

#C 845430 : MAJOR MEDICINE / DERMATOLOGY

KEY WORD: PRURITIC PAPULAR ERUPTION (PPE) / UVB

NARUEMOL SITHBURANA : ULTRAVIOLET B PHOTOTHERAPY FOR PRURITIC PAPULAR ERUPTION OF THE ACQUIRED IMMUNODEFICIENCY SYNDROME : A DOUBLE - BLIND RANDOMIZED, PLACEBO - CONTROLLED TRIAL. THESIS ADVISOR : ASSO. PROF. WANNASRI SINDHUPHAK,M.D. THESIS COADVISOR : INSTRUCTOR KIAT RUXRUNGTHOM,M.D. 60 pp. ISBN 974-637-216-5

The study is to evaluate the clinical efficacy of Ultraviolet B (UVB) phototherapy in pruritic papular eruption that is a chronic dermatosis frequently seen in human immunodeficiency virus (HIV)-positive patients by a double - blind randomized, placebo - controlled trial

Fourteen HIV-positive patients with PPE were treated with unilateral UVB phototherapy in a bilateral comparison study. The treatments were given five times per week for 2 weeks. The number of papules in a specified area of skin and the intensity of pruritus were monitored before, during and after therapy. Systemic immune function was evaluated before and after therapy.

The number of papules decreased after UVB treatment both in the treated and untreated side of 13 out of 14 patients. The decrease was statistically significant ($P < 0.001$). No significant difference in pruritus and absolute numbers of CD4 T lymphocytes was noticed between before and after therapy. The duration of the disease did not relate to the decrease of the number of papules. The mean time of recurrence was 4.2 ± 3.76 weeks (2 -13 weeks).

The decrease in the number of papules of the treated side was not significantly different from the controlled side which may be due to the systemic effect of UVB or spontaneous resolution of PPE. The treatments given five times per week may cause xerosis, so the pruritus did not decrease.

From the study, the effect of UVB on PPE could not be concluded. There should be further studies by increasing the sample size, changing the protocol, or using the former protocol and dividing samples into 3 different groups; one receiving UVB, another receiving placebo, and the other receiving both UVB and placebo in the same patient. The plasma levels of HIV RNA and CD4+ T lymphocyte count should be monitored before and after treatment to indicate the progression of AIDS.

ภาควิชา.....อายุรศาสตร์

สาขาวิชา.....อายุรศาสตร์/ทจวิทยา

ปีการศึกษา.....๒๕๕๐

ลายมือชื่อนิสิต..... นฤมล สิทธิบุรณ

ลายมือชื่ออาจารย์ที่ปรึกษา.....

ลายมือชื่ออาจารย์ที่ปรึกษาร่วม.....