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Clinical significance of lactic acid stinging test in the patients with rosacea



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Background: Most rosacea patients have sensitive skin. And the lactic acid stinging test (LAST) has been proposed as a suitable test to identify sensitive skin subjects and to assess the severity of their condition. But there has been little data about how this test relates to rosacea.

Objective: To evaluate the clinical significance according to the results of LAST in the patients with rosacea.

Methods: 65 patients with rosacea were divided into two groups according to the results of LAST and we evaluated the difference of age, gender, clinical severity, degree of erythema and treatment response between them.

Results: Among 65 rosacea patients, 63.1% (41/65) were positive and 36.9% (24/65) were negative at LAST. Mean ages were 49.8 and 50.1 years and male:female ratios 1:3.6 and 1:3.1 in the 2 groups, respectively. There was no significant difference in clinical severity between the 2 groups. The degree of erythema measured by Mexameter (MPA580; Courage-Khazaka, Germany) was higher in the LAST-positive group at all measured areas (forehead, both cheek, nose, chin) than the LAST-negative group. Patients with more than 75% improvement in rosacea related symptoms including erythema, burning, stinging, itching after treatment for 3 months were 58.5% (24/41) in the positive group and 54.2% (13/24) in the negative group.

Conclusions: There were no significant differences in age, gender, clinical severity and treatment response between two groups though the degree of erythema was higher in LAST-positive group compared with LAST-negative group.

Commercial disclosure: None identified.

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Similar efficacy of maintenance treatment of finasteride 1 mg every other month compared with finasteride 1 mg daily in Korean men with androgenetic alopecia after taking finasteride 1 mg daily for 1 year



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Background: Finasteride has proved to be an effective treatment for men with AGA. Daily use of finasteride 1 mg for three months or more is necessary before benefit is observed. Also, treatments for AGA, including finasteride 1 mg, should be continued to treat AGA and maintain therapeutic effect.

Objective: To compare the maintenance effect of finasteride 1 mg regimens, daily or every other months (EOM) use, after taking finasteride 1 mg daily for 1 year.

Methods: We enrolled 23 Korean men with AGA who were treated with finasteride 1 mg daily for 1 year. Patients were randomly divided into two groups, and then treated with finasteride 1 mg for 1 more year. We defined daily group as 9 patients who took finasteride 1 mg daily and EOM group as 14 patients who took it EOM. Treatment efficacy was assessed by the investigator's global assessment. The 5-point scale was as follows: 4, greatly improved; 3, moderately improved; 2, slightly improved; 1, unchanged; 0, aggravated.

Results: Two patients (22.2%) showed mild improvement and 6 patients (66.7%) showed no change in the daily group. Five patients (35.7%) patients showed mild improvement and 7 patients (50.0%) had no change in the EOM group. There were 1 patient (11%) with aggravation in the daily group and 2 patients (14.3%) with aggravation in the EOM group.

Conclusions: Maintenance effect of finasteride 1 mg EOM dosage showed similar to that of finasteride 1 mg daily dosage during 1 year in Korean men with AGA, after taking finasteride 1 mg daily for 1 year.

Commercial disclosure: None identified.

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Impact of atopic dermatitis and chronic hand eczema on quality of life compared with other chronic diseases: A structured review



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Background: Atopic dermatitis (AD) and chronic hand eczema (CHE) are chronic relapsing skin diseases. Both are associated with considerable impairment of health and socioeconomical burden for patients and society.

Objective: Investigate the burden of AD and CHE on quality of life (QoL) compared with other chronic diseases.

Methods: Three structured reviews were performed to obtain data on EQ-5D, EQ-5D VAS, SF-36 and SF-6D for AD, CHE, and chronic diseases. For AD and CHE, only studies reporting primary research were included, while for chronic diseases only systematic reviews were included. For all literature searches, only data at baseline were considered.

Results: In total, 49 publications met the inclusion criteria for AD, CHE and chronic diseases literature searches. Data on QoL of AD was available for all QoL tools, while for CHE data was available only for EQ-5D and EQ-5D VAS. The EQ-5D and EQ-5D VAS estimates for skin diseases are similar to and within the ranges of other chronic conditions. Moreover, AD and CHE have a higher impact on QoL than some chronic diseases. For AD, QoL measured with SF-36 showed lower mental component scores versus physical component scores, which is opposite to many chronic conditions with lowest physical component scores. This result highlights a higher psychosocial impairment for AD compared with other chronic conditions.

Conclusions: The results of this review highlight how, despite not being life threatening diseases, these skin conditions affect patient's lives similarly to life-threatening chronic diseases, and even more so when focusing on psychosocial aspects.

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Leishmaniasis in patients undergoing biologic and immunosuppressive treatment: Case-control multicenter study



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Introduction: Leishmaniasis is a frequent disease in certain geographical areas of our environment. With the increase in the use of biologic drugs and other immunosuppressants, we are experiencing an increase in the number of cases of our patients subjected to this iatrogenic immunosuppression.

Objective: The objective of our study is to analyze the differential clinical and histologic findings of infection in this patient population, as well as to study the differences in response to the treatments used, in comparison with the general population suffering the infection.

Methods: Case and control retrospective multicenter study, including patients undergoing pharmacological immunosuppression that were diagnosed of cutaneous leishmaniasis in 5 hospitals in the Mediterranean basin, from September 2006 to December 2018. Two controls were included for each case, matched in terms of sex and age range variables.

Results: A total of 125 patients, 43 cases and 82 controls were included, with no statistically significant differences in sex and age between groups. Histologically, we found only statistically significant differences in the presence of pseudocarcinomatous hyperplasia and epidermal ulceration, which were more frequently associated within cases group ($P < .01$ and $P < .05$, respectively). We found no statistically significant differences between both groups in the presence of symptoms or analytic signs of systemic leishmaniasis.

Conclusions: According to the results of our series, cutaneous leishmaniasis in patients undergoing immunosuppressive treatments and healthy patients, has a similar histologic pattern. According to our findings, the risk of systemic involvement is low even in patients receiving treatment with TNF-blocking drugs.

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