

DERMATOLOGICAL SURGERY

COMBINATION OF CELLULAR AND TISSUE GRAFTING TECHNIQUES FOR PATIENTS OF STABLE VITILIGO UNDERGOING REPEAT VITILIGO SURGERY TO IMPROVE THE REPIGMENTATION RATE.

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Background: Melanocyte keratinocyte grafting is a cell transfer technique which is standardized treatment modality for stable vitiligo patches. Suction blister grafting is a tissue grafting technique, which has excellent re-pigmentation rates. A combination of both these techniques on the same stable patch of vitiligo can offer dual advantages to the patient.

Objective: To improve the re-pigmentation rate in patient of stable limited vitiligo who are undergoing repeat surgery or being treated for difficult to treat areas like acrofacial involvement or patients who have a timeline for treating the patches due to social or personal reasons.

Method: 3 Patients having limited patches of vitiligo less than 15 cm square, undergoing a repeat session—were taken up for a combination surgery of MKTP and Suction blister grafting. After taking written informed consent, the donor area blisters were raised using leur-lock syringes of 10 ml and 20 ml volume with three-way knobs. After this the shave biopsy was taken for MKTP. While waiting for blisters to form and trypsin to act on shave skin graft recipient areas were prepared. After that suspension was prepared and roofs of blisters were harvested. The cell suspension was spread evenly on the surface and covered with blister roof. The patients were asked for 48 hours of immobilization.

Results: All 3 cases were treated with MKTP earlier with partial re-pigmentation and showed complete re-pigmentation with combination therapy.

Conclusion: Combination therapy is likely to be effective in obtaining complete repigmentation.





