



DERMOSCOPY AND SKIN IMAGING

## DERMATOSCOPIC EVALUATION FOR CORRECT DIAGNOSIS OF MELASMA

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**Introduction:** Melasma is an acquired hypermelanosis, characterized by symmetrical brown macules & patches, on photo-exposed areas of face. Multiple etiopathological factors are associated (pregnancy, oral contraceptives, genetics, hypothyroidism & sun exposure). It predominantly affects Fitzpatrick skin phototypes III, IV & V, of both women & men.

**Objective:** To compare the difference in diagnosing different types of melasma by clinical evaluation, Wood's lamp evaluation and dermatoscopic evaluation.

**Materials and Methods:** Source of data = facial melasma patients attending DVL out patient department.

Sample size & duration = 150 patients were enrolled in this study, carried out for 16 months (March 2013-June 2014).

**Results:** Melasma was predominantly noted in patients aged 31-40 years. Epidermal variety & malar pattern were commonly noted.

Epidermal melisma/Clinically/Wood's lamp/Dermatoscopy

Male/7/6/9

Female/49/65/90

Dermal melisma/Clinically/Wood's lamp/Dermatoscopy

Male/10/9/5

Female/84/49/29

Mixed melisma/Clinically/Wood's lamp/Dermatoscopy

Male/0/2/3

Female/0/19/14

Clinically epidermal variety was under-diagnosed, dermal type was over-diagnosed while mixed variety was not diagnosed. But this was correctly identified by the dermatoscope.

**Conclusion:** Dermatoscopy helps to delineate types of melasma, & aids us to provide better





treatment options to patients. It helps to monitor prognosis of lesions in each patient (advantage of digital recording of findings). Also, an accurate diagnosis can be reached without performing a biopsy on face.

