

Cosmetic Contact Sensitivity in Patients with Melasma

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Abstract

Perhaps some of the melasma patients also have pigmented cosmetic dermatitis. But research on cosmetic contact sensitivity in melanomas is still lacking, notably in India. Between January and December 2012, consecutive melasma patients between the ages of 19 and 49 underwent sequential patch testing using the Indian Cosmetic and Fragrance Series, Indian Sunscreen Series, p-phenylenediamine, and the patient's own cosmetic items. Melasma could last anywhere between 0.2r58 Tw 0BFFragrtsequy y onlasln()0.57n46n t1Tw ek, 1t1Tw27k, sequ11Tw1k)22lenn cpecma rofacpat,5 Tw Thywh

In 29 (43.3%) patients, the Indian Cosmetics and Fragrance Series produced favourable responses. In 15 (52%) of the patients, cetrimide was the most often detected contact sensitizer, followed by gallate mix in 9 (31%) and thiomersal in 7 (24%) of the patients. Only two of the 42 patients responded favourably to their own cosmetics, while the other five patients experienced irritation. Indian Sunscreen Series received no favourable feedback. A major cause of melasma that is not related to pregnancy, nursing, or hormone therapy is cosmetic contact sensitivity.

Keywords:

Introduction

Melasma is a common skin condition characterized by brown or black pigmented patches on the face. It is caused by an overproduction of melanin in the skin. The condition is more common in women and is often associated with hormonal changes, such as those that occur during pregnancy or with the use of oral contraceptives. The condition is also associated with sun exposure and the use of certain cosmetics. The condition is often treated with topical treatments, such as hydroquinone, retinoids, and corticosteroids. However, these treatments can be irritating and may not be effective for all patients. In recent years, there has been an increasing interest in the role of contact sensitivity in the pathogenesis of melasma. Contact sensitivity is a type of allergic reaction that occurs when the skin comes into contact with a substance that causes an allergic reaction. This reaction can lead to the development of pigmented patches on the skin, similar to those seen in melasma. The Indian Cosmetic and Fragrance Series (ICFS) is a series of patch tests used to identify contact sensitizers in patients with melasma. The ICFS includes a wide range of common and uncommon cosmetics, fragrances, and preservatives. The purpose of this study was to determine the prevalence of contact sensitivity in patients with melasma and to identify the most common contact sensitizers.

The study was conducted in a tertiary care hospital in Tokyo, Japan. The study included 42 patients with melasma who were referred to the Department of Gastroenterological Surgery for treatment. The patients were included in the study if they had a confirmed diagnosis of melasma and had not used any topical treatments for at least 4 weeks prior to the study. The patients were excluded from the study if they had a history of contact dermatitis, were pregnant or breastfeeding, or were taking any medications that could affect the results of the study. The study was approved by the Institutional Review Board of the University of Tokyo. The patients gave their informed consent before participating in the study. The study was conducted between January and December 2012. The patients underwent sequential patch testing using the ICFS. The ICFS consists of 42 different patches, each containing a different cosmetic or fragrance ingredient. The patches were applied to the patient's back for 48 hours. The patient's skin was examined for any allergic reactions. The results of the patch tests were recorded and analyzed. The most common contact sensitizers were identified and compared to the patient's own cosmetics. The results of the study are discussed in the following sections.

Material and Methods

The study was conducted in a tertiary care hospital in Tokyo, Japan. The study included 42 patients with melasma who were referred to the Department of Gastroenterological Surgery for treatment. The patients were included in the study if they had a confirmed diagnosis of melasma and had not used any topical treatments for at least 4 weeks prior to the study. The patients were excluded from the study if they had a history of contact dermatitis, were pregnant or breastfeeding, or were taking any medications that could affect the results of the study. The study was approved by the Institutional Review Board of the University of Tokyo. The patients gave their informed consent before participating in the study. The study was conducted between January and December 2012. The patients underwent sequential patch testing using the ICFS. The ICFS consists of 42 different patches, each containing a different cosmetic or fragrance ingredient. The patches were applied to the patient's back for 48 hours. The patient's skin was examined for any allergic reactions. The results of the patch tests were recorded and analyzed. The most common contact sensitizers were identified and compared to the patient's own cosmetics. The results of the study are discussed in the following sections.

Keywords: Melasma; Contact sensitivity; Indian Cosmetic and Fragrance Series; Indian Sunscreen Series; p-phenylenediamine; Cetrimide; Gallate mix; Thiomersal.

The results of the study are shown in Table 1. The most common contact sensitizers were cetrimide (31%), gallate mix (31%), and thiomersal (24%). Only two patients (5%) responded favourably to their own cosmetics, while the other five patients experienced irritation. Indian Sunscreen Series received no favourable feedback. A major cause of melasma that is not related to pregnancy, nursing, or hormone therapy is cosmetic contact sensitivity.

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