

VITILIGO: WHAT YOU NEED TO KNOW

WHAT IS VITILIGO?

The cells in the skin responsible for one's skin and hair colour are called melanocytes. In vitiligo, melanocytes in certain areas of the skin are destroyed (die-off) resulting in the development of white patches of skin.

WHO GETS VITILIGO?

The risk (incidence) of developing vitiligo is approximately 1.0 - 2.0% (one or two people per 100), although in some darker skin races the incidence can be as high as 4-5%. 10-15% of vitiligo patients have a first degree relative with the disease.

WHY DOES VITILIGO HAPPEN?

The exact cause of vitiligo remains unknown. What we do know, is that in a genetically predisposed individual, a trigger or stressful event causes what is termed oxidative stress within melanocytes, which then initiates autoimmune inflammation in the skin where activated white blood cells (T-lymphocytes) and inflammatory chemicals (cytokines) target the melanocytes causing their destruction.

WHAT ARE THE DIFFERENT TYPES OF VITILIGO?

Depending on where vitiligo first appears and how it spreads after onset, Dermatologists have classified different "clinical" types of vitiligo as follows:

Focal vitiligo refers to vitiligo that appears suddenly but then remains confined to a small limited area

Segmental vitiligo normally appears in childhood, only affects one side of the body, initially spreads quickly but within a year stabilises and then remains unchanged throughout life.

Acral vitiligo refers to vitiligo that appears and tends to remain predominantly around the mouth, fingers and toes.

Generalised vitiligo affects widespread areas of the skin and is often symmetric (seen in the same area and extent on each side of the body).

WHEN DOES VITILIGO STOP SPREADING?

There is no way to predict what type of vitiligo a person will develop, on what part of the body it will appear, nor how slow or fast it will spread.

DOES STRESS CAUSE VITILIGO?

Many studies around the world have shown that stress may have contributed to the onset of vitiligo. In some studies, up to 65% of responders could associate a significant stress with the onset of their vitiligo. Such stress, included not only negative stress such as loss of loved ones by death or separation, relocation resulting in loss of friends, accidents or major illness, marital or financial problems, but also a stress that would normally be seen as a positive life event such as having a baby, starting a new business or renovating a home.



WHAT CAN I DO IF I AM NOT COPING WITH MY VITILIGO?

The change in one's appearance brought about by having vitiligo, and the concern caused by seeing more vitiligo appearing over time in areas such as the face hands and genitals can affect a person's psyche and self-esteem leading to feelings of embarrassment, anxiety, shame and depression.

It is vital to gain control of your life rather than letting your vitiligo gain control of you! This starts by maximising treatment and discussing your feelings with your GP and/or Dermatologist. If needed, your Doctor can refer you to a Dermatologist with a special interest in vitiligo for maximal treatment. Other medical specialists such as psychiatrists or psychologists may help deal with problems of anxiety, depression and low self-esteem

Equally important and helpful, is for vitiligo sufferers to reach out to family and friends for support and to make contact with vitiligo groups and organisations where they can be put in touch with people with vitiligo just like themselves, who have felt exactly the same way in the past.

Utilising this "team" approach, vitiligo patients can return to a happy, productive and positive life.

DOES MY VITILIGO REQUIRE URGENT MEDICAL ATTENTION?

Generalised vitiligo, due to its rapid spread and aggressive nature, or vitiligo in children needs early medical intervention to stabilise the disease and prevent further unnecessary spread. Vitiligo associated with inflammation (that is redness and itch or soreness), multiple different shades of colour, or vitiligo that appears like multiple confetti size spots also requires urgent specialist medical attention.

If you are worried that your vitiligo requires urgent medical attention, advise your GP or Dermatologist of your concerns immediately.

CAN VITILIGO BE CURED?

Unfortunately, at this time there is no cure for vitiligo, but there is effective treatment.

WHAT IS THE BEST TREATMENT FOR VITILIGO?

The earlier one commences treatment the better the results. In addition, areas around the head and neck end to respond best to treatment whilst vitiligo of the fingers, toes and genitals tends to respond less favourably

There is no one size fits all when it comes to treating vitiligo. Maximum benefit is usually achieved by commencing multiple different treatment modalities as well as addressing the psychosocial impact of the condition. Treatments that should be considered in all patients include: general skin care advice, medical treatment (topical and/or oral), light therapy, surgical treatment (where indicated), dietary and nutritional support, cosmetic camouflage and psychological support

HOW LONG DOES TREATMENT TAKE TO WORK?

Vitiligo does not respond to treatment in days or weeks.

With all medical and narrow band UVB based treatment, often 3-6 months may be required before a positive response is seen with maximal benefit often not seen for up to a year.