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New possibilities for prolonging remission with vitiligo

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The article discusses the necessity of prophylactic measures after successful completion of vitiligo treatment aiming to prevent the recurrence of the disease. Based on the available scientific data, the complex of measures for prophylactics is suggested. Observations of 298 vitiligo patients after treatment are presented, which confirm efficiency of the proposed measures which allowed for reaching remissions of more than 4 years in 42% of patients, with the maximal remission length being 9.5 years. NB-UVB phototherapy has been complexed with balneotherapy and pharmaceuticals for 298 vitiligo patients with depigmentation of more than 15% of body surface area. Clinical success (repigmentation 95%-100%) was observed in 19 (6%) of the patients, significant improvement (repigmentation from 50% to 95%) was seen in 178 patients (60%). Improvement (repigmentation ranging from 15 to 50%) was observed in 96 patients (32%), and lack of clinical effect (repigmentation less than 15%) was noted in 5 patients. The average number of phototherapy sessions was 97 ± 9 , cumulative NB-UVB dosage was $82.37 \pm 4.46 \text{ J/cm}^2$. The duration of phototherapy course was on average 15 months. 22 surgical transplants were performed: transplantation of a suspension of uncultivated epidermal cells - keratinocytes and melanocytes and transplantation of a suspension of uncultivated cells of the outer root vagina of hair follicles.


Results: repigmentation of 95% -100% was observed in 7 (32%), repigmentation of 50% -95% was in 10 (45%), repigmentation

of 15% -50% in 3 (14%) and repigmentation to 15% - was in 2 (9%). Currently, the main goal of this treatment is to stop the disease from progressing and to make it stable while regressing clinical signs of vitiligo (depigmentation). Besides that, lengthy treatment, significant spending and anxiety of a patient to return back to the past condition require to search for novel prophylactics measures. which, in turn, can lead to vitiligo recurrence. This further points to the necessity of continuing treatment. The view of photo-immunology has changed over the past several years (Ullrich and Byrne, 2012). The mechanisms involved are much more complex than initially thought. Low/physiologic doses of UVR inhibit the adaptive immune system but induce parts of the innate immune system. This is in line with the fact that ambient solar exposure is crucial and physiologic. Thus, it is fair to speculate that a certain level of constant immunosuppression by daily solar exposure may prevent the induction of such adverse immune responses, but this must be confirmed by future studies (Schwarz T, Beissert S, 2013).

Speaker Biography

Kassymkhanova heads the Physiotherapy Department of the Regional Dermatovenereology Center of South Kazakhstan. She has been actively involved in vitiligo research since 2004. Dr. Kassymkhanova published over 20 papers and received two patents for vitiligo treatments. A tireless patient advocate, Aliya chairs the Vitiligo School - a local patient education and support group she founded in 2005.

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