

SOUTHWESTERN NEWS

Media Contact: Staishy Bostick Siem
214-648-3404
staishy.siem@utsouthwestern.edu

NEW LIGHT THERAPY OFFERS EFFECTIVE TREATMENT FOR PATIENTS WITH MORPHEA, ECZEMA

DALLAS – Jan. 28, 2004 – Dermatologists at UT Southwestern Medical Center at Dallas have begun offering a new, localized form of phototherapy that is more effective for several skin diseases than older methods.

UVA-1 phototherapy, available at only a few institutions in the United States, allows dermatologists to use ultraviolet rays to treat patients with certain skin diseases. It works by resetting the immune system.

The new therapy emits a narrow band of light that has the potential to penetrate more deeply into the skin, is more focused and intense than older technology, and doesn't usually burn the skin in therapeutic doses.

"This is a therapeutic way to administer a very specific spectrum of ultraviolet light, one component of sunlight," said Dr. Heidi Jacobe, assistant professor of dermatology who oversees the phototherapy unit. "We are harnessing a very small part of the sun and filtering out aspects that we don't want – like the burning."

Phototherapy is beneficial because it can target large areas of skin without the side effects of oral or topical medications. UVA-1 is used to treat some patients with inflamed skin, or eczema, especially those with hand dermatitis or dyshidrosis – a condition that causes blisters on the palms of the hands and soles of the feet – and morphea, thought to be an autoimmune disease that is localized to the skin and causes thickening and discoloration.

Before UVA-1, there were no other good treatments for morphea, a relatively rare disorder.

"Creams often have poor results, and oral medicines have lots of toxicity," Dr. Jacobe said. "It's exciting to have something new to treat morphea patients."

During phototherapy sessions, a machine emitting rays of UVA light is directed at the area of the body being treated. A session takes about 12 minutes for each area being treated, and

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patients can receive treatment several times a week – more often than with older phototherapy technology – because the light doesn't burn. The light can be hot, and some patients experience redness and itching during treatment, but those side effects disappear quickly after the session, Dr. Jacobe said.

Patients usually have the therapy four to five times a week at first and then two to three times a week later. Visits become less frequent as treatment progresses. Improvements are usually visible in about three weeks, and the disease often goes away after a few months, Dr. Jacobe said.

Medicare and many insurance plans cover the cost of the treatments. Prospective patients may call 214-648-5750 for more information.

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