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Narrow band-ultraviolet B and psoralen plus ultraviolet A in mycosis fungoides therapy: A retrospective study

Mehmet Unal

Konya Numune Hospital, Turkey

Statement of the Problem: The efficiency of narrowband ultraviolet B (NB-UVB) and psoralen plus ultraviolet A (PUVA) in treatment of mycosis fungoides (MF) was evaluated.

Methodology & Theoretical Orientation: 61 patients diagnosed with MF treated with NB-UVB or PUVA were studied retrospectively. Gender, age, time of diagnose, duration from initial lesion/lesions to diagnose and treatment, lymphadenopathy, MF stage, phototherapy regime, systemic agents, mean time to complete remission (CR), mean number of treatment to CR, mean irradiation dose to CR, mean duration of maintenance therapy, mean relapse-free interval, relapse rate, total follow-up duration, adverse effects during treatment and comorbidities obtained from patients dermatological charts were recorded.

Findings: Our results indicate that NB-UVB and PUVA have similar conclusions in treatment of early-stage MF. Mean-time to CR and mean duration from CR to relapse was shorter for patients who treated with NB-UVB than PUVA group. CR rate was lower in stage 2A. Combination of systemic agents with phototherapy did not have a statistically significant impact as expected.

Conclusion: At the end of our study, we observed that NB-UVB and PUVA are useful and have acceptably good results in patients with early-stage MF. Mean-time to CR and mean duration from CR to relapse was shorter for NB-UVB group.

dr.munal1101@gmail.com

Alopecia Areata

Abdulmajeed M Alajlan, Mohammed Eid Alqahtani and Khalid Abdullah Binown

King Saud University, KSA

Introduction: Alopecia areata (AA) is an inflammatory autoimmune disease that has variation in severity ranging from simple well circumscribed small area of hair loss to persistent baldness. It is relatively a common disease with a lifetime incidence of approximately 2%. Despite how important and common is this disorder, there was no studies found in the literature regarding the prevalence of alopecia areata in Saudi Arabia.

Methods: The study design is quantitative, observational, cross sectional study based on an online Arabic questionnaire. The questionnaire was distributed online through social media (twitter, Facebook, etc) targeting people who lives in Saudi Arabia. The questionnaire contains questions such as age of onset, affected body part, type of treatment and family history of the disease. The sample size is 4706 with confidence interval of 95% and precision of 0.004 from the worldwide calculated lifetime incidence 2% of AA.

Results: Of the 5365 patients who were included in our study, 747 (14%) patient had alopecia areata at least once in their lives. The majority of the affected people had the disease when they were at the age of 16-20 years old (24%). The male to female ratio in the affected population is 1:1. Most of the recovered patients used herbal medicines (17%) followed by localized injections and topical creams respectively. 36% of the affected population had at least one first degree relative with AA.

Conclusion: In comparison with the worldwide calculated lifetime incidence of AA (2%), we have significantly higher numbers (14%).

mohammed.qahtani@hotmail.com