Dermatology Practical & Conceptual

Dermoscopy for Facial Leukotrichia in Vitiligo: an Important Step for a Better Treatment Decision

Mohammed Ibrahim AlJasser[1,2]

1 Division of Dermatology, King Saud bin Abdulaziz University for Health Sciences, Riyadh, Saudi Arabia
2 King Abdullah International Medical Research Center, Riyadh, Saudi Arabia

Citation: AlJasser MI. Dermoscopy for facial leukotrichia in vitiligo: An important step for a better treatment decision. *Dermatol Pract Concept*. 2022;12(3):e2022114. DOI: https://doi.org/10.5826/dpc.1203a114

Accepted: November 16, 2021; **Published:** July 2022

Funding: None.

Competing interests: None.

Corresponding author: Mohammed I. AlJasser MBBS FRCPC, Associate Professor, Division of Dermatology, King Saud bin Abdulaziz University for Health Sciences, P.O. Box 3660, Riyadh 11481, Saudi Arabia, Tel: +966-11-4299999 ext. 95211, Fax: +966-11-429 9999 Ext. 95148, E-mail: jasserm@ksau-hs.edu.sa; mj_derma@hotmail.com

Case Presentation

A 14-year-old female with stable generalized vitiligo (body surface area 1%) was being treated with excimer laser and tacrolimus 0.1% ointment. She showed some re-pigmentation in some body sites such as the knees. However, facial patches showed very minimal re-pigmentation despite receiving many sessions of excimer laser. Dermoscopy showed leukotrichia affecting the whole vitiliginous facial areas (Figure 1). The patient was therefore advised to undergo melanocyte transplantation. Topical and laser therapy were discontinued.

Teaching point

Leukotrichia within vitiligo is known to be associated with poor response to medical and light therapy. Therefore, it is important to identify leukotrichia in order to predict response to treatment within a given body site. It is often difficult to detect leukotrichia clinically especially in areas with fine vellus hair such as the face. Dermoscopy has recently emerged as a valuable tool in the assessment of vitiligo, especially for disease activity [1,2]. We find dermoscopy very helpful in detecting leukotrichia that cannot be seen clinically by the naked eye, especially for facial patches.

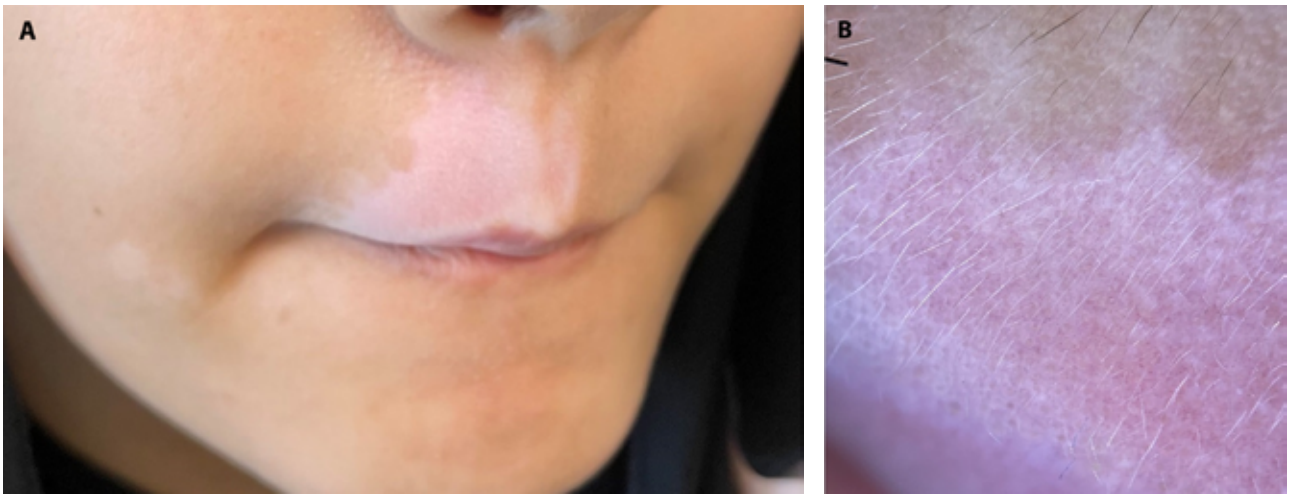

Figure 1. (A) Facial vitiligo with minimal response to many sessions of excimer laser. (B) Polarized dermoscopy clearly demonstrate multiple white vellus hairs within vitiliginous skin . Leukotrichia was difficult to appreciate with the naked eye.

References

1. Jha AK, Sonthalia S, Lallas A. Dermoscopy as an evolving tool to assess vitiligo activity. *J Am Acad Dermatol*. 2018;78(5):1017–1019. DOI: 10.1016/j.jaad.2017.12.009. PMID: 29229577.
2. Kumar Jha A, Sonthalia S, Lallas A, Chaudhary RKP.. Dermoscopy in vitiligo: diagnosis and beyond. *Int J Dermatol*. 2018;57(1):50–54. DOI: 10.1111/ijd.13795. PMID: 29076154.