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## Dermatoses associated with homocysteine treated with high dose folic acid, vitamins B6 and B12

Published reports show daily folic acid (FA) (5-7 mg) with vitamins B6 (100 mg) and B12 (1000 mcg) improves psoriasiform contact dermatitis and palmar plantar pustulosis. Psoriasis cases have been published and presented some also shown that flared on 1-2 mg daily FA, B6 and B12 yet improved when the folic acid dose was increased to 4-7 mg. 5 mg FA, B6 and B12 were added to patients on 16 weeks of Adalimumab, 2 of 7 patients' psoriasis worsened. Both had body mass indices under 24 and baseline vascular endothelial growth factor levels ≥140 pg per ml. Lower doses of FA can be pro-inflammatory through creation of monomeric endothelial NOS. High doses can be anti-inflammatory through anti-inflammatory conjugated eNOS, BH4 recycling and deactivation of peroxynitrite derived radicals. Homocysteine (Hcy) reduces expression of VEGF-A and VEGFR-2. Reducing Hcy with 1-2 mg daily FA may promote psoriasis by allowing VEGF effect to act unopposed. Reducing or stopping these high FA doses may place a patient at risk for comorbid events due to the passage through pro-inflammatory FA levels. The safety of stopping this therapy requires study.

## **Biography**

Peter Jerone Aronson has completed his MD from The Pritzker School of Medicine, the University of Chicago and a Dermatology Residency and Dermatopathology Fellowship from the University of Chicago. He is the Supervisor of the Dermatology Section, John D. Dingell Veterans Administration Medical Center, Detroit, MI. He has published 8 papers, 12 case reports and three review articles and has also published a chapter in dermatology textbook.

aa4722@wayne.edu