17888

The influence of p16 immunohistochemistry on diagnosis and management recommendation of melanocytic neoplasms by dermatopathologists: A single-institution prospective study

Jessica Terrell, BA, Department of Dermatology, University of California, Davis; Iryna Rybak, Yue Lyu, Thomas Konia, Maxwell Fung, Lihong Qi, Maija Kiuru

Background: The histopathologic diagnosis of a subset of melanocytic neoplasms lacks interobserver agreement. Therefore, improved and objective molecular diagnostic markers are needed. Immunohistochemistry (IHC) for p16, the protein product of CDKN2A, a gene implicated in melanomagenesis, is increasingly used in clinical practice, though prospective studies are lacking and its impact on clinical decision making has not been thoroughly studied.

Objective: To assess whether p16 IHC influences histopathologic diagnosis, diagnostic confidence, and management recommendations of challenging melanocytic neoplasms by dermatopathologists.

Methods: We performed a prospective cohort study of 68 cases of challenging melanocytic neoplasms where a dermatopathologist obtained a p16 IHC stain. For each case, the dermatopathologist completed a pre-test and pos*t* test survey to assess their favored diagnosis, diagnostic confidence and management recommendation. Any changes between the pre- and pos*t* test surveys were analyzed.

Results: Overall, nearly half of the cases showed an increase in confidence after the p16 IHC stain. The percentage of unsure (8.82% to 1.47%) and somewhat unsure (11.03% to 8.82%) diagnostic confidence decreased and the percentage of neutral, (1.47% to 7.35%), confident (13.97% to 19.12%), and very confident (0% to 2.21%) increased from pre-test to post-test. The diagnosis changed in 17.65% of cases, and treatment recommendations changed in 20.59% of cases. Notably, 56 cases were shared in intra- or interdepartmental consultations.

Conclusions: The p16 IHC stain impacts the diagnostic confidence of dermatopathologists when assessing diagnostically challenging melanocytic neoplasms. Intra- or interdepartmental consultation may influence confidence.

Commercial disclosure: None identified.

17891

Quality of life score in Indian patients with epidermolysis bullosa and its correlation with clinical severity assessment scores

Rahul Mahajan, MD, Anuradha Bishnoi, Seema Manjunath, Kamal Kishore, PhD, Dipankar De, MR, Postgraduate Institute of Medical Education and Research; Dédée F. Murrell, MD, PhD, University of New South Wales, Australia; Sanjeev Handa, Department of Dermatology, Venereology, and Leprology, Postgraduate Institute of Medical Education and Research, Chandigarh

Background: Quality of life (QoL) has not been evaluated in Indian patients having epidermolysis bullosa (EB). Design, setting, and participants: In this prospective observational study, the QoLEB questionnaire was translated from English to Hindi (QoLEB-Hin). The QoLEB-Hin, Birmingham EB severity score (BEBs), Instrument for Scoring Clinical Outcomes of Research for EB (iscorEB), and EB Disease Activity and Scarring Index (EBDASI) were administered to EB patients and parents in the presence of an expert.

Results: Fifty-four patients were recruited (19 female, 35 male; median age 5 years). The mean ± SD of the QoLEB-Hin score of all EB patients was 11.33 ± 7.63. Mean ± SD of QoLEB-Hin scores for EBS, JEB, DDEB, and RDEB were 5.36 ± 3.75, 59 11.00 ± 6.18, 9.00 ± 5.75 and 20.08 ± 6.36 respectively (P 1 indicating overfit. The mean time taken to complete the questionnaire was 6.14 minutes (range, 6-8 minutes). QoLEB-Hin correlated significantly ($P < .001$) with BEBs ($\rho = 0.79$), iscorEB ($\rho = 0.63$) and EBDASI ($\rho = 0.77$).

Conclusions: This study validated QoLEB-Hin in an Indian population finding an overall moderate reduction in QoL due to EB. QoLEB-Hin had a variable positive correlation with all clinical severity assessment scores, maximum being with BEBs and EBDASI. The three disease severity measurement tools agreed well with each other.

Commercial disclosure: None identified.

17895

Anti-photoaging effect of a novel tinted facial sunscreen with high sun protection, peptide complex, and encapsulated photolyase after 1 month of use

Corinne Granger, MD, MSc, ISDIN, Carlos Trullàs, ISDIN; Gabriel Bauza, BsC, MsC, ISDIN Laboratories, SA; Aurora Garre, ISDIN

Introduction: Nowadays, being protected from external factors such as UV radiation or air pollutants is very important. Photoprotection is key in any beauty routine. A new generation of tinted sunscreen with peptide complex to improve the skin condition and encapsulated photolyase that reverts DNA damage, could reduce the skin damage due to external factors.

Objective: The aim of this study was to evaluate the anti-photoaging efficacy and safety of this novel tinted sunscreen (NTS) after 28 days of use.

Methods: 30 women, aged 45-65, with slight to moderate photoaging clinical signs were included. Efficacy parameters were assessed at baseline and D28 and consisted of periocular wrinkles (Primos CR), skin firmness and elasticity (Cutometer), UV spots (VISIA-CA) and patient subjective questionnaire. Dermatologic and ophthalmological control was performed.

Results: After 28 days of use in real world conditions, we observed a statistically significant reduction compared with D0 in wrinkle count (−6.9%); wrinkle volume (−10.4%); UV spots area (−9.0%); significant increase in firmness (8.2%), and elasticity (11.3%). 96.7% of subjects appreciated the texture; 100% felt their skin protected; 90% reported decrease of fine lines; 80% that the wrinkles are less visibles and 83.3% the skin firmer. The product was well tolerated.

Conclusions: After only 28 days of use, the NTS, with high sun protection factor and containing peptide complex and encapsulated photolyase, demonstrated positive effects on anti-photoaging signs in real-world conditions of use. The product was well tolerated.

Commercial disclosure: ISDIN Spain.

17927

A pilot study of intrascalp platelet-rich plasma injections for hair loss in Nigerian patients

Erere Otrofanowei, MBBS, FMCP, Department of Medicine, College of Medicine, University of Lagos; Ayesha Akinkugbe, Olusola Ayanlowo, MD, FWACP, College of Medicine, University of Lagos

Background: Hair loss is common worldwide with significant impact on quality of life. Intra scalp injections of platelet-rich plasma (PRP) is one of many methods for restoring hair growth. The use of cheaper, readily available and affordable plain bottles for extracting PRP instead of commercial kits has been shown to be effective.

Objective: To explore the effect of intra scalp autologous PRP injections using plain bottles in a cohort of Nigerian patients with alopecia.

Methods: three monthly injections of autologous PRP were injected into 8 patients (F:M = 7:1) with ≥2 years of hair loss. SALT score assessed severity; trichoscopy and a hair pull test were carried out. Ten mls of patients' blood was collected into plain and K2EDTA bottles; centrifuged at 4000 rpm for 10 minutes for the first spin; extract respun for 5 minutes and injected into anaesthetized alopecic scalp with a 29-G needle. DLQI questionnaire was administered at the start and end of the study for each patient.

Results: Seven patients had obvious hair regrowth with improved DLQI and negative hair pull test at review (1 month after completing sessions). Trichoscopy demonstrated an increase in hair density and diameter in 6 patients. One patient had no demonstrable change.

Conclusions: Hair regrowth was observed in this pilot of patients with alopecia following PRP injections using accessible and affordable vacutainer tubes. Standardization of more affordable methods of obtaining platelet-rich growth factors is required.

Commercial disclosure: None identified.