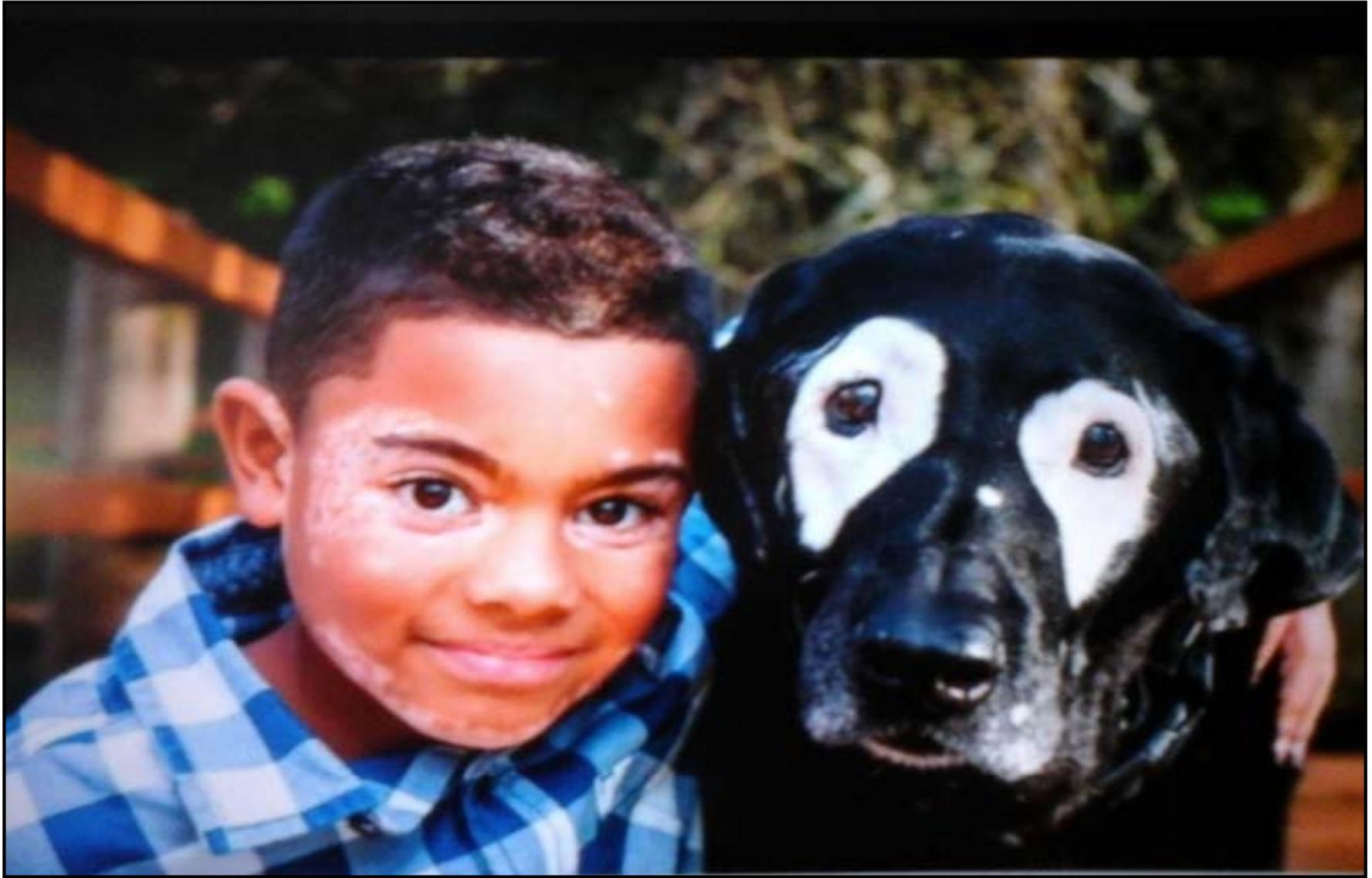


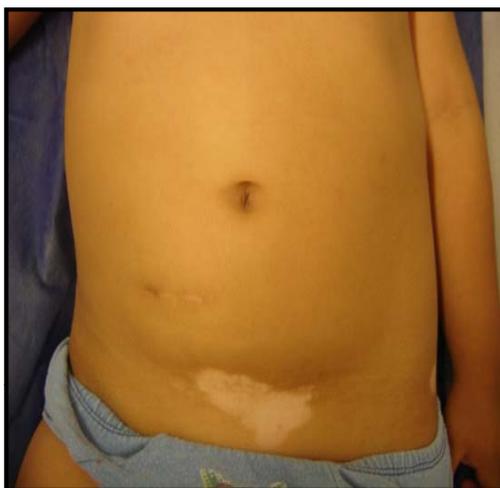
VITILIGO EN NIÑOS

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Carter y Rowdy



- *6 Años de edad*
- *2 años de evolución*
- *Poca rta a tópicos*
- *Rechazo a ir al jardín*
apodo: "Oso Panda"



Fototerapia UVBnb x 27



Vitiligo en niños

- ✓ *Enfermedad autoinmune*
- ✓ *Hipopigmentación 2ria destrucción melanocitos epidérmicos*
- ✓ *Genera gran afección de la imagen corporal*
- ✓ *Alteración calidad de vida - vergüenza, bullying*
- ✓ *Sentimientos de culpa de los padres con vitiligo*
- ✓ *Frustración ante la poca o falta de rta a tratamientos*
- ✓ *Dificultad en las coberturas médicas: “afección estética”*

- ✓ *Afecta un 1-2% de la población general.*
- ✓ *29- 50% inicia la enfermedad antes de los 29 años*
- ✓ *16- 25% antes de los 10 años*
- ✓ *Un 12-35%, familiar con enfermedad autoinmune*
- ✓ *Asociado otra autoinmune (tiroides, enfermedad celíaca, anemia perniciosa, gastritis crónica, diabetes, etc.)*
- ✓ *La asociación más frecuente enf. tiroidea*
- ✓ *Halo nevo (vitiligo perinevo)*
- ✓ *Fenómeno Köebner (traumas- tatuajes- piercing)*
- ✓ *Poliosis (leucotriquia)*

Circulating Autoantibodies and Autoimmune Comorbidities in Vitiligo Patients: A Multicenter Italian Study

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Maria Donata Diguseppe^{b,1} Maria Letizia Musumeci^{e,1} Dario Fai^{t,1}
Michele Pellegrino^{g,1} Enrico Pezzarossa^{h,1} Vito Di Lernia^{i,1}
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Original Paper

**HORMONE
RESEARCH IN
PEDIATRICS**

Horm Res Paediatr 2013;79:137–144
DOI: 10.1159/000348388

Received: September 4, 2012
Accepted: January 25, 2013
Published online: March 19, 2013

High Prevalence of Autoimmune Thyroiditis in Children and Adolescents with Vitiligo

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Vitiligo – Diagnóstico

- ✓ ***Dx Clínico: segmentario/no segmentario, luz Wood, biopsia***
- ✓ ***Dx Diferenciales:***
 - *Nevos acrómico / anémico*
 - *Micosis fungoide*
 - *Pitiriasis liquenoide crónica*
 - *Hipomelanosis macular progresiva*
 - *Genodermatosis/rasopatías*
 - *Eccematide acromiante*
 - *Máculas hipopigmentadas residuales post inflamatorias*
 - *Dermatosis ficticias*

Vitiligo Dx diferenciales



**Pityriasis alba -
Dra Larralde M**



**Micosis fungoide hipopigmentada -
Dra Larralde M**

Clinics in Dermatology (2014) 32, 430–434



ELSEVIER

Clinics in
Dermatology

Vitiligo as a systemic disease

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Abstract Vitiligo is an acquired depigmentary skin disorder of unknown etiology. Vitiligo is not only a disease of melanocytes of the skin. Human melanocytes are derived from the neural crest and are located on various parts of the body. The involvement of skin melanocytes is the most visible one, but a systemic involvement of melanocytes can be observed. Some types of vitiligo (nonsegmental vitiligo) may also be associated with various diseases, mainly with autoimmune pathogenesis. Vitiligo represents a spectrum of many different disorders with different etiologies and pathogeneses, causing a common phenotype: the loss of melanocytes and/or their products. This phenotype is always consistent with a systemic involvement.

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Vitiligo y Psoriasis



- ✓ 12 años
- ✓ Psoriasis desde los 5 a
- ✓ Vitiligo desde los 6 a
- ✓ Sobrepeso
- ✓ Acanthosis nigricans
- ✓ Riesgo S. metabólico
- ✓ Mala adherencia

¿Qué pedir?

- ✓ Hemograma completo
- ✓ Glucemia
- ✓ T4 libre, TSH
- ✓ Acs antitiroglobulina(ATG), antiperoxidasa (ATPO)↑
(más específico)
- ✓ Acs anti transglutaminasa IgA, IgA sérica
- ✓ Insulinemia (acantosis nigricans)
- ✓ Hepatograma (sobrepeso)
- ✓ Interconsultas: pediatría - psicodermatología

Quality of Life Impairment in Children and Adolescents with Vitiligo

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Abstract: Vitiligo significantly affects quality of life (QOL) in adults, but little is known about the effect on QOL of pediatric vitiligo and whether the extent, distribution, and duration of vitiligo are associated with QOL. We performed an online parental questionnaire-based study ($N = 350$) regarding children ages 0 to 17 years with vitiligo, including validated questions about body surface area (BSA), distribution, and age of onset of vitiligo, associated symptoms, and QOL using the Children's Dermatology Life Quality Index (CDLQI). Vitiligo negatively affected numerous aspects of and total CDLQI score (median 3.0, interquartile range 5.0). Their vitiligo lesions did not bother only 4.1% of teenagers ages 15 to 17 years, versus 45.6% of children ages 0 to 6 years and 50.0% of those ages 7 to 14 years ($p < 0.001$). There was no association between the child's age and whether the child's vitiligo bothered the parents ($p = 0.27$). The most bothersome sites of vitiligo lesions for children and parents were the face (25.6% and 37.4%, respectively) and legs (26.2% and 26.2%, respectively). Eighty-two patients (30.1%) reported itching and painful skin within the past week. Using multivariate ordinal logistic regression models, it was found that an affected BSA of more than 25% was associated with self-consciousness, difficulty with friendships and schoolwork, and teasing and bullying. Lesions on the face and arms were associated with teasing and bullying. The extent of vitiligo is associated with QOL impairment in children and adolescents, especially self-consciousness, but also bullying and teasing. Different distributions of vitiligo lesions are associated with different aspects of QOL impairment. Teenagers ages 15 to 17 years seem to experience the most self-consciousness of all pediatric age groups.

Trouble WITH SKIN

The aim of the questionnaire is to measure how much your skin problem has affected you OVER THE LAST WEEK. Please tick ✓ one box for each question.

OVER THE LAST WEEK

Very much
Quite a lot
A little
Not at all

1 

How itchy, 'scratchy', sore or painful has your skin been ?

Very much
Quite a lot
A little
Not at all

3 

How much has your skin affected your friendships?

Very much
Quite a lot
A little
Not at all

5 

How much has your skin trouble affected going out, playing or doing hobbies?

OVER THE LAST WEEK

Very much
Quite a lot
A little
Not at all

2 

How upset or embarrassed, self conscious or sad have you been because of your skin?

Very much
Quite a lot
A little
Not at all

4 

How much have you changed or worn different or special clothes/shoes because of your skin?

Very much
Quite a lot
A little
Not at all

6 

How much have you avoided swimming or other sports because of your skin trouble?

Children's Dermatology Life Quality Index

7a 

7a

If school time: How much did your skin affect your school work?

7b 

7b

If holiday time: How has your skin problem interfered with your holiday plans?

OVER THE LAST WEEK OR

Very much
Quite a lot
A little
Not at all

OVER THE LAST WEEK

Very much
Quite a lot
A little
Not at all

8 

How much trouble have you had because of your skin with other people calling you names, teasing, bullying, asking questions or avoiding you?

OVER THE LAST WEEK

Very much
Quite a lot
A little
Not at all

9 

How much has your sleep been affected by your skin problem ?

Hospital No.: _____
Name : _____
Age: _____
Address: _____

Diagnosis: _____
Date: _____
CDLQI SCORE: _____

CDLQI ©M.S. Lewis-Jones, A.Y. Finlay June 1993
Illustrations ©Media Resources Centre, UWCM, Dec 1996

10 

10

How much of a problem has the treatment for your skin been ?

Very much
Quite a lot
A little
Not at all

Please check that you have answered EVERY question. Thank you.

Consta de 10 items en lenguaje adecuado y comprensible (Lewis- Jones A.Y. Finlay Junio 1993). Los puntajes van de **0 a 3**, donde 0 no afecta para nada, 1 poco, 2 mucho y 3 bastante la calidad de vida. El puntaje total va de **0 a 30**, donde **0-1**: No afecta, **2-5** tiene poco efecto, **6-10** moderado efecto, **11 a 20** gran efecto y **21 a 30** extremado efecto en la calidad de vida.

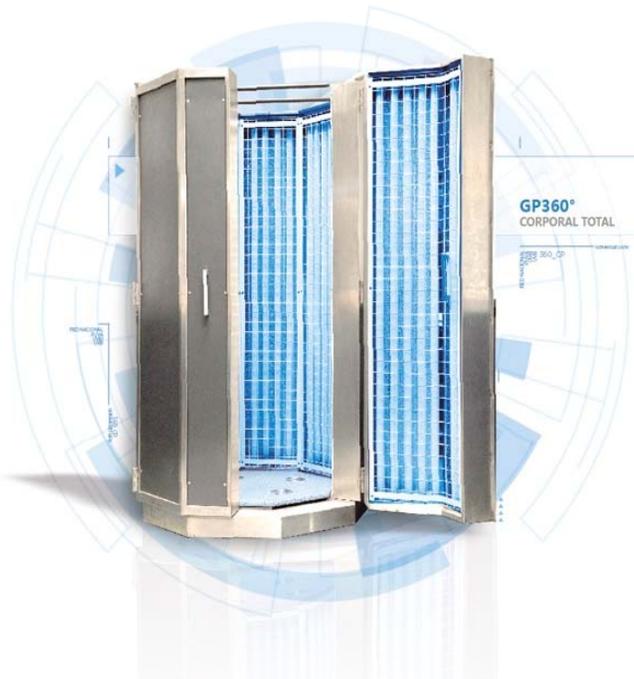
Vitiligo en niños

- ✓ **Tratamientos:** Respuestas variables, policonsultas, difícil adherencia y frustración, requiere contención. Zonas mejor rta cara, tronco, otras menor rta miembros (manos y pies)
- **Tópico:**
 - Corticoide tópico: hidrocortisona/ mometasona
 - Inhibidores calcineurina (tacrolimus 0,1%)
 - Análogos vit D (calcipotriol)
- **Helioterapia (sol)**
- **Fototerapia (UVBnb)**
- **Cirugía (microinjertos)**
- **Maquillajes**
- **Despigmentantes (hidroquinona) definitivos e irreversibles**

“Fotoeducación”

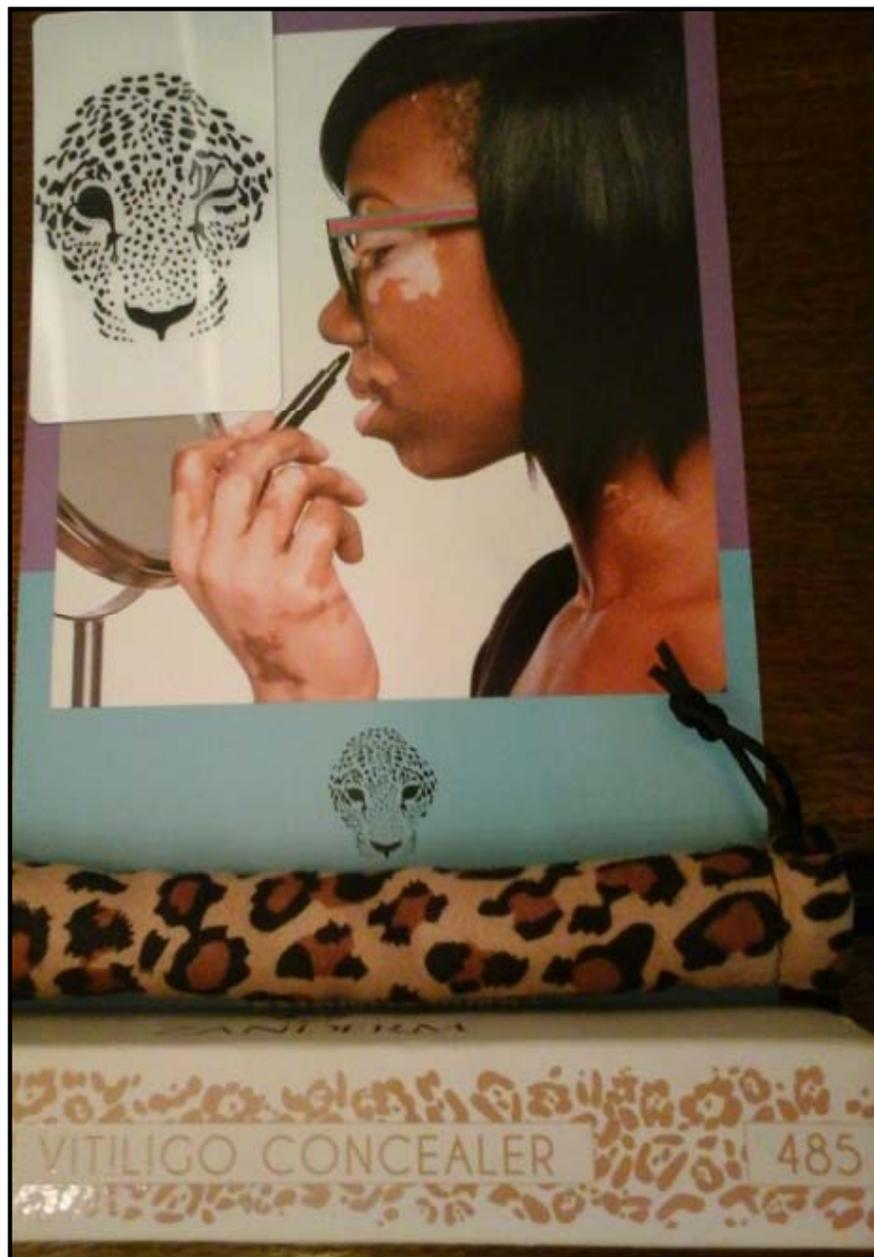


Fototerapia: UVB banda angosta/ laser eximer



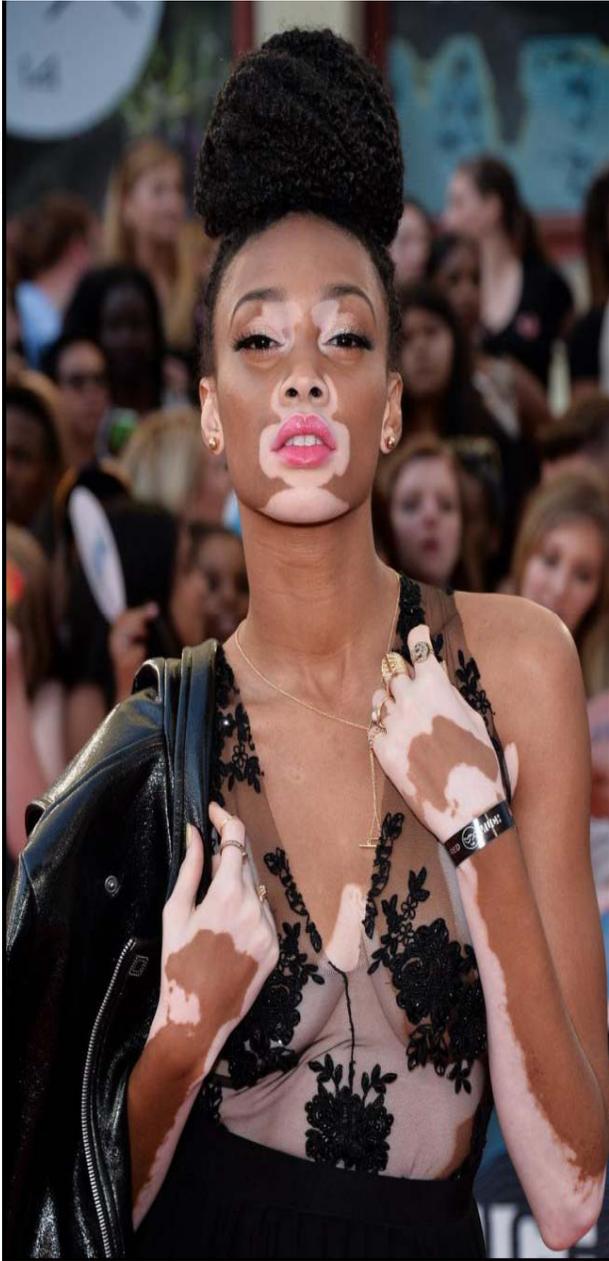
Dosis en mJoules/cm²

- TL01 100w



COMENTARIOS FINALES

- ❖ *Enfermedad autoinmune*
- ❖ *Inicia en la infancia*
- ❖ *Factores gatillantes y perpetuadores*
- ❖ *Gran afección de la imagen corporal y la calidad de vida*
- ❖ *Concepto de enf sistémica, oportunidad para rastrear otras afecciones autoinmunes asintomáticas, intervención temprana*
- ❖ *Requiere manejo interdisciplinario: pediatra, dermatólogo, psicólogas, endocrinólogo, maestros, familia, amigos....*
- ❖ *Disponibilidad de tratamiento tópico, fototerapia, camuflaje, injertos...*
- ❖ **Fotoeducación**
- ❖ *Se requiere apoyo sist salud y grupos de pacientes con vitiligo*



GRACIAS!!!

***25 Junio día mundial
del vitiligo***