



INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

## NON STEROIDAL TOPICAL THERAPY FOR FACIAL SEBORRHEIC DERMATITIS. A CASE SERIES

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**Background:** Seborrheic dermatitis (SD) is a chronic, inflammatory skin disorder occurring in areas rich in sebaceous glands. Clinical manifests as erythematous macules or plaques with varying levels of scaling associated with pruritus. Although the exact cause of seborrheic dermatitis has yet to be understood, *Malassezia* yeasts, hormones, sebum levels and immune response are known to play important roles in its development. Additional factors including drugs, winter temperatures and stress may exacerbate seborrheic dermatitis. A variety of drugs treatment modalities are available, including antifungal agents, topical low-potency steroids and calcineurin inhibitors. In this cases series, we evaluate the effectiveness of topical non-steroidal cream in treating facial seborrheic dermatitis (SD).

**Observation:** A case series study was performed of 11 patients with facial SD with history of several treatments without improvement. The patients were treated with topical non-steroidal cream containing Zinc PCA, Piroctone Olamine, Hydroxyphenyl propamidobenzoic Acid, Biosaccharide Gum-2 and Stearyl Glycyrrhetinate, during 8 weeks. The clinical characteristics of the patients and improvement and tolerance during the treatment were recorded. The changes in the signs and symptoms observed, and associated adverse effects, were then noted and analysed.

**Key message:** We present eleven cases with history of multi-treated facial SD without improvement. After the use of twice-a-day during 8 weeks with facial gel-cream improves the symptoms of DS (desquamation, pruritus, erythema and stinging sensation). The product showed rapid efficacy and a good tolerance.

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