of Zithromax antibiotics (z-pak); no swelling, no spots, no angular cheilitis or bleeding or pain. Skin on lower lips began peeling, picked at obsessively and licked subconsciously.
- Condition spread to upper lip after prolonged use of chapstick, also following use of vaseline during a dental cleaning, also following second major panic attack and return to heavy drinking and marijuana use
- Stool tested for abnormal amount (3+) of Candida parapsilosis and Staph Aureus (Nov 2008), Stool tested for normal ranges of Candida and S. Aureus (Dec 2009), Saliva tested for within normal range of estradiol and cortisol levels (2007), low Vitamin D, low sodium, low calcium (Jan 2010), Urine tested (after chelation) for high levels of mercury and lead, significant level of thallium (2012), lip culture tested for MRSA staph (April & Sept 2013), culture tested for yeast and staph (Jan 2014)
- **Current status: Not cured, peeling still on both lips, dead skin removes piecemeal fashion -- most growth and cracking of skin appears at the center and side edges of bottom lip, upper lip more difficult to exfoliate**
- **Past therapies with potential effectiveness: Septra DS antibiotics, avoiding contact with acidic food, vinegar or alcohol, Candida (high fiber, no sugar, no alcohol) diet and two-day water fast, moving to new climates, coconut oil, emu oil, avocado oil, olive oil, calendula, hyaluronic acid, raw shea butter**
- **Current treatments: topical treatment: washing lips with antibacterial soap twice a day,**

Mupirocin 2% USP and Betamethasone Propionate on lips twice daily for one week, then only Betamethasone twice a week, leaving most skin on until easily removed or cut with sterilized scissors, supplements: probiotics, bee pollen, L-Carnosine, Vitamin C, Cod liver oil

User: *MontrealHomegrown*

- Photo: Miki G. Lerner, Fox 3000 2013
- **Condition believed to be caused by living a destructive lifestyle all through-out high school; drinking, partying and getting wasted every night, eating a very, very, very poor diet (boxes of chicken nuggets and overdoses of whey weight gainer lol), lack of a proper sleeping schedule, excessive weight training. The list goes on..**
- **TESTED THE FOLLOWING PRODUCTS:** BIO-K, Various High End Probiotics, Herb Pharm Herbal Compounds (tried multiple herbal extracts from this company mainly immune boosters, digestive stimulants), Dr. Natura Colon Cleanse, Dr. Natura Parasite Cleanse, Humaworm (did not take consistently), Liver cleanse pills, Candida pill, + many, many, many more products (including many topical creams)...
- **Also tried:** Water fasting, elimination diet, food combining, lifestyle changes
- Discovered healing protocol

www.exfoliativecheilitishelp.com.pdf

- [Details](#)
- [Download](#)
- 955 KB

: Explains how specialized diet can help slow and stop the peeling cycle in great detail.

- **Current Status:** Doing well, no peeling or irritation anymore unless my diet slips for an extended period of time - then the peeling will return.
-

User: *seattle*

- 33 year old Caucasian American female, from Seattle, Washington, experienced condition for 14 years, convinced condition is autoimmune
 - Condition began following allergic reaction to sunblock, high stress levels
 - Condition worsened with vaseline petroleum jell; stopped using vaseline, lips improved
 - Condition disappeared for two years following corticosteroids and prescription topical anti-fungal, improved temporarily when she had stomach flu and fever, hypothesized increased blood flow/oxygen prevented peeling and inflammation
-

- Condition returned at 21 and 27 years old after suffering allergic reactions to Clinique Moisturizer, tattoo ink and hair dye, developed angular cheilitis for two years; developed resistance to corticosteroids
 - Other Symptoms: lower energy, constant dandruff, though mild. has had dermographism (since childhood), and has recently been diagnosed with low-level sjorgen's syndrome.
 - Allergic to PPD in hair dye, chemicals in antibiotics, corticosteroids, fragrances including Balsam of Peru, Lanolin & other wool alcohols, synthetic flavourings, including cinnamon oil & vanilla
 - No hormonal imbalance, liver or kidney problems, high levels of cortisol, candida or fungal problems; stronger than average immune system.
 - Current status: not cured
-

○ **User: *Bob081***

- Male
 - Condition began in high school junior year 2005, was caused by biting skin off of my lips, condition stayed relatively the same for 5 years, skin sheds every 3-5 days depending upon when I remove it from my lips.
 - Tried just letting it heal on its own but to no avail.
 - Lips would look Similar to user #92305 and *dhammaboy* after a shower with no picking on the lips.
 - Have 0 allergies, excellent health, weight train twice a week for 6 years.
 - Currently on Anti-Depressants for 2 years now (celexia), but did not have an effect on the lip condition.
 - Current Status: (my reason for not having a picture) I had a finger fungus that reacted the same why my lips seem to in water but not as extreme as the original condition was on my fingers. Applying hydrogen Peroxide to my lips to clean, then follow with cotton swabbing fougera Antibiotic Ointment all over my lips 3 times a day (4 days in) My lips have not pealed yet and seem to be retaining the healthy skin without shedding. A little early to tell but I do believe my lips are near cured (Feb 9th, 2010) Will keep posted of my results.
 - Other Thoughts - The Antibiotic Ointment when applied 3 times a day keeps my Lips extremely moisturized, my lips apparent turn for the better could be caused by the abundance of coating of the ointment or due to the antibiotic properties of the ointment itself.
 - Condition before trying ointment - shed every 3-5 days, if left alone skin would become very hard and would detach itself from my lips - addition of water would speed up the considerably - peeling area of the lips was contained STRICTLY where I had bitten off the skin back in high school
 - Habits - would constantly remove the skin layer as to keep a semi normal appearance of normal lips (downside is they would always appear a bit rosy)
-

Jan 2010 - After Vaseline

Oct 2011 - while using steroid ointment

User: *ko50*

- White male, 28 years, California
 - Some anxiety issues
 - Some allergies, has been getting allergy shots
 - No relevant conditions in family.
 - Condition began about 4 years ago following 3rd accutane treatment, worsened very gradually...
 - Symptoms:
 - Day 1) Burning/Tingling Sensation
 - Day 2) Chapping
 - Day 3) Exfoliating
 - ...rinse and repeat.
 - Visited 2 dermatologists who thought he wasn't drinking enough water.
 - Past treatments: Allergy Shots, Vitamin E and B12, stopping all products cold turkey for 2 wks., exfoliating gently 2x per day, using vaseline and a tooth brush, having humidifier in every room.
 - Current treatment: prescribed Protopic, says problem solved
-

April 2008 end of cycle

November 2009 after peeling

User: *dhammaboy*

- **Male,**
 - **Condition began:**
 - **Condition worsened:**
 - **Other symptoms:**
 - **Allergies, Tests done:**
 - **Current status:**

■ Current treatments:

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Curezone username or Anon	oral pathologist	dermatologist	immunologist/ rheumatologist	endocrinologist/ regular doctor	naturopath	Ayurveda, Acupuncture gastroenterologist/ Chinese - medicine ologist	psychologist
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<i>lipshitz</i>	Idiopathic cheilosis (abnormal lips with unknown etiology) with keratotic, crenated alba linea in both mucosae (bite lines inside cheeks)	impetigo (bacteria) suspected and culture taken, presence of staph, strep, and rare gram-positive cocci	negative for Sjögrens, anti-nuclear antibody (ANA) test	low Vitamin D, low sodium, low calcium, normal Vitamin B-12, normal iron, normal magnesium, normal thyroid liver function, low cholesterol, normal hemoglobin, platelets, white blood cells, HIV negative	elevated cortisol & gliadin levels, high level of lead, moderate levels of mercury and thallium, food sensitivities to crab, tuna, shrimp, cranberries, bananas, peas, broccoli, gluten, corn, pineapple, dairy, yeast	Vata body type, insufficient bowel movements, previous Candida parapsilosis overgrowth, but otherwise healthy digestive system	Internal heat, irregular heartbeat	N/A
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<i>seattle</i>	atopic dermatitis, prescribed steroids, prednisone	Sjogren's syndrome, Positive Antinuclear Antibody test	normal hormonal levels, adrenal, thyroid, liver normal, no Vit. B deficiency	high stress and digestive issues manifest on the mouth
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92305	impetiginized cheilitis
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Photos taken in April '13 -- c.s.

Extreme close-up of lower-lip crust after being mashed for the slide.

Close-up of lower-lip crust.

Close-up of lower-lip crust. Coloration not added.

Even closer close-up of lower-lip crust. Coloration not added.

Close-up of lower-lip crust. Fibril may or may not be living.

Close-up of lower-lip crust. Another fibril.

Close-up of lower-lip crust. Closer in on fibril nodule which resembles a knot.

Close-up of lower-lip crust. Color from methylene blue stain. Epithelial cells "look normal."

Close-up of lower-lip crust. Circle most likely water.

Photos taken in Jan '10 -- c.s.

Microscope projection of section of dead lip skin -- note that some areas are thicker than others, explained partly by the non-homogenized growth of skin in the area and lack of constant removal by the sufferer.

Close-up of lower portion of previous section -- note discoloration and skin thickness is much more chaotic at closer view.

Close-up of upper portion of previous section -- Note the fine-ness on that outer edge, could be explained by normal skin death/ exposure to the air.

Peeling Lips Wiki

for people with the condition of chronic, peeling, cracking, fissuring, flaking lips, also known as exfoliative cheilitis, cheilitis exfoliativa, cheilitis glandularis apostematosa, cheilosis, ideopathic cheilosis, seborrheic keratosis of the lips, hyperkeratinization of the lips, labial hyperkeratosis, leukoplakia, eczematous cheilitis, lip dermatitis, Stelwagon's disease, . . .

Guidelines

- Content may be edited that is open for group discussion or research. Major edits should be done in a transparent way with editor's username attached, and users can be aware of changes made to any page they edit by clicking **NOTIFY ME** to follow all changes or changes made per page, or **Recent Changes**, or **HISTORY** on the relevant page.
- Content may be added that describe's a user's condition, treatments, and any relevant information that would be useful to other members of the wiki and the general public.
- Blatant advertising will be regulated by the wiki group, and multi-level marketing schemes like Xango™ will be skewered and deleted especially if user does not have a profile that describes their condition and posts a photo.
- Links to third party websites are the responsibility of the general user to authenticate their relevance and safety, and in no way are the users of the wiki to be held liable for any personal damage, pain, or mental anguish caused by clicking on said links.

Getting Started

- All pages are public and viewable to non-members, however only members can edit pages.
- Click link **Join** in the upper right corner (the link will pop up). The site organizer will promptly enable your access and you can choose a username.
- While logged in, select one of the pages listed in the margin to view its contents.
- Click on the **EDIT** button above to put your own content on this page.
- To post a discussion topic, click on the **DISCUSSION** tab in the center of the page, and the discussion will stay linked to that page for future reference.

Adding pictures

- In order to keep load time down for the wiki, pictures should be posted on the Case Histories page only, high resolution pictures should be hyperlinked. Two medium resolution pictures of just the lip area are recommended, with the lips at their worst state, and lips at their current state.
- While in the **EDIT** mode, select the icon that looks like a landscape painting then select Upload Files, browse for a file on your disk, and click Upload. When you are finished uploading, click twice on the image to insert on the page. Then to resize the image click and drag the upper left corner.
- To center or left justify an image, change the alignment in File Properties.

I Don't understand!!

- Click on the help link above to learn more about how to use our wiki, or contact the site [Organizer](#) for assistance.

List any relevant current research or past studies about our condition or similar conditions (please keep articles in order from newest to oldest):

Exclusive plaque psoriasis of the lips: efficacy of combination therapy of topical tacrolimus, calcipotriol, and betamethasone dipropionate. ([abstract](#))

Sehgal VN, Sehgal S, Verma P, Singh N, Rasool F. Skinmed. 2012 May-Jun; 10(3):183-4.

Psoriasis of the lips: an uncommon presentation of a common dermatologic condition. ([PDF](#) containing both articles)

Blankinship MJ, Tejasvi T, Ellis CN. Skinmed. 2012 May-Jun;10(3):130-2.

Department of Dermatology, University of Michigan Medical School, Ann Arbor, Michigan, USA.

[Dermatologist summarizes most relevant medical findings](#). Dr. Delwyn Dyall-Smith, March 2011

[Exfoliative cheilitis associated with titanium dental implants and mercury amalgam.](#)

Pigatto PD, Berti E, Spadari F, Bombeccari GP, Guzzi G. J Dermatol Case Rep. 2011 December 12; 5(4): 89–90.

Department of Technology for Health, Dermatological Clinic, IRCCS Galeazzi Hospital, University of Milan, Milan, Italy.

[Topical Calendula officinalis L. successfully treated exfoliative cheilitis: a case report](#)

Lúcia Helena Denardi Roveroni-Favaretto, Karina Bortolin Lodi and Janete Dias Almeida Department of Biosciences and Oral Diagnosis, São Paulo State University - UNESP, São José dos Campos, São Paulo, Brazil

November 2009

Oral side effects of isotretinoin chronic intake. ([abstract](#))

Rodrigues MT, Albuquerque DF, Capelozza AL, Faria FA, Santos CF. N Y State Dent J. 2008 Jun-Jul;74(4):36-9. Bauru School of Dentistry, University of São Paulo, Brazil.

- "Mucocutaneous reaction is the most commonly observed adverse side effect of isotretinoin use. The majority of these symptoms are tolerable, treatable and dose-dependent. Cheilitis is the most common manifestation and occurs in virtually all patients who receive isotretinoin therapy ... Cheilitis affects 80% to 90% of patients treated with isotretinoin."

[Case Report of Factitious \(self-induced\) Cheilitis](#)

Erdinc Aydin, Ozgur Gokoglu, Gamze Ozcurumez, and Hakan Aydin. J Med Case Reports. 2008; 2: 29. University of Bashkent, Ankara, Turkey

[Exfoliative Cheilitis: Report of a Case](#)

Journal of the Canadian Dental Association 2007 Sept, Vol. 73, no. 7.

The Diagnosis And Treatment Of Cheilitis ([abstract](#))

Dr. Serap ÖZTÜRKCAN, Dr. Dilek BAYRAKTAR, Year: 2006 Volume: 16 No:4

Dermatoloji AD, Celal Bayar Üniversitesi Tıp Fakültesi, MANİSA

[Psoriasis of the lips: a rare entity](#). S Ersoy-Evans, L Nuralina, G Erkin, O Ozkaya. Journal of the European Academy of Dermatology and Venereology Volume 21, Issue 1, pages 142–143, January 2007

- "Our case was initially treated with topical prednisolone ointment and mometasone furoate cream twice a day for 2 weeks with poor results. Then we switched to topical fluticasone propionate 0.005% ointment twice daily, which cleared the lesions completely in a few days."

[Case report: exfoliative cheilitis managed with antidepressant medication](#). ([abstract](#))
Leyland L, Field EA. Dent Update. 2004 Nov;31(9):524-6.

[Exfoliative cheilitis successfully treated with topical tacrolimus](#)
M. Connolly, C. Kennedy (2004)
British Journal of Dermatology 151 (1), 241–242.

Correlation between Hyperkeratosis and exposure to herbicides ([abstract](#))
Chemikosova TS, Kamalova OA, Ibragimova ZN. Stomatologiya (Mosk). 2004;83(1):14-8.

- "workers engaged in the production of chlorophenoxyherbicides showed high prevalence of diseases of the buccal and labial mucosa with a trend to development of hyperkeratosis (exfoliative cheilitis, hyperkeratosis of the tongue, lips, buccal mucosa (BM), flat form of the BM and red lip leukoplakia)"

Exfoliative Cheilitis: A Case Report and Review of the Literature ([abstract](#))
S. Taniguchia, T. Konob. Department of Dermatology, Osaka City University Medical School, Osaka, Japan
Dermatology 1998;196:253-255 (DOI: 10.1159/000017886)

- review of case studies showed the condition only marginally affects females more than males (13:11), and a majority (62%) were under 30.

[Exfoliative cheilitis \(EC\) in AIDS: association with Candida infection](#)
P. A. Reichart, D. Weigel, A. Schmidt-Westhause, H.D. Pohler
Humboldt-Universität zu Berlin, Berlin, Germany
Journal of Oral Pathology & Medicine 1997, **26**(6):290-293

Diseases of the lips. ([abstract](#))
Rogers RS, Bekic M. Sem Cutan Med Surg 1997; 16(4): 328–336.
Mayo Clinic and Mayo Foundation, Rochester, MN 55905, USA.

- "Exfoliative cheilitis is also a reactive process, probably secondary to factitious activity of the patient."

[Topical vitamin A in exfoliative cheilitis.](#)

Betkerur J. Indian J Dermatol Venereol Leprol. 1996 Jul-Aug;62(4):268-9. Mysore, India.

Exfoliative cheilitis. ([abstract](#))

Daley TD, Gupta AK. Department of Pathology, University of Western Ontario, London, Canada. J Oral Pathol Med. 1995 Apr;24(4):177-9.

- "The etiology is unknown, although some cases may be factitious. Attempts at treatment by a wide variety of agents and techniques have been unsuccessful. Three patients with this disease are reported and its relationship to factitious cheilitis and candidal cheilitis is discussed."

[Exfoliative cheilitis.](#)

Shenoi SD, Srinivas CR, Balachandran C; Sandhya. Indian J Dermatol Venereol Leprol. 1995 Mar-Apr;61(2):132. Manipal, India.

The clinical and cytological characteristics of the oral mucosa in Sjögren's disease and chronic parotitis. ([abstract](#))

Pozharitskaia MM, Makarova OV, Malomud ZP, Kats AG. Stomatologiia (Mosk). 1991 Sep-Oct;(5):36-8.

- "Patients with Sjogren's disease, in contrast to those with chronic parotitis, develop clinically manifest signs of dry exfoliative cheilitis, xerostomia, atrophic changes in the buccal mucosa"

A case of exfoliative cheilitis.

Postlethwaite KR, Hendricks NM. Br Dent J 1988; 165(1): 23

Exfoliative cheilitis – a factitious disorder?

Read PC, Sim R. Int. J Oral Maxillofac Surg 1986; 15: 313–317.

Clinical observation on the treatment of exfoliative cheilitis with traditional Chinese medicine. Lu YT. J Tradit Chin Med. 1984 Dec;4(4):309-11.

Clinical manifestations and diagnosis of cheilitis.

Mashkilleison AL, Kutin SA, Zalkiev RI. Vestn Dermatol Venerol. 1983 Apr;(4):4-7.

Cheilitis caused by photosensitization. ([abstract](#))

Padilla HC. Med Cutan Ibero Lat Am. 1975;3(2):93-102.

- "It is necessary to distinguish between chronic Actinic Cheilitis and the Eczematous cheilitis produced by the photosensitizing action of very well known substances contained in lip-sticks."

Exfoliative cheilitis.

Tyldesley WR. Br J Oral Surg 1973; 10: 357–359.

Pathogenesis, clinical picture and morphology of exfoliative cheilitis.

Pashkov BM, Kutin SA. Stomatologiya (Mosk). 1973 Jul-Aug;52(4):11-3.

[Chronic Inflammation and Desquamation of the Lips](#)

J. M. H. MacLeod. Proc R Soc Med. 1908; 1(Dermatol Sect): 4–6.

[A Treatise on diseases of the skin for advanced students and practitioners.](#)

Stelwagon, Henry Weightman. W. B. Saunders and Company. 1902

P.334-335.

- "Exceptionally the vermilion border of the lips is involved with other parts, and covered with thin or somewhat thick adherent scales or crusts, and it may be attended with a slight or marked tendency to fissuring; there is rarely any puffiness or swelling of the parts, as often observed in eczema of this region. In rare instances the disease is limited to the lips, scarcely extending on to the cutaneous surface, usually with a coexistent eruption of the scalp. In two instances recently under my care it was limited to the vermilion of the lips (cheilitis exfoliativa), neither overstepping the mucous portion of the mouth nor the cutaneous integument, and consisted of persistent and repeated thin exfoliation; there was an associated slight involvement of the scalp in both cases, and in one case transitory mild patches upon the face."
-

A Report of Two Cases of Persistent Exfoliation of the Lips." Stelwagon, Henry Weightman. Jour. Cutan. Dis., June, 1900.

Dermatological Society of London ([abstract](#)). Galloway, James. 1895. British Journal of Dermatology, Vol. 7(4): 113.

Chronic Localized Mucocutaneous Candidiasis/ Candidosis

[WebMD](#)

[DoctorFungus.org](#)

Mucous Membrane Disorders Powerpoint

(KCOM/Texas Dermatology Residency Consortium)

[mucous.ppt](#)

- [Details](#)
 - [Download](#)
 - 716 KB
-

[J Immunol-2008-Gariboldi-2103-10.pdf](#)

- [Details](#)
- [Download](#)
- 822 KB

There are reports of spontaneous healing. That would be nice, but let's list all the other claims of cures for good measure. Please post your username next to any comments you make supporting or refuting claims.

Table of Contents

[Acidophilus Liquid/ Probiotics](#)

[Altabax/ Altargo \(Retapamulin\)](#)

[Aquaphor \(Eucerin\)](#)

[Ayurveda](#)

[aceman reported having the condition of peeling lower lip and inflammation \(initial onset of the latter and periodic remission of the former\) for 8 years before visiting an ayurvedic practitioner in Miami who diagnosed him with "high vata," and prescribed the following: vata digest 1-1-1 1-1-1 = 1 tablet 3x day, Aerand Bhrust Harde 1-1-2, chitrakadi 1-1-1, DermaCare 1-1-1. He later reported being cured of both peeling and inflammation but never posted pics. I've emailed him to follow up. -c.s.](#)

[Betagel \(Bethamethasone dipropionate\) aka Diprolene \(also found in Taclonex\)](#)

[escapist \(aka stepbystep\) posted on Curezone that after having very inflamed lips \(truly exfoliative cheilitis\) a course of topical Betagel plus aloe vera cream did the trick. Betamethasone dipropionate is a immunosuppressive corticosteroid that is similar to prednisolone. escapist stressed the importance of leaving the crust on after applying the steroid to protect the skin underneath. 6 years later returned to forum with no peeling and provided a picture, however there are no pictures of the condition previously. -c.s.](#)

[Blistex Lip Medex](#)

[Calendula officianalis](#)

[Lúcia HD Roveroni-Favaretto, Karina B Lodi and Janete D Almeida conducted a study at São Paulo State University on an 18 year old man who had dry, peeling lips. The man was using corticosteroids and those were discontinued while topical Calendula cream was applied. The authors of the study claimed success and replicating their findings with others. Curezone users contacted one of the doctors of the study, who admitted that the results were not replicated using non-Brazilian Calendula. The doctor also cited stress and emotional issues as a potential factor that must be dealt with. David-ECBlog published his communications with Dr. Almeida here. Several users have pointed out the photos that accompany the case study appear to have been photoshopped, casting doubt as to the authenticity of the results. -c.s.](#)

[Cocoa Butter \(w/ saliva\)](#)

[Colloidal silver](#)

[Dish soap](#)

[Dovonex & Batrafen/Ciclopirox](#)

[Epiceram](#)

[Exercise & Breathing](#)

[Evening Primrose Oil & Fish Oil](#)

[Grapefruit Seed Extract Spray](#)

[Humidifier](#)

[Integrating Healthier Lifestyle/ Detoxing](#)

[Japanese Treatment/ Leaving Lips Alone](#)

[L-Lysine](#)

[Mercury Filling Removal](#)

[#42683 \(aka dfad according to #43555 aka alesiom11\) stated that he or she had the condition of peeling lips for possibly 20 years, since the age of 8 years old. Never posted pics, described lips as having itchy red spots and big pieces of peeling. After trying many treatments with no success, the sufferer decided to remove all amalgam fillings \(also known as silver fillings\). Reported conditions abating after 6 months. User dfad a month later remained on forum claiming 50% progress and considering plastic surgery, then disappeared 6 months later. #42683 blocks email contact, but I have messaged dfad. -c.s](#)

[Oral Hygiene](#)

[Removing Allergen](#)

[SSRIs \(Anti-Depressants\)](#)

[Vaseline](#)

[Vitamin E](#)

Acidophilus Liquid/ Probiotics

- [sans sucre](#) described liver problems, and peeling, cracking, bleeding (but not swollen) lips and a case of thrush (*Candida albicans*), which stopped when she started eating cultured vegetables, aka sauerkraut. Supplemented with pill-form probiotics and Candizyme and the lips remained unpeeled for a month before she left the forum. Never posted pics but said she fought Candida for 5 years. I've written to her to follow up. -c.s.
- badlips ([#68716](#)) claimed on Curezone that applying acidophilus liquid (blueberry flavor, I believe) on her lips and swishing it in the mouth led to her cure. Before trying this treatment, she was applying lip balm that included shea butter, Vitamin E, mineral oil and candelilla wax. Along with the acidophilus, which she applied for a couple weeks, she took a multivitamin with an iron pill daily. Various requests to have her post pictures and her treatment history were rejected. She later reported that when the treatment was discontinued for a while, the peeling returned. The success of this treatment was not replicated by other Curezone users. -c.s.

Altabax/ Altargo (Retapamulin)

- [teacher1](#) described having the condition several times in life, ranging from 3 months to a year's time. They had originally been prescribed Accutane for acne and the condition appeared soon after. They also tested positive for a staph infection, described inflammation and stress, and were diagnosed with impetigo. Altabax is a treatment for impetigo (bacterial skin infections), but GlaxoSmithKline, the manufacturer, says to not use it on the mouth, and that it has not been evaluated for use on mucous membranes. teacher1 described using this topical treatment for three weeks before the condition cleared up. Did not post photos or return to confirm that the condition was permanently resolved or whether there were any adverse side effects. I sent a private message and am awaiting a reply. -c.s.

Aquaphor (Eucerin)

- sugarlump posted on the [Topix forum](#) that they solved their 2 year old problem, of red, cracking and peeling lips, by exclusively applying a small amount of Aquaphor, which contains white petrolatum, twice daily, however, did not post photos or return to the forum to update on changes to the condition over a long period of time, nor to describe what

happened when treatment was discontinued. [Gannondorf](#) described an eight year history with peeling lips most likely as a result of using Accutane, and felt that after a month of constant application of Aquaphor, the condition was solved. He returned weeks later to say that he had not discontinued Aquaphor and there was still some minor peeling. I tried Aquaphor for a couple months and believe that in spite of its short-term cosmetic benefits, it led to worsening of my condition which continued for years afterwards. -c.s.

- [justcured](#) wrote a one-liner cure claim for Eucerin's Lip Aktiv balm but there was no follow-up or photos to confirm. She said she suffered daily from flaky, cracking lips for a year. -c.s

Ayurveda

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Blistex Lip Medex

- Deima posted the same message on several forums that she resolved her problem after four days of using this topical treatment. However, she did not describe the severity of her condition, and did not post photos or return to the forums to update on whether the condition returned after discontinuing treatment. I have personally tried this treatment for over a week and saw no improvement. -c.s.

Calendula officianalis

- Lúcia HD Roveroni-Favaretto, Karina B Lodi and Janete D Almeida conducted a study at São Paulo State University on an 18 year old man who had dry, peeling lips. The man was using corticosteroids and those were discontinued while topical Calendula cream was applied. The authors of the study claimed success and replicating their findings with others. Curezone users contacted one of the doctors of the study, who admitted that the results were not replicated using non-Brazilian Calendula. The doctor also cited stress and emotional issues as a potential factor that must be dealt with. David-ECBlog published his communications with Dr. Almeida [here](#). Several

users have pointed out the [photos](#) that accompany the case study appear to have been photoshopped, casting doubt as to the authenticity of the results. -c.s.

- [mermaid1111](#) claimed to have been cured from calendula ointment (w/ a petroleum base), and used shea butter once her lips had healed. She had been supplementing with Vitamin B Complex, and applied the ointment for three months. However, she never posted pics or described the severity or duration of her condition. -c.s.

Cocoa Butter (not melting)

- [KuNFuZed](#) and [nietzscheilitis](#) both reported that topical application of cocoa butter cured their conditions. Nietzscheilitis described a treatment regime that required frequent licking of the lips followed by application of the cocoa butter. [jp20](#) also described being nearly completely cured with this saliva and, in his case, Burt's Bees lip balm, but said he was reliant on the balm to prevent recurrence of his what was severe case of peeling lips. -C.S.

Colloidal silver

- veryred posted that her lips improved 90% after three days of soaking them in colloidal silver, Mesosilver, and fully cured after that, although she says she continued the soaking treatment every two weeks, and did not post photos or describe the severity or duration of the condition, or return to report on the effect of discontinuing the treatment. -c.s.
- [ec2yrak](#), channel1 and [#64643](#) all reported that colloidal silver soaking did not cure their condition. johng reported using this treatment, and created his own gel using a kit. He argued the silver must be correctly made in order to have its alleged benefits, tissue regeneration and electrical conductivity. There is a fact sheet on [NCCAM](#)'s website that recommends not using it, and lists the risks of colloidal silver:
 - "In humans, buildup of silver from colloidal silver can lead to a side effect called argyria, which causes a bluish-gray discoloration of the skin, other organs, deep tissues, nails, and gums . . . Other side effects may include neurologic problems (such as seizures), kidney damage, stomach distress, headaches, fatigue, and skin irritation.

Dish soap

- The alleged [cure](#) | What Ms. Strong describes here as "clown lips" sounds much more like a fungal/bacterial infection leading to inflammation. She never mentions any peeling, nor does she show any photos. Many Curezone users tried her treatment suggestions, with all claiming some short-term help but eventual drying of the skin and a return to the condition. Furthermore, many sufferers of peeling lips have used Vaseline or Aquaphor (petrolatum) and claimed that it made the condition worse in the long term, myself included. -c.s.

Dovonex & Batrafen/Ciclopirox

- [chris_juno](#) frequently recommended this topical treatment, with synthetic Vitamin D and an antifungal, but cautioned other sufferers that it only helped manage the condition and was not a cure. He reports having Fordyce spots. He continues to hypothesize that the lack of sebum is his problem and is seeking to address that issue.
- [#92305](#), who was diagnosed with "impetiginized cheilitis," claimed to be cured by applying the Ciclopirox followed by the Dovonex twice daily, and using Impruv or Epiceram after the treatment each time. He also reported having Fordyce spots. He admitted still removing white skin in the shower, however, and did not return to forums to describe what happened after discontinuing treatment, or respond to attempts to contact him.

Epiceram

- [dhammaboy](#) and others touted this as an effective way to manage the condition, applying it several times daily. He didn't test whether discontinuing use would make the condition return or worsen. spiralzoid also claimed to be cured although they apply it regularly. The prescription cream is nonsteroidal and touted as an effective way to relieve symptoms of atopic dermatitis by its makers. who also specifically say it should not be ingested or taken internally. -c.s.
- [ab11747](#) reported that after a month of treatment with Epiceram the condition worsened with inflammation and drier lips, and badlips reported that the treatment helped after a couple weeks but then her condition returned even with the treatment. -c.s.

Exercise & Breathing

- [cureforcurezone](#) touted this treatment as a cure but from his [pics](#) he didn't have an extreme case. He believed his condition was stress-related and exacerbated by a cat allergy. However, he was free from stress last he checked in. Exercise and deep breathing can reduce stress. He has returned to post on forums that he remains cured and describes his full treatment process [here](#). A case to think about, to be sure -c.s.

Evening Primrose Oil & Fish Oil

- one of the most viewed cure claims out there, [blessed1](#) reported curing herself of the condition of peeling lips by taking a multivitamin, 500mg of EPO and 1000 mg of fish oil daily. She did not describe how long she had the condition or post photos, but said her peeling cycle was about every 3 to 4 days. She also reported using Neutrogena Instant Lip Remedy at the same time, and did not return to report on the effect of discontinuing either the topical treatment or the supplement regimen. -c.s.

Grapefruit Seed Extract Spray

- Jacques reported on the [Topix forum](#) that applying Grapefruit Seed Extract (GSE) made by Nutribiotic worked to clear his condition, but did not post photos or describe the severity or duration of his condition, other than to say the lips peeled. GSE is a

microbicide that needs to be diluted before applying to the lips, when users have described it as burning and worsening the condition. Other microbicides, such as coconut oil, have less caustic effects. I tried the GSE treatment for weeks in conjunction with Aquaphor, and have not tried it since my condition worsened at that time. -c.s.

Humidifier

- [naeher](#) reported that after a year with the condition of inflamed, cracking and peeling lips, using humidifiers in the whole house cleared the condition within a week and it has not returned. She claims not to have taken pictures of her lips during the time of the condition but has posted her "cured" appearance [here](#). -c.s.

Integrating Healthier Lifestyle/ Detoxing

- [Getoffyourass](#) said they were "basically cured" by first eliminating food intolerances to relieve stress on the immune system, then following a healthy diet, getting exercise, and taking nutritional supplements including niacin, which they felt had the greatest effect. Never posted pics or returned to the forum, but said the healing process wasn't overnight and there was some relapse. -c.s.
- [bunny9dog](#) followed a program of frequent coffee enemas and liver flushes, food avoidance, food combination, juicing, and acupuncture and recommended the treatment for at least 6 months. Reports still being cured of peeling lips a year later. -c.s.
- [montrealhomegrown](#) believes that the root cause of the condition must be addressed and that medicines or topical treatments will only mask the symptoms. He has also posted pics on the [Case Histories](#) section of the wiki where you can also find a PDF of his protocol. -c.s.

Japanese Treatment/ Leaving Lips Alone

- [monsterlip](#) reported seeing significant progress by not applying any lip balms, and washing the lips with soap. Has not posted photos, and a year ago reported peeling but in a smaller area. Many sufferers have attempted to leave the lips alone for long periods of time with a wide variation of levels of success. [b4byfac3](#) reported leaving their lips alone for 10 years and the peeling remained. -c.s

L-Lysine

- [#88621](#) reported a combination of 2000mg/day of L-Lysine and Vitamin B supplements cured them, but was also exfoliating regularly and using a hand cream combined with Vaseline. Took 6 months of the treatment for the lips to not peel without relapsing. Did not post photos. Said their condition was most likely viral, a reaction to antibiotics, or stress-related, but not caused by lip-biting. -c.s.

Mercury Filling Removal

- [#42683](#) (aka dfad according to [#43555](#) aka alesiom11) stated that he or she had the condition of peeling lips for possibly 20 years, since the age of 8 years old. Never posted pics, described lips as having itchy red spots and big pieces of peeling. After trying many treatments with no success, the sufferer decided to remove all amalgam fillings (also known as silver fillings). Reported conditions abating after 6 months. User dfad a month later remained on forum claiming 50% progress and considering plastic surgery, then disappeared 6 months later. [#42683](#) blocks email contact, but I have messaged dfad. -c.s

Methylsulfonylmethane (MSM)

- [borntoknow](#) said that taking MSM in combination with iron powder stopped their cracked and peeling lips. Provided suggestions on dosage on topical application, but did not specify which approach they used or provide pictures. -c.s.

Oral Hygiene

- [the1withthecure](#) posted that after using a mouthwash called Periogard and addressing his gingivitis, and applying fish oil directly on the lips, the condition of cracked and peeling lips went away after two weeks. He did not post photos or respond to questions about the origin or duration of his condition, however at least a couple medical studies do mention oral hygiene as a possible factor in peeling lips, so logically it ought to be addressed to rule it out. -c.s.

Removing Allergen

- [wgb](#) had the condition for about a year. Determined an allergy from Boots tea tree antiseptic cream, an AHA face lotion, and several food sensitivities. She also was using pure glycerin diluted with water 3 times a day and EOS organic lip balm twice a day when she reported being 99% "cured." She declined several request to share photos, but described a very rapid cell turnover rate with associated pain and fluids. -c.s.
- [#112235](#) stopped using Sodium Laurel Sulphate (SLS) products and began brushing her teeth with baking soda. She claimed to be completely cured in a month's time, also applying Spectrojel eczema cream and glycerin on her lips. She said the condition did not return for three weeks after discontinuing topical treatment. -c.s.

SSRIs (Anti-Depressants)

- [Leyland L](#), [Field EA](#). Case report: exfoliative cheilitis managed with antidepressant medication. (Dent Update 2004 Nov;31(9):524-6)[alesiom11](#) reported no progress after three months on the anti-depressant Zoloft.
 - --No further studies on long-term consequences of "management" -c.s.

Vaseline

- the primary active ingredient is petrolatum, one of the most commonly recommended

topical treatments by dermatologists and other quacks who don't comprehend the chronic nature of the condition. Other ingredients depend on the type of Vaseline, and none of them can be found listed on the maker's website. -c.s.

- [ko50](#), a former Accutane user, reported years ago that after stopping all other treatments for two weeks, simply applying Vaseline cured his condition, however he was also exfoliating the soggy dead skin with a toothbrush a couple times a day. Posted a couple photos, and recently returned to Curezone saying he was prescribed Protopic by his dermatologist and has not described his condition or the long term effects of the Vaseline. -c.s.

Vitamin E

- a very widely discussed home remedy for chapped and peeling lips, many sufferers have reported benefits from direct Vitamin E gel application to the lips, but there is no ability to verify any claims of chronic, peeling lips having been cured by this application alone. Apparently there is a difference between natural and synthetic Vitamin E, with some suggesting that the body recognizes only the d-tocopherol form and that the synthetic (dl-tocopherol acetate) form actually inhibits the d form from entering the cell membrane. -C.S.

Please be as descriptive as possible

Curezone username	peeling cycle speed	peeling area	inflammatio n (redness or swelling)	appearance (include colors, fluids, shape of dead skin)	texture	irritation	other skin conditions
<i>lipshitz</i>	ranges from every 6 days to every week	lower lip, spread to upper lip, middle inverted triangle on upper lip is peeling less	N/A	turns white when contact with water, yellow when contact with food, brown when contact with red wine or balsamic vinegar	hard build-up of skin, cracking and fissuring closer to center and sides	N/A	Medium size flakes (not specks) fall off scalp if scratched, hard non-growing nodule at the base of the inside of the gums
<i>seattle</i>		small flakes on entire surface of lip	swelling and redness	cracking, oozing, occasional bleeding, grey flakes of dead skin		minor itching	Mild dandruff, der mographism
<i>bob081</i>	around 3 to 4 days	most of lower lip, middle of the upper lip (philtrum)	N/A	lips appear normal at beginning of the cycle, if left alone will become hard, become a white color when exposed to water, when the skin on the lips dry will often curl up and	smooth, hard surface (contained to only 1 layer of skin) cracks if left alone or without moisture	N/A	common enemy seems to be water. Had a finger fungus that would do the same thing as my lips, would turn white and detach from my fingertips (treated with a anti-fungal

try to detach from the healthy skin. Upper lip recently becomes dyed brown when drinking coffee.	cream) current hypothesis that this COULD be the same case
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Type in the content of your page here.

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user	current treatments (include dosage of supplements and duration of diets)	[other] supp's tried in past (include dosage if possible)	diet (include length of time)	[other] topical tried: cha psticks, creams, moisturizers, oils (include duration)	steroids: hydrocort. (include duration)	[other] topical tried anti-fungal (include duration)	[other] ingested anti-fungal and probiotic	organ cleanse	alt. therapies
lipshitz	*MRM M ultiminera l replete *5mg biotin *triphala, *olive leaf extract *regular a pplication of lip balm {cacao butter, argan oil, coconut oil, castor oil, jojoba oil, CoQ10}; *2x/week sauna visits *1x/day a pplication of 10% solution of L-Carn osine, Vitamin C and MSM after washing with EO soap	M Evening Primrose Oil, Melat onin; Vit. A, C, E; Fish Oil; Vit B Sub lingual; Zinc; Calcium- Magnesi m- Zinc, Carlson fish oil multi n diet (3 weeks), allergen avoidance (8 months), gluten-fre e (8 months); ultra low- glycemic and allergen avoidance diet (2 months)	2 days lemon water fast +eliminati on detox diet, 2.5 months on Candida diet, 3 months on Candida diet +prob iotics, 9 months on low-acid diet, paleo elimination diet (3 weeks), allergen avoidance (8 months), gluten-fre e (8 months); ultra low- glycemic and allergen avoidance diet (2 months)	Avocado oil and .13% met hylcobala min applied topically 2x/day (1 month) Calendula oil (+3 weeks); Coconut oil (+8 months); Hyaluroni c acid and emu oil (6 months); Shea butter (2 months) Aquaphor (2 months); Emu oil (3 weeks) Burt's Bees; Vitamin E Gel (+2 Months); Aloe Vera Gel (+5 months);	N/A	Clotrimaz ole 2% (1 month, 2 weeks); Seed Grapefruit Extract (2+ months); Seed Fluconazo Extract (3 weeks); Nystatin Liquid (1 month)	Grapefruit Seed Extract (2+ months); and Triphala and Psyllium Husk (2 weeks); Caprylic Acid (+3 months); Garlic (+4 years); Shiitake and Maitake mushroo ms; Acido philus (+2 months); Cumin; Turmeric; bee pollen (+1 year)	bowel cleanse with fiber, Triphala and Psyllium Husk (2 weeks); Caprylic Acid (+3 months); Garlic (+4 years); Shiitake and Maitake mushroo ms; Acido philus (+2 months); Cumin; Turmeric; bee pollen (+1 year)	mango- steen juice (1/4 cup daily for 2 months); throat humidifier directed at closed mouth, exercising for stress reduction, humidifier in bedroom, acupunctu re (1 month), Chinese a nti-anxiet y herbs (1.5 months), dry sauna, metals chelation, hot yoga

				L-Lysene Balm; Blistex Medicated Ointment (2 weeks); Lanolin (1x); Royal Jelly (2 weeks)			
seattle	Impruv, vit. Eco-lips a,b,c,k, Organic spirulina, lip balm fish oil, (no zinc, beeswax) copper, ginseng, turmeric	gluten-free idel, oral e diet, protopic, steroids, with no prednison high caffeine, e, potency alcohol, florasone, topical or red calendula, cortisone meat (3 cellfood weeks) oxygen gel, various hy poallergen ic moistur izers			prescribed antibiotics anti-funga, predniso l, lemon ne, H1 H2 juice blockers	liver flush sauna visits; hot yoga; humidifer with essential lavender oil	regular
Bob081	fougera - double antibiotic ointment (3 times a day evenly spaced out) Iron suppl ements			Burt's Bees Blistex Grapefruit seed extract (1 week)			
92305		low carb, low acid forming diet					
montreal homegrow n	strict dietary regime,						regular exercise including

avoidance
of
chemicals
and preser
vatives

abdominal
work,
breathing
technique
s, stress
reduction
technique
s

Matt M	NO ointments or any other topicals, no exfoliation, just trimming edges as needed	Multivit., B complex, milk thistle	No gluten diet, low carb diet, Lots of fresh veggies and fruits, Very limited sugar intake, Limited dairy, 1 gallon of water per day (almost 4 weeks)	Chapstick s (I think the original cause in conjunction with frequent mild dehydration), Aquaphor, Veriply, Prescription strength anti-bacterial ointment (1 week), Elidel (7 days)	.2% hydrocortisone (3 days)	Over the counter clotrimazole 2% (2 weeks)	Fish Oil - None daily, Vitamin D - capsule daily, Probiotic - one capsule daily, allergy shots for seasonal tree pollen, dust, grass, and mites,	Humidifier at night, regular exercise, stress reduction techniques
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Online forums where sufferers have discussed their cases:

- [Curezone](#) (most trafficked forum, thread began around 2002, searchable archives, if you like needles and haystacks, has Image Gallery with high-res photos)
- [Wrong Diagnosis](#) (second most trafficked, thread began in 2007, no photos -- be wary of Blistex "cure" as message is cut-and-pasted across multiple forums, Epiceram cure claim)
- [Health Boards](#) (closed, ran from 2003-05, 200 posts, mostly discussion on lip management, gender of users listed, no photos)
- [Topix](#) (under 100 posts without photos, notable microbicidal cure claims: Grapefruit Seed Extract, Poly Bacitracin with Hydrogen Peroxide)
- [Exfoliative, Idiopathic, Factitious Cheilitis, Peeling Lips Forum](#) (run by a sufferer, sixteen case histories, no photo)
- ["Official" Exfoliative Cheilitis page](#) (15 case histories, photos, and a forum, run by former Curezone user *cureforcurezone*, who believes not applying anything to the lips was what led to his cure among other things)
- [Excheilitis.com](#) (message board with 36 partial case histories and no photos, run by Curezone's Peeling Lips forum moderator and long-time sufferer user #64643)
- [Daniel Miller's Blog](#) (detailed blog -- pictures, video, charts, oh my! -- of a sufferer of over 4 years who believes excess use of chapstick and forced removal of dead skin caused condition, and wetting lip skin without removing it is the solution to his condition)
- [MedHelp](#) (dermatologist claims psoriasis does not affect lips, and is challenged by a sufferer of psoriasis that spread to lips)
- [Female First](#) (Eucerin Lip Aktiv cure claim)

Wikis:

- [WikiHow Cure Claim](#)
- [Chapped Lips](#) Wikipedia entry
- Idiopathic exfoliative cheilosis Wikipedia entry
- [Angular cheilitis](#) Wikipedia entry
- [Actinic cheilitis](#) Wikipedia entry
- [Exfoliative cheilitis](#) Wikipedia entry

Social networks:

- [Twitter](#)
- Facebook (contact [David](#) for invite)

Accutane (Isotretinoin)

- aka Roaccutane, Accure, Aknenormin, Amnesteem, Ciscutan, Claravis, Clarus, Isohexal, Istretinoin-A, Isosupra, Isotane, Isotroin, Oratane, Atretin, Nimegen, Acnotin, Ruatine and Sotret; a derivative of Vitamin A, used to treat Harlequin-type ichthyosis and acne vulgaris
- A significant number of sufferers of chronic peeling lips reported being prescribed Accutane for acne therapy
- Tretinoin irritates the skin and causes the cells of the skin to grow (divide) and die more rapidly, increasing the turnover of cells. The number of layers of cells in the skin actually is reduced. In patients with acne, new cells replace the cells of existing pimples, and the rapid turnover of cells prevents new pimples from forming.
- Adverse effects include drying of mucous membranes and permanent thin skin, birth defects for fetuses, and possible links to depression, irritable bowel disease, Crohn's disease and ulcerative colitis
- Interaction risks with Vitamin A supplements and tetracycline antibiotics

Aldara/ Zyclara (Imiquimod)

- an immunosuppressant, used to treat actinic keratosis and basal cell carcinoma
- side effects include treatment area reactions such as redness, swelling, itching, burning, pain/tenderness, thickening/hardening of the skin, peeling/flaking/scabbing/crusting, or leaking a clear fluid.
- users are at increased risk of infection due to the dampening of the immune response
- lilo96 who allegedly had HPV on the lips reported being cured after using Zyclara, however users js1123 and Healing2021 reported an adverse reaction, you can access their conversation [here](#)

Colloidal silver

- Colloidal silver is a suspension of submicroscopic metallic silver particles in a colloidal base. It is used in hospitals as a disinfectant, and by alternative practitioners and individuals as an anti-bacterial solution to a variety of conditions.
- According to NCCAM, "in humans, buildup of silver from colloidal silver can lead to a side effect called argyria, which causes a bluish-gray discoloration of the skin, other organs, deep tissues, nails, and gums. Argyria is permanent and cannot be treated or reversed. Other side effects from using colloidal silver products may include neurologic problems (such as seizures), kidney damage, stomach distress, headaches, fatigue, and skin irritation. Colloidal silver may interfere with the body's absorption of some drugs, such as penicillamine, quinolones, tetracyclines, and thyroxine."
- This [article](#) describes a death said by the authors to have been caused by repeated ingestion of colloidal silver.

Hydrocortisone

- Commonly prescribed by dermatologists when faced with chronic peeling lips, this treatment has

been reported to have reduced pain, swelling, and irritation

- Hydrocortisone is only recommended for short treatment periods and must be discontinued
- Many users report after discontinuing treatment that peeling returned and was worse
- Some users report that the rate of peeling increased due to hydrocortisone
- Topical corticosteroid use may inhibit local immune response rendering the skin more susceptible to infections.
- Local adverse effects of hydrocortisone application may commonly include burning, itching, or irritation. Long-term use of potent topical corticosteroids may result in skin atrophy and thinning.

Protopic/Elidel

- aka [tacrolimus](#) and [pimecrolimus](#) ointment respectively, aka Prograf
- A steroid-free immunosuppressive treatment for eczema (atopic dermatitis), works by inhibiting T-cell production of interleukin-2
- In 2005 the FDA required the manufacturers to include a warning that it may pose a risk of skin cancer and non-Hodgkins lymphoma; Novartis sold rights to produce Elidel to Meda after facing several lawsuits
- Long-term safety of the products are unknown, and they are recommended only for short-term usage
- One [user](#) reported initial burning sensation with Protopic, and a slight expansion of the area where the lips peeled; another [user](#) reporting an increase in the rate of peeling after using Protopic

Triclosan

- Commonly found in anti-bacterial soaps
- Reports have suggested that triclosan can combine with [chlorine](#) in tap water to form [chloroform](#) gas
- A 2006 study concluded that low doses of triclosan act as an [endocrine disruptor](#) in the North American bullfrog. The hypothesis proposed is that triclosan blocks the metabolism of thyroid hormone, because it chemically mimics thyroid hormone, and binds to the hormone receptor sites, blocking them, so that normal hormones cannot be utilized.
- An article discussing the Triclosan debate can be found [here](#)
- Some users noted that it helped exfoliation, and made the lips extremely dry, requiring moisturizer, but only one case is reported to have "cured" the condition and reduced inflammation (google "clown lips cure")

There is none. Here we can write our rough draft for the disambiguation from angular cheilitis . . .
