Benign familial chronic pemphigus
HaileyHailey Disease
Familial benign pemphigus is inherited as an autosomal dominant trait, with a family history obtainable in about two-thirds of patients. Only very few instances of mucosal lesions have been reported, of the mouth, the labium majora, and the esophagus.
Histopathology.

Although, as in *Darier's disease*, early lesions may show small suprabasal separations, so-called lacunae, fully developed lesions show large separations, and elongated papillae lined by a single layer of basal cells protrude upward into the bulla.
narrow strands of epidermal cells proliferate downward into the dermis. Many cells of the detached stratum malpighii show loss of their intercellular bridges; thus, acantholysis affects large portions of the epidermis.

Individual cells and groups of cells usually are seen in large numbers in the bulla cavity. Despite the extensive loss of adnexal structures, the hair and sweat glands are usually present.
Differentiation of familial benign pemphigus from Darier's disease as a rule is not very difficult, because it is based on two points: the presence of an intraepidermal bulla and dyskeratosis. The suprabasal region; and dyskeratosis consisting of the formation of corps ronds and grains is much more evident.

Pemphigus vulgaris often resembles familial benign pemphigus to a striking degree, and in some specimens, histologic features of Darier's disease may be found. However, the presence of a suprabasal bulla and dyskeratosis almost always permits the differential diagnosis without the need for immunofluorescence.
There used to be much discussion as to whether familial benign pemphigus represents a vesicular variant of Darier's disease.
Evidence against a relationship is also shown by the fact that in affected families, always only one of the two diseases is found. For example, Hailey-Hailey disease is associated with a mutation in chromosome 3q, while Darier's disease is due to a mutation in the ATP2A2 gene on chromosome 12.
Many of the cells of the stratum malpighii that have lost all or most of their intercellular bridges show a fairly normal cytoplasm and a normal nucleus in which mitotic activity has even been observed. Some of the acantholytic cells, however, have a homogenized cytoplasm, suggesting premature partial keratinization. In other cases, the keratinous content appears to be extruded from the cell, giving rise to keratinous globules. Occasionally, a few corpus ronds are present in the granular layer.

**Differential Diagnosis**

Histologically, familial benign pemphigus shares certain features with both Darier's disease and pemphigus vulgaris. In Darier's disease, acantholytic cells show dissolution of intercellular bridges and formation of intracellular keratinous globules. In pemphigus vulgaris, suprabasal separation of the epidermis caused by acantholysis and resulting in lacunae or bullae and villi formation.