MUCOSAL DISEASES (ORAL, ANOGENITAL), EXTERNAL EYE DISEASE

PLATELET-RICH PLASMA FOR THE TREATMENT OF MALE GENITAL LICHEN SCLEROSUS RESISTANT TO CONVENTIONAL THERAPY IN URUGUAY: PRELIMINARY RESULTS FROM THE FIRST PILOT STUDY.

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Introduction: Male genital lichen sclerosus (MGLSc) is an acquired, chronic, inflammatory dermatosis, given by prolonged contact with urine in non-postectomized men. Cardinal symptom: dyspareunia. Topical corticosteroids and postectomy are usually effective, however, refractory cases are often referred to our "Urodermatology Unit". Treatment with platelet-rich plasma (TPRP) emerged as an apparently safe and effective option, without prospective studies to date.

Objective: Assess the safety and efficacy of TPRP for MGLSc resistant to conventional therapy.

Materials and Methods: Single-arm phase II clinical pilot study, with 10 patients. Inclusion criteria: Resistant to conventional therapy for at least 6 months, compatible biopsy, suitable for PRP production. Procedure: Production of PRP from peripheral blood. Topical and local anaesthesia with adrenaline, TPRP with 1 ml syringe 0.1 ml/cm2. Frequency of TPRP: 8 weeks. Monthly data recording: Visual appearance (photographs and external scoring by expert using Investigator's Global Assessment Scale (IGA) 0-5), symptoms (scale 0-5), quality of life (DLQI 0-30), and complications.

Results: Beginning: December 2017. Patients included n=5. Patients excluded n=1. Mean age: 65.4 years. Mean initial IGA (severity): 3.6. Mean initial DLQI: 6 (range: 1-11). TPRP n=20 (range: 2-6; average: 4 p/p). Average follow-up: 6.2 months (range: 2-10). Complications: 0. All patients have shown a global improvement in all evaluated symptoms, particularly dyspareunia (initial mean severity: 2.75 (range: 1-4); after second TPRP: 0 for all patients). Patient 4 abandoned the protocol due to the inability to attend controls.

Conclusions: So far, our study is feasible and safe. TPRP seems to be effective, however, we require more time and patients. Although symptomatic improvement is evident, aesthetic changes are discrete at this moment (objective evaluation is pending). The only retrospective TPRP study in men estimated 2-10 applications (average 4.4 p/p). We are therefore within the expected range, and cannot make presumptions of therapeutic efficacy yet.