SAFETY AND EFFICACY PROFILE OF OF ORAL TRANEXAMIC ACID (TXA) V/S TRANEXAMIC ACID SOLUTION COMPRESSES V/S TRANEXAMIC ACID CREAM IN TREATMENT OF MELASMA – A PROSPECTIVE RANDOMISED CONTROLLED STUDY

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Introduction: Melasma is a chronic photosensitive disorder with hyperpigmentation in the epidermis, dermis or mixed distribution. The management is difficult with wide variety of available modalities but none with high efficacy. Tranexamic acid has been recently tried in the treatment of melasma with promising results.

b. Assess their safety profiles

Material & methods: 90 patients having melasma were enrolled in the study and randomised into three groups. Group O received oral TXA 250 mg twice daily, group S received TXA solution compresses which was applied for 20 minutes thrice a week and group T received TXA cream twice daily. Response was evaluated by Melasma Area Severity Index (MASI), Physician global assessment scale (PGA) and Visual analogue scale (VAS) at each visit till 12 weeks and analysed. Side effects if any were recorded.

Results: Mean MASI for group O, group S and T was 12.93, 14.19 and 11.85 respectively at baseline. This difference was not significant (P value > 0.05). The MASI reduced to 0.54 (95.8 % improvement), 7.43 (47.6% improvement) and 9.53 (19.6% improvement) respectively at end of 12 weeks (P value < 0.05). The difference in the three groups was statistically significant thus proving oral TXA to be more efficacious than TXA solution compresses and cream. The difference in the reduction of PGA and VAS scores was also statistically significant. No significant side effects were noted.

Conclusion: Oral TXA is more efficacious than the other two modalities in the treatment of melasma. TXA solution compresses showed better results compared to TXA cream. All 3 delivery modalities have a good safety profile.