

reating actinic cheilitis with dynamic phototherapy.

Actinic cheilitis, which mainly affects the lower lip vermilion, can progress into an epidermoid carcinoma for which the metastatic risk is four times higher than a cutaneous epidermoid carcinoma.

Therapeutic approaches include cryotherapy, surgical excision, CO₂ laser ablation, topical fluorouracil, retinoids and imiquimod. Dynamic phototherapy, already indicated in the treatment of actinic keratoses, superficial basocellular carcinoma and Bowen's disease, was evaluated in 10 patients presenting actinic cheilitis. The protocol consisted of applying 20% aminolaevulinic acid as a photosensitizing agent and 570-670 nm radiation at a dose of 40 J/cm² (2 sessions with a 1-week interval). The 3-month evaluation showed a complete clinical response in 90% of subjects and a complete histological response in 80% of cases. The cosmetic result was judged as excellent in 60% and 80% of patients respectively, depending on whether this result was judged by the investigator or the patient himself/herself. These interesting results should be put into perspective because there was no long-term follow-up which means that the level of recurrence cannot be determined.

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