

 #WCD2019

# AEDV

## HIGHLIGHTS

24<sup>th</sup> World Congress of Dermatology (WCD)

10-15  
JUNIO  
2019

*Milán*



Patrocina:

janssen  Immunology  
PHARMACEUTICAL COMPANIES OF 

Organiza:



# AEDV

## HIGHLIGHTS

24<sup>th</sup> World Congress of Dermatology (WCD)

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2019

Milán



## Onicology and trichology

Thursday 13rd June 2019

**Dr. David Saceda Corralo**

*Hospital Universitario Ramón y Cajal (Madrid)*

Patrocina:



Organiza:



# Nail Dermoscopy –

Bianca Piraccini / Luc Thomas / Sergio Hirata

## Nail apparatus melanoma: dermoscopic and histopathologic correlation

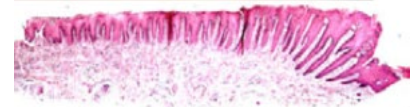
- 23 patients (6 males, 17 females)
- Age between 18 and 92 (mean 63 years)
- LONGITUDINAL MELANONYCHIA: 14 patients
- HUTCHINSON SIGN: 4 cases
- Dystrophy of the nail plate: 7 cases
- The THUMB was the most frequently involved (8 cases)

### DERMOSCOPY:

- Blurred borders (85.7%)
- Blurred lines (71.4%)
- Lines interrupted (35.7%)
- Nail plate destruction (35.7%)
- Hutchinson's sign (28.5%)

**Melanoma in situ**

**¡0% micro  
Hutchinson's  
sign!**

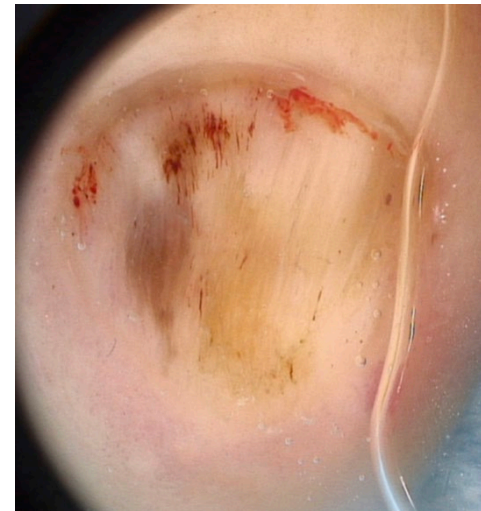
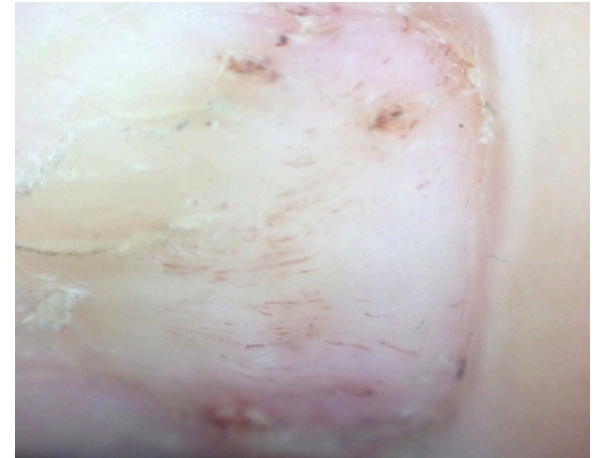


## Nail Dermoscopy –

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### Dermoscopic features of onychotillomania

- 36 patients (12 males, 24 females)
- Age between 28 and 72 (mean 56 years)
- The FINGERNAILS were the most frequently involved (21 cases)
- **DERMOSCOPY:**
  - **Scales** (94.4%) in the nail bed, nail folds, and hyponychium
  - **Absence of the nail plate** (83.3%)
  - **Wavy lines** (69.4%)
  - Hemorrhages (63.9%)
  - Crusts (61.1%)
  - Nail bed **GRAY pigmentation** (47.2%)
  - Speckled dots (38.9%)
  - Melanonychia (11.1%).

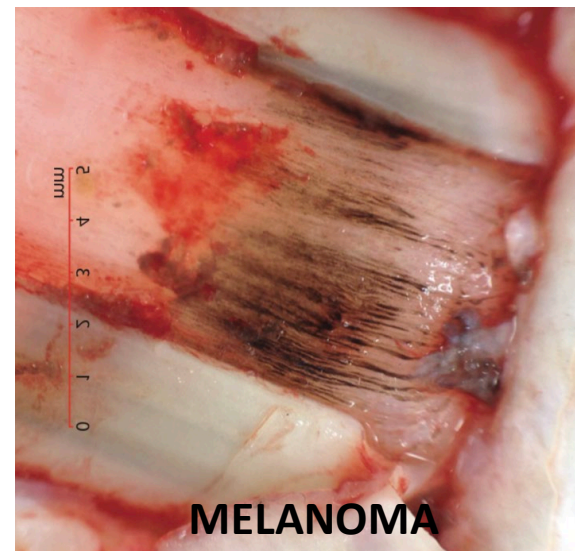
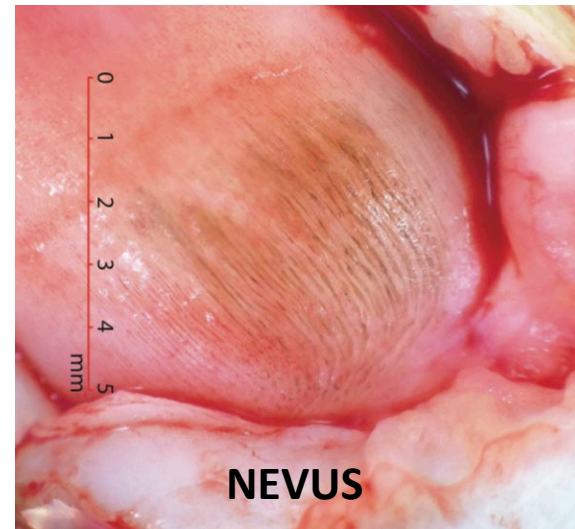


## Nail Dermoscopy –

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### Intraoperative dermoscopy for melanonychia

- **4 possible patterns:**
  - **Regular gray pattern** - melanocyte activation
  - **Regular brown pattern** - benign melanocytic hiperplasia
  - **Regular brown pattern with globules or blotches** – melanocytic nevi
  - **Irregular pattern** (longitudinal lines of irregular colors and thicknesses) - melanoma



# Nail Dermoscopy –

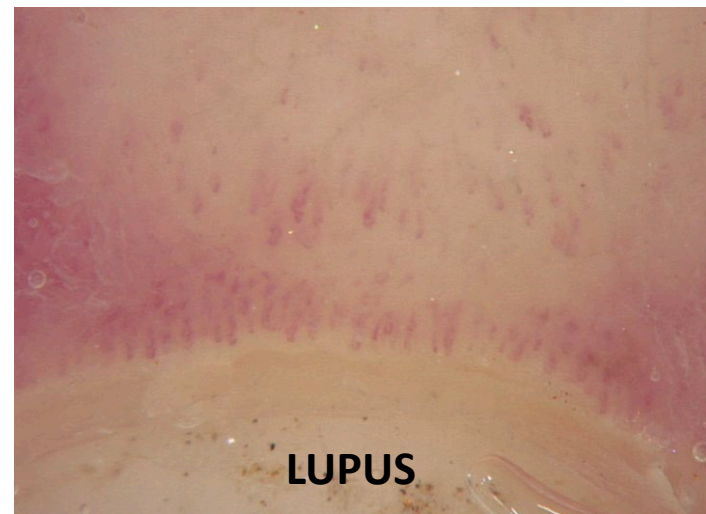
Bianca Piraccini / Luc Thomas / Sergio Hirata

## Nail Dermoscopy in connective tissue disorders

- **USEFUL TIPS**

- **Use 40-60x**
- **Do not pressure!**
- **Advanced disease** may show **loss of capillaries**

- **DERMATOMYOSITIS: dilated capillaries and low density**
- **LUPUS: less expressive** under dermoscopy and capillary density is normal



## Communication of Alopecia Areata

### Systemic treatments for alopecia areata: a systematic review (equipo de R Sinclair)

- A systematic review between 1946 and March 2018
- Evaluated the **effectiveness** of systemic treatments
- 16 studies were included with a total of **768 participants**.
- We found **8 placebo-controlled** RCTs, 3 RCTs comparing 2 systemic treatments and 5 RCTs comparing 3 treatments.
- 15 different systemic therapies were investigated:
  - **Oral prednisolone pulse therapy**
  - **Inosiplex** in 3 studies
- **There is currently no systemic therapy that is supported by robust body of evidence from RCTs.**
- Evidence does not support the use of **oral zinc sulphate, alefacept and efalizumab.**



## Communication of Alopecia Areata

### Refractory, moderate to severe alopecia areata. A retrospective review of 127 patients tofacitinib for chronic (equipo de R Sinclair)

- 42 males and 85 females // Aged 11-68 years
- 92 multifocal AA and 35 had alopecia totalis or universalis (AT/AU).
- **At 3 months:**
  - 56% of patients experienced increased hair growth
  - 12% complete remission
- **At 12 months:**
  - 86% showed regrowth
  - 40% complete remission
- **At 18 months**
  - **90% showed regrowth**
  - **80% complete remission.**
- **28 (38%) patients were able to cease all other systemic medications.**
- 14 patients stopped tofacitinib either due to cost, side effects or lack of efficacy.
- Side effects: none were severe, were uncommon.





## Communication of Alopecia Areata

### The profile of cytokines (IL-2, IFN-, IL-4, IL-10, IL-17A and IL-23) In active alopecia areata

(equipo de N Mesinkovska)

- To assess the serum levels of cytokines secreted by Th1 (IL-2, IFN-gamma;), Th2 (IL-4), Th17 (IL-23, IL-17A) and Treg (IL-10) pathways in patients of active AA and to correlate their levels with the severity of the disease.
- CASOS CONTROL: 40 patients with untreated active AA of the scalp
  - ↑IL-2, IFN- $\gamma$ , IL-17A and IL-10
  - × IL-23
  - ↓IL-4
- **SALT Score related to IL-2, IL-17A and IL-23**

**Th1 and Th17 pathways play a central role**



## Communication of Alopecia Areata

### Alopecia totalis responding remarkably to oral cyclosporine: a study of 25 children (equipo de S Dhar)

- Oral cyclosporine for 1 year (3-5mg/kg body weight/day)
- 25 children with alopecia totalis
- **After 3 months: 30% hair growth in 50% children**
- **After 6 months: 60% improvement in 70% of children**
- **After 1 year: stable growth in 80% children.**
- Follow up at 2 years 60% children had retained hair
- 20% there was few recurrence of few alopecia patches
- None of the children had developed side effects.



## Communication of Alopecia Areata

**Azathioprine in combination with methotrexate: a therapeutic alternative in severe and recalcitrant forms of alopecia areata?** (equipo de A Taïeb)

- 18 patients (15 women)
- At least a 6 months history of AA and **a failure to a first line of systemic therapy**, including pulsed methylprednisolone plus MTX (medium dose 20mg).
- 9 had severe multifocal AA (MAA) and 9 had alopecia totalis (AT)

**AZA 50 mg/d and progressively increased + MTX 15-25 mg/week sc.**

- After 6 months: hair regrowth in 10 patients(55.5%),
- At 1 year: hair regrowth in 50% of patients and continue treatment
- **5 stopped for no efficacy**
- **4 stopped for side effects** (3 gastrointestinal and 1 lymphopenia).

