



VITILIGO PATIENT INFORMATION LEAFLET

What are the aims of this leaflet?

This leaflet has been written to help you understand more about vitiligo. It tells you what it is, what causes it, what can be done about it, and where you can find out more about it.

What is vitiligo?

Vitiligo is a condition in which areas of skin lose their normal pigment and so become white. It is common, and affects about 1% of the world's population.

What causes vitiligo?

The pigment that gives your skin its normal colour is melanin: cells known as melanocytes make it. The cause of vitiligo is not yet fully known but many think that it is a disease in which the body makes antibodies to its own melanocytes, and in doing so destroys them. After that, the skin cannot make melanin properly, and vitiligo is the result. In support of this idea is the way that people with vitiligo are more likely than others to have diseases, caused in much the same way, of other organs such as the thyroid.

Sometimes vitiligo seems to be triggered by an episode of sunburn. It affects men and women of all races equally, but is most easy to see in people with dark skins. It is not catching.

Is vitiligo hereditary?

About a third of people with vitiligo know of someone in their family who has it; but the exact type of inheritance has not yet been worked out. One problem here is that so many people have no idea if their relatives are hiding vitiligo under their clothing. If you have vitiligo, it does not follow that your children are sure to get it too.

What are the symptoms of vitiligo?

These fall into two groups:

1. The sun burns the pale areas very easily. This is sore, and when the burn has settled down, the pale areas of vitiligo will stand out, more strikingly than before, against a background of tanned skin.
2. Many people become embarrassed or depressed by the look of their vitiligo, and by the questions that other people ask them about it.

What does vitiligo look like?

The most common sites for vitiligo are:

- The exposed areas – vitiligo often begins on the hands and face.
- Around body openings: the eyes, nostrils, mouth, umbilicus, and genitals.
- In body folds: the armpits and groin.
- Anywhere your skin has been damaged, for example by a cut or a burn.
- Areas around pigmented moles (as part of “halo naevi”).
- In one rare (segmental) type, vitiligo crops up on just one part of the body.

Vitiligo is more obvious, but not more common, in people with a dark skin. Premature greying of the scalp hair can accompany vitiligo.

Vitiligo can start at any age, but about half of those who get it do so before they are 20. Its course is hard to predict, but it tends to progress slowly, with periods of stability, often lasting several years. The patches slowly change their shape and size, and the skin around them may be darker than normal. The hairs growing out of a patch of vitiligo may keep their normal colour or turn white too.

Some pigment comes back in a few patients but seldom does so completely. If it returns via the hair follicles, the areas do not look much better when they turn from white to speckled.

How will vitiligo be diagnosed?

The diagnosis is usually easy to make on the basis of the look of the patches (white with a normal skin texture) and the fact that the areas of vitiligo on the left side of the body roughly mirror those on the right. A Wood’s (ultraviolet) light can help to show up white areas that could have been missed in a pale-skinned person.

Once the diagnosis of vitiligo has been made, your doctor may want to check you for thyroid disease, and for other autoimmune conditions that are more common than usual in people with vitiligo.

Can vitiligo be cured?

Vitiligo occasionally goes away by itself, and some treatments may slow its progress, but a cure cannot be guaranteed.

How can vitiligo be treated?

The treatment of vitiligo does not always work, and you should discuss the options in detail with your GP or dermatologist. Often no treatment is needed other than good cosmetic cover.

Pigment can sometimes be brought back **by**:

1. **Using a strong corticosteroid cream.** This gets some pigment back in new and early patches - but side effects, such as thinning of the skin, are a real risk.
2. **Sunscreens.** The use of a sunscreen with a sun protection factor of 25 or higher helps to prevent burning of the white patches of vitiligo. In light-skinned individuals, it also minimises pigmentation of the skin around the patches of vitiligo.

3. **Phototherapy.**

PUVA treatment. In this, you will be given a Psoralen tablet to take by mouth, and then be exposed to Ultra Violet light of type A - hence the word PUVA. You will have to attend a skin department regularly and frequently, and probably for at least a year. Even then the chance of getting a reasonable amount of pigment back may only be about 50%. Localised small patches of vitiligo may be treated with a psoralen gel, paint, or cream, in combination with ultraviolet light of type A. *Narrow band ultraviolet light of type B is also sometimes used for vitiligo.*

4. **Surgical procedures.** These are still being developed and are not yet in general use.

5. **Removing the remaining pigment.** Finally, if the vitiligo has spread very widely, it may be easier to get rid of the small amounts of pigment that are left using a bleaching chemical (a hydroquinone) than to get the lost pigment back. The even white colour gained in this way may be less ugly than a mixture of dark and pale areas, but the social implications of becoming white all over must be discussed before this treatment is used.

What can I do?

- Remember that the sun is no longer your friend. The pale areas on your skin will burn easily in the sun and may even spread as a result; and tanning will make the contrast between the white and normal skin more obvious. Avoid the sun; use sunscreens and protective clothing.
- Keep your self-confidence high by making your skin look as normal as possible. Learn about the right way to hide the white areas with cosmetics. Good modern ones come in a range of colours, are hard to rub off, and can be waterproof.
- Don't waste time changing your diet - this never does much good.

Where can I get more information about vitiligo?

Links to patient support groups:

The Vitiligo Society, 125 Kennington Road, London SE11 6FS
www.vitigosociety.org.uk

Other Websites:

www.vitigosupport.com and www.nvfi.org

Web link to a detailed leaflet:

www.aad.org/pamphlets/Vitiligo.html

(While every effort has been made to ensure that the information given in this leaflet is accurate, not every treatment will be suitable or effective for every person. Your own doctor will be able to advise in greater detail)

**BAD PATIENT INFORMATION LEAFLET
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