

THERAPEUTIC ABSTRACTS

Bone Densities in Patients Receiving Isotretinoin for Cystic Acne

Sancy A. Leachman, MD, PhD; et al

A loss of bone density occurring in the absence of measurable alterations of calcium metabolism is likely to be a direct effect of retinoids on bone. Further study of retinoid-induced osteoporosis in humans and of bone density in patients with cystic acne is needed.
Arch Dermatol. 1999; 135:961-965.

Fluconazole 50 mg/day therapy in the management of chronic paronychia

B. Amichai and J Shiri

Results show that a 50 mg/day fluconazole is both effective and safe in the management of chronic paronychia.

J Dermatol Treat. 1999; 10:199-200.

Tetracycline and Epidermolysis Bullosa Simplex: A New Indication for One of the Oldest and Most Widely Used Drugs in Dermatology?

Jo-David Fine, MD, MPH

Father and son affected with the Dowling-Meara subtype of EB simplex. Tetracycline was initially given to the son with acne vulgaris, the author noted dramatic reduction in both blister counts and skin mechanical fragility. A dose dependent response was observed, with the best response noted at a dosage of 1500 mg/d. An identical response was observed in the affected parent. Of important, a long standing benefit was observed, with recurrence of disease activity as the dosage of tetracycline was reduced.

Arch Dermatol. Vol 135, Aug. 1999.

Topical treatment of nail psoriasis with a new corticoid-containing nail lacquer formulation.

R Baran¹ and A Tosti²

Topical treatment of nail psoriasis is complicated by the fact that classical topical drugs formulated for the treatment of skin diseases are not adapted for optimizing drug penetration into and through the nail plate. A new formulation was investigated in two double-blind placebo-controlled studies performed in two centres. The trial formulation contained 8% clobetasol-17-propionate in a colourless nail lacquer vehicle. A therapeutic response was clearly demonstrated and was directly related to the length of treatment.

J Dermatol Treat. 1999; 10:201-204.

Patients with Chronic Leg Ulcers Show Diminished Levels of Vitamins A and E, Carotenes and Zinc.

Adriana I. Rojas, MD and Tania J. Phillips, MD, FRCPC.

Patients with chronic leg ulcers have low levels of vi-

amins A and E, carotenes, and zinc. Nutritional deficiency or increased consumption of nutritional elements in these patients may influence wound healing rates.
Dermatol Surg. 1999; 25:601-604.

Perianal candidosis-a comparative study with mupirocin and nystatin

Peter M. de Wet et al,

Both agents eradicated Candida, the major difference being the marked response of the diaper dermatitis to mupirocin. Mupirocin should be applied topically 3-4 times daily or with each diaper change and is an excellent antifungal agent.

International Journal of Dermatology 1999. 38:618-622.

Melkersson-Rosenthal syndrome treated with sulphasalazine

P Varela¹, E Silva et al,

Sulphasalazine seems to be an efficient treatment in MRS, although controlled studies are necessary, which also do not exist for the other proposed treatments for this syndrome.

J Dermatol Treat. 1999; 10:101-104.

Mycophenolate mofetil: A new therapeutic option in the treatment of blistering autoimmune disease.

Marcella Grundmann-Kollmann, MD, et al.

MMF monotherapy may be effective for patients with severe pemphigus vulgaris and bullous pemphigoid. In addition, MMF monotherapy, at least over the short term, offers the advantage of fewer side effects in comparison to immunosuppressive combination therapy and was well tolerated by patients.

J Am Acad Dermatol 1999; 40:957-60.

Treatment of pityriasis rubra pilaris: a retrospective study of 14 patients.

V Chapalain, M Beylot-Barry, MS Doutre and C Beylot

Retinoids should be considered a first-line treatment at an initial dosage of 0.5 mg/kg per day. Methotrexate has to be the second-line treatment, at an initial dosage between 15 and 25 mg/week, in cases of inefficacy of retinoids, or the first alternative treatment when retinoids are contra-indicated, especially in older patients.

J Dermatol Treat 1999; 10:113-117.

Successful treatment of dermatitis herpetiformis with bath PUVA.

T. Gambichler, S. Menzel, E. Maushagen

A good clinical response and a remission of 4 months was achieved by bath PUVA alone for DH.

Journal of Dermatological Treatment. 1999; 10:149-150.

Equivalent Therapeutic Efficacy and Safety of Ivermectin and Lindane in the Treatment of Human Scabies.

Edgardo N. Chouela, MD et al.

Ivermectin is as effective as lindane for the treatment of scabies. Ivermectin is simpler to use and, therefore, is a promising tool to improve compliance and to control infestations.

Arch Dermatol. 1999; 135:651-655.

Eosinophilic fasciitis responsive to treatment with pulsed steroids and cyclosporine.

Isabel C. Valencia, MD, Attica Chang, MD, Robert S. Kirsner, MD and Francisco A. Kerdel, MD

The patient received a course of pulsed methylprednisolone, 1 g daily for 5 days and was started simultaneously on cyclosporine, 150 mg, twice a day. Within 3 weeks, patient had significant reduction of the skin induration as well as improved range of motion of joints.

International Journal of Dermatology. 1999; 38:367-376.

Oral Isotretinoin therapy in two patients with lupus miliaris disseminatus faciei

S Bahadir et al.

Diagnoses of lupus miliaris disseminatus faciei were made based on the clinical and histopathological findings, and oral isotretinoin treatment (40 mg/day) was initiated. The lesions of both patients showed marked improvement 4 months later.

J Dermatol Treat. 1999; 10:205-208.

An open study of tinea capitis in 50 children treated with a 2-week course of oral terbinafine.

Bernice Krafchik, MBChB and Janice Pelletier, MD
Toronto, Ontario and Bangor, Maine

In this study terbinafine was a safe and effective treatment of tinea capitis in children, particularly when caused by the *Trichophyton* species.

J Am Acad Dermatol. 1999; 41:60-3.

Successful Treatment of Subcorneal Pustular Dermatitis (Sneddon-Wilkinson Disease) by Acitretin: Report of a case.

V. Marliere, M. Beylot-Barry, C. Beylot, M.S. Doutre

Observation underlines the usefulness of retinoids, when dapsone is ineffective or poorly tolerated. Their effectiveness is comparable, but they are effective more rapidly and are better tolerated. A dose maintenance is necessary to avoid relapses. Their action in SPD remains unclear but may be due to the inhibition of neutrophil functions.

Dermatology 1999; 199:153-155.

The efficacy of low-dose oral corticosteroids in the treatment of vitiligo patients

Soo Min Kim, MD, Han-Seung Lee, MD and Seung-Kyung Hann, MD, PhD.

Low-dose oral corticosteroids are effective without serious side-effects in preventing the progression and inducing repigmentation of actively spreading vitiligo, which is difficult to treat with topical corticosteroids or photochemotherapy.

International Journal of Dermatology. 1999; 38:546-550.

Treatment of progressive pigmented purpura with oral bioflavonoids and ascorbic acid: An open pilot study in 3 patients.

U. Reinhold, MD et al.

Results suggest a beneficial effect of bioflavonoids in combination with ascorbic acid on PPP. Because the disease is mostly resistant to other treatment modalities.

J Am Acad Dermatol. 1999; 41:207-8.

Vitamin E ((-tocopherol), 800 IU daily, may reduce retinoid toxicity.

Mark Lebwohl, MD

Using retinoids with vitamin E suggest some reduction in side effects without a negative impact on retinoid efficacy.

J Am Acad Dermatol. 1999; 41:260.

Pharmacokinetics of doxepin in subjects with pruritic atopic dermatitis.

Lynn A. Drake, MD et al

Doxepin applied topically by itself or in combination with triamcinolone acetonide is a safe and effective treatment for atopic dermatitis.

J Am Acad Dermatol. 1999; 41:209-14.

Infantile acne - a clinical and therapeutic study

S. Baron, W.J. Cunliffe

Treatment based on the principles of treating adult acne is usually successful.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Adverse mood and behaviour change in young patients on systemic isotretinoin

L.G. Millard

Systemic isotretinoin appears to cause a small but real increase in serious psychiatric morbidity which needs active identification at clinic review by simple oral questionnaire.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Treatment of acute cutaneous leishmaniasis using herbal medicine, a double blind placebo controlled study of 560 patients.

R.A. Salmapour, et al

The topical herbal remedy, Shiraz Cream is highly successful in the treatment of uncomplicated acute CL. Preliminary results from an ongoing study suggest that it may also help patients with chronic forms of CL.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Aggressive cryotherapy of viral warts is more effective.

M. Connolly, K. Bazmi, M.O'Connell

Aggressive cryotherapy is more effective in the treatment of viral warts although the morbidity is significantly increased.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Resolution of annular sarcoid with intralesional methotrexate.

M.I. Ogboli, J. Ashworth, L.E. Rhodes.

Intralesional methotrexate was commenced at a dose of 12.5 mg in 1ml. Six doses were given over 2 mths. The lesion showed rapid improvement, leaving a mild erythema, which then completely resolved over the following 6 mths. Our case suggests it can be a useful option for localised disease.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Rosacea treated with *Helicobacter pylori* eradication

C. Diaz, et al.

In this uncontrolled study, HP eradication has been shown to be effective in the treatment of rosacea, with clinical and photographic evidence of remission of the skin disease in the majority of patients for up to 24 months. Whether this is brought about by an effect on *Helicobacter pylori* remains to be shown. Nevertheless these results suggest an alternative way of treating rosacea other than with long-term systemic or topical antibiotics.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Mycophenolate mofetil an additional potent immunomodulatory agent in dermatological disease.

P. Lenane, E. Shuddell and G. M., G. M. Murphy

The onset of action of mycophenolate is slow, taking 6-8 weeks to achieve its maximal effects. Its mode of action is as a noncompetitive potent selective inhibitor of

inosine monophosphate dehydrogenase, inhibiting de novo synthesis of guanosine nucleotide and thus preferentially inhibiting T and B cells which are critically dependent on purine synthesis.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Intermittent short courses of cyclosporin for psoriasis unresponsive to topical therapy: a one year multicentre, randomised study

C.E.M. Griffiths, et al.

The study has shown that intermittent short-course therapy with cyclosporin is well tolerated and provides effective control of plaque psoriasis for one year. Tapering off cyclosporin induces a slight delay in psoriasis relapse.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Initial experience of high dose intravenous immunoglobulin as a treatment for scleromyxoedema

R.K. Lister, S. Jollis, C. Black, S. Whittaker, M. Rustin

HdIVIg would appear to be an effective treatment for scleromyxoedema.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Assessment of the efficacy of a short course of oral prednisolone in the treatment of polymorphic light eruption

D. Creamer, et al

Patients with intermittent PLF, are likely to respond to a short course of moderate-dose prednisolone which can be used safely in this setting.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Treatment of vitiligo with topical calcipotriol

M. Ameen, A.C. Chu.

Topical calcipotriol is a highly effective and well-tolerated treatment for vitiligo, with few adverse effects.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.

Vitiligo treated with a topical corticosteroid: children do better than adults.

S.E. Cockayne, A.G. Messenger, D.J. Gawkrödger

Children with vitiligo appeared to have a better outlook than adults when treated with topical steroids. In each case, the vitiligo affected the head and neck and in nearly all cases, the child was racially pigmented.

British Journal of Dermatology. (1999) 141 (Suppl.55):16-21.