

Session Two

FACIAL PIGMENTED LESIONS: DIAGNOSIS AND TREATMENT

Joël Claveau

5:00 pm – 5:20 pm
Friday, Oct 27

Facial pigmented lesions are among the most difficult pigmented lesions to diagnose correctly. Differential diagnosis includes solar lentigo, seborrheic keratose, benign lichenoid keratosis, pigmented actinic keratosis, pigmented basal-cell carcinoma and melanoma in situ, lentigo maligna type. These days, dermoscopy has become an essential tool to diagnose pigmented skin lesions. It needs training, a systematic approach and a some personal experience to master this technique especially for facial lesions. However, skin biopsy is often required to better clarify the diagnosis of difficult lesions. Once malignant lesions are excluded, various therapeutic options are available to dermatologists for the treatment of solar lentigines including cryotherapy, laser and various topical treatments. Solagé® is a combination of 2% 4-hydroxyanisole (Mequinol) and 0.01% tretinoin that has demonstrated good effectiveness in the treatment of solar lentigines.

1. Stolz W, Schiffner R, Burgdorf WH. Dermatoscopy for facial pigmented skin lesions. *Clin Dermatol*. 2002 May-Jun;20(3):276-8
2. Ortonne JP, Pandya AG, Lui H, Hexsel D. Treatment of solar lentigines. *J Am Acad Dermatol*. 2006 May;54(5 Suppl 2):S262-71
3. Fleischer AB Jr, Schwartzel EH, Colby SI, Altman DJ. T. The combination of 2% 4-hydroxyanisole (Mequinol) and 0.01% tretinoin is effective in improving the appearance of solar lentigines and related hyperpigmented lesions in two double-blind multicenter clinical studies. *J Am Acad Dermatol*. 2000 Mar;42(3):459-67