

Risk of Skin Cancer Associated With Narrowband UV-B Phototherapy[☆]



Riesgo fotocarcinogénico asociado a la fototerapia ultravioleta B de banda estrecha

Phototherapy with ultraviolet radiation is gaining importance in hospital dermatology departments because of its high therapeutic efficacy in various skin diseases and its relatively low cost. Narrowband UV-B phototherapy involves simple exposure of the skin to various doses of a light source that emits electromagnetic radiation at around 311 nm. Consequently, cumulative exposure to UV-B could lead to adverse effects on chromophores such as cellular DNA and expose the patient to a risk of photocarcinogenesis in the long term.

In the present study, Ortiz-Salvador et al¹ provide a complete retrospective analysis of the potential impact of narrowband UV-B phototherapy on the generation of skin cancer in a series of 474 patients followed for a mean of 5.8

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years after cumulative exposure to this type of radiation. Although the results cannot be extrapolated to the general population, the number of patients included and the duration of follow-up point us toward conclusions that are at least locally interesting, namely, application of high-dose narrowband UV-B phototherapy over a specific period does not seem to significantly increase the risk of nonmelanoma skin cancer beyond the normal risk of cumulative actinic damage sustained during an individual's lifetime.

Reference

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Improving the Quality of Life of Patients With Actinic Keratosis[☆]



Mejorando en la calidad de vida de pacientes con queratosis actínicas

Actinic keratosis is one the most common dermatological complaints and accounts for 8.73% of routine dermatological consultations.¹ Although there are no data on the prevalence of actinic keratosis in Spain, rates in other countries are high (1.4%-60%) and the condition is more common the closer one lives to the equator. Actinic keratosis is also thought to be underdiagnosed due to low levels of patient awareness. In addition, its incidence is rising with the aging of the population and increasing levels of outdoor activity.² Actinic keratosis therefore represents a significant public health associated with a high utilization of health care resources and adverse effects on quality of life.

Studies of the epidemiology of actinic keratosis can provide very valuable information for improving field-directed approaches to treating this condition. A greater understanding of which patients are more likely to develop actinic keratosis and of their sun exposure behaviors will help to design primary prevention strategies aimed at achieving a long-term reduction in the incidence of actinic keratosis and nonmelanoma skin cancer. Finally, a greater understanding of how the disease and its treatments affect quality of life will help to design treatment algorithms that strike a balance between effectiveness and adherence and improvements in quality of life and management of health resources. The study in this issue is a step in this direction and opens the door to research that will improve the quality of care for persons with actinic keratosis.³

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