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Narrow Band (500-600nm) Light For the Treatment of Poikyloderma of Civatte- a Pilot Study

Background

An IPL (Intense Pulsed Light), was first introduced to the market at the early 90's. IPL is based on Xe filled flash lamps (with filling pressure from 400-2000 torrs) and a long pass filter to filter the UV light and shorter wavelengths.

The cut-off wavelength depends on the indication used: Short (500-550 nm) for vascular treatment ,longer wavelength are generally used for pigmentation (550-600 nm) and for hair removal

(600- 700 nm). The upper range of the wavelength bandwidth is up to 1200 nm with air cooling IPL's and 1000nm for water cooling IPL's (since water absorbs light above 1 um).

The aim of the study was to evaluate the effectiveness of IPL using cut-off and cut-on filters (band pass) in the limited range of 500-600nm , for the treatment of the vascular component of Poikyloderma of Civatte.

Study

12 patients, all women, Poikiloderma of Civatte on chest and neck were treated repeatedly with IPL 500-600nm bandwidth, 10-12 j/cm². The patients received a mean of 4.5 treatments (range 4-6) at 6-8-weekly intervals. They were evaluated via clinical observations photographs that were taken before and three months after the last treatment. The outcome of the treatments was evaluated by two dermatologists, according to four categories: no improvement, slight improvement, moderate improvement and significant improvement.

Results

7 patients achieved a significant improvement, 3 Had a moderate improvement and two patients had only a slight improvement.

No side effects were observed beside slight , transient erythema.

Conclusion

500-600 nm bandwidth is effective and safe for the treatment of poikyloderma of civatte on the chest and neck.

Clinical Abstract Information:

non_blinded_no__ontrol

single_site

Number of Subjects in the Study: 12

Follow - Up: Longest 3 months

Does Abstract involve a minimum of 20 human subjects? No

Clinical Evaluation Assessment:

Number of assessors 2

Number of assessors that were blinded to treatment protocol 1

.Was the assessment done using side by side photography? Yes

If yes, did the assessors know which image was pre and post treatment? No

Was the assessment done by grading each photograph separately without knowing pre or post treatment? Yes

Histology? No

FDA Approved: No

Off Label Use: False

Human Subjects Used: No

Animl Subjects Used: No

Control Method: non_blinded_no_ontrol

Other Control Method:

Location: single_site

Study Design: Prospective