
An innovative use of an aerosol spray in surgical management of lip vitiligo: Our experience



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Key words: aerosol spray; lip vitiligo.

SURGICAL CHALLENGE

Though successful, surgical management of lip vitiligo is challenging, as the lips are mobile and dressing is difficult at this site.¹ Hence, we have come up with an easy and convenient way of keeping a graft in place with the help of an aerosol spray.

SOLUTION

A total of 4 patients with lip vitiligo with a minimum of 1 year of stability were treated surgically with tissue grafting. The demographic profile of the patients is shown in Table I. The procedure involved ensuring asepsis, administering local anesthesia, and harvesting of either a split-thickness skin graft (SSG) or suction blister epidermal graft (SBEG) from the donor area (the thigh in all cases), which was then placed over the manually dermabraded recipient site (the lip) with the help of a glass slide. An aerosol spray containing polyvinyl polymer, cetrimide, and benzocaine (Healex Plus, Shreya Life Sciences Pvt, Ltd, Mumbai, India) was sprayed from distance of 11 to 12 cm over the properly positioned graft on the lip until it formed a thin film, taking care to avoid injuring the surrounding structures. The graft was stuck onto the lip without requiring any further dressing following application of spray (Fig 1). Patients were counseled about postprocedure care. Patients were re-evaluated after 1 week, 1 month, and 3 months. The results are shown in Table II and Fig 2, A and B. At the end of 3 months, there was good or excellent repigmentation in all cases subjectively and more than 90% repigmentation in all 4 cases. Complications included stuck-on appearance and depigmentation of the right lateral part of lower lip.

Table I. Demographic profile of the patients

Patient	Age/sex	Type of vitiligo	Duration of disease	Duration of stability
1	16/F	Mucosal (lower lip)	2 y	1 y
2	20/F	Mucosal (lower lip)	3 y	2 y
3	24/M	Mucosal (upper and lower lip)	12 y	2 y
4	52/M	Nonsegmental (generalized, including upper and lower lip)	3 y	2 y

F, Female; M, male.

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Fig 1. Lip vitiligo. Patient 4 immediately after application of the aerosol spray.

Table II. Results

Patient	Graft	Subjective response (at the end of 3 mo)	Objective response (at the end of 3 mo)	Donor site complications	Recipient site complications
1	SSG	Excellent	>90%	None	Stuck-on appearance
2	SSG	Excellent	>90%	None	None
3	SBEG	Good	>90%	None	None
4	SBEG	Good	>90%	None	Koebner phenomenon

SBEG, Suction blister epidermal graft; SSG, split-thickness skin graft.

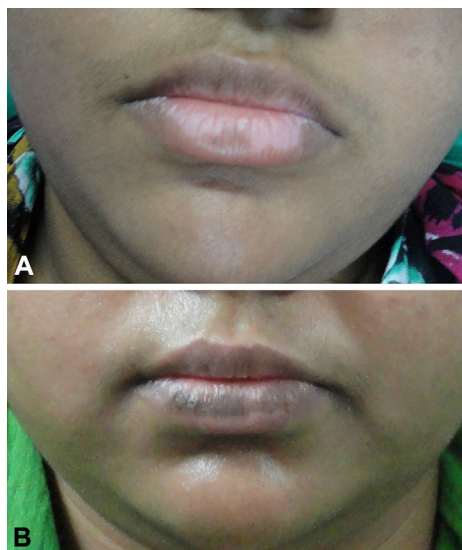


Fig 2. **A**, Lip vitiligo. Patient 1 before the procedure. **B**, Patient 1 at 3 months after the procedure.

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