



PIGMENTATION

TWO CASES OF DERMABRASION IN PATIENTS WITH LICHEN PLANUS PIGMENTOSUS AND FRONTAL FIBROSING ALOPECIA

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Background: Frontal fibrosing alopecia (FFA) is a lymphocytic cicatricial alopecia that shares common histopathologic features with lichen planopilaris. In 2013, Dlova in South Africa first reported FFA in association with lichen planus pigmentosus (LPPigm). It is rare and it may appear years before any hair loss can be seen. There are few reports in the literature and it represents a therapeutic challenge. Dermabrasion was performed with a good clinical response in the treatment of this condition on the face of two female patients.

Observation: Two women presented to the dermatologist due to frontotemporal hair loss and progressive gray-brown macules on the face, in zygomatic and frontal regions starting four years ago. FFA and LPPigm were diagnosed clinically and confirmed by histopathologic examination. Due to the poor response to the clinical treatments, and the impact on the patient's quality of life, the authors chose to carry out dermabrasion. For the manual dermabrasion, sterile fine water sandpaper (granulation 100) was used until a pinpoint bleeding was formed and the pigment was visually completely removed. Sandpaper with 400 and 600 granulations was also used to achieve a more homogeneous and gradual appearance at the lesion's edges. The abrasion area was occluded with sterile transparent polyurethane film for five days. The patients used petrolatum jelly up until complete healing was achieved, thereafter using 0.05% clobetasol cream for 30 days, followed by 4% hydroquinone cream for 3 months. A satisfactory cosmetic outcome was maintained after one year in both cases.

Key message: The authors highlight the improvement in the patient's quality of life after one dermabrasion session. Nevertheless, there is a lack of case reports showing long-term follow up and results for this procedure. Further studies are necessary to determine the role and indications of dermabrasion in the treatment of LPPigm associated with FFA.

