Additional topical methods of treatment of patients with seborrheic dermatitis

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Today, the use of platelet-rich plasma is increasing in clinical practice in various fields of medicine. The plasma therapy is used by dermatologists, dentists, gynecologists, traumatologists and many other specialists in daily practice.

Platelet-rich plasma is actively used in dermatology after its clinical effectiveness has been established. The plasma therapy method alone, as well as in combination with other methods of treatment, has shown advantages in certain skin diseases: androgenetic alopecia, alopecia areata, chronic vitiligo, melasma, inflammatory nail disorders, psoriasis, acne, post-acne and seborrheic dermatitis.

Platelet-rich plasma can suppress cytokine release and limit inflammation by interacting with macrophages, improving tissue healing and regeneration, promoting the formation of new capillaries and accelerating epithelialization.

Plasma platelets also play an important role in the host's defense mechanism at the wound site by producing signaling proteins that attract macrophages. Blood plasma also has antimicrobial activity against *Escherichia coli, Staphilococcus aureus, Candida albicans* and *Cryptococcus neoformans*.

Currently, there is a large number of patients seeking medical help with seborrheic dermatitis. However, the complexity of the pathogenesis of seborrheic dermatitis and its sensitivity to medications require from the dermatologist a differential approach in choosing the local therapy.

Objective — to evaluation of the effectiveness of additional external methods of treatment for patients with seborrheic dermatitis.

Materials and methods. To evaluate the effectiveness of the injection of platelet-rich plasma in patients with seborrheic dermatitis, 22 patients with this pathology were examined and treated (15 patients — main group, 7 — control group). The control group included patients treated using conventional methods. All examined patients had at least two episodes of exacerbation of the disease during a year. The severity of clinical manifestations in patients of both groups did not differ significantly before the start of therapy. The patients of the main group had their plasma injected intradermal around the lesions. The plasma injections were made up of several cycles up to four times with an interval of 7 days. The patients received conventional treatment if needed.

Results and discussion. During the therapy, clinical improvement was observed in all patients of the main group, and as a result, the absence of symptoms of the disease. During a year, in 11 patients of the main group, relapses were not observed, in contrast to the control group.

Conclusions. The use of platelet-rich plasma in the treatment of seborrheic dermatitis gives a pronounced therapeutic effect. Therefore, this method of treatment can be considered as an effective adjuvant therapy, which further helps to reduce the intensity of exacerbations of seborrheic dermatitis.