

Study report on “Losterin” cream clinical effectiveness in complex therapy for psoriasis.

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“Losterin” cream is a non-hormonal medication with an active complex of active components – resin-free naphtalan (3%), urea (10%), salicylic acid (0,1%), D-panthenol, Japanese pagoda tree extract, almond oil, which possess anti-inflammatory, keratolytic, moisturizing, antiseptic and regenerative effect.

Study goal:

- to evaluate “Losterin” cream effectiveness for patients with psoriasis;
- to evaluate an objective dynamic of pathology process by measuring PASI index during “Losterin” cream application.

Methods and materials of study.

Medication effectiveness evaluation has been held in State Clinical Hospital № 14 named after Korolenko and in a treatment and consultation department “Venera center” among 30 patients with psoriasis. 20 of patients (main group) applied “Lorestin” cream externally together with the basic dexamethasone cream therapy, the other 10 (control group) used a complex method - dexamethasone cream, salicylic paste, dermatologic paste. All patients received general therapy (normal saline 400 ml intravenously by drop infusion, or thiosulfate 30% intravenously by drop infusion, hepatoprotectors and vasoprotectors, antihistamines, retinol, vitamins of B group), and also the treatment of comorbidity (if required).

Patients aged from 21 to 70 were involved in the study (12 men and 18 women). The disease duration was from 2 to 15 years. Skin process was characterized by the different degree of prevalence rate. Statistically, vast differences between the groups age, sex and clinical state wise, were absent.

The surveillance lasted for 28 days. At that time, the control was held in following prescriptions, therapeutic effectiveness was evaluated daily. The overall course effectiveness was evaluated during the last checkup.

Study methods included psoriasis severity score among the patients of main group and control group based on PASI index.

All patients went through clinical and laboratory tests (clinical urinary and bio-chemical blood tests).

PASI index was defined based on the effected body area and main symptoms intensity – erythema, infiltration, exfoliation - according to a points system. The patients demonstrated moderate level of psoriasis (PASI from 10 to 20). Average PASI for the main group was 17,5, and for control group – 16,9. Criterion for therapeutic effectiveness of the treatment was a disease clinical manifestation and PASI index lowering.

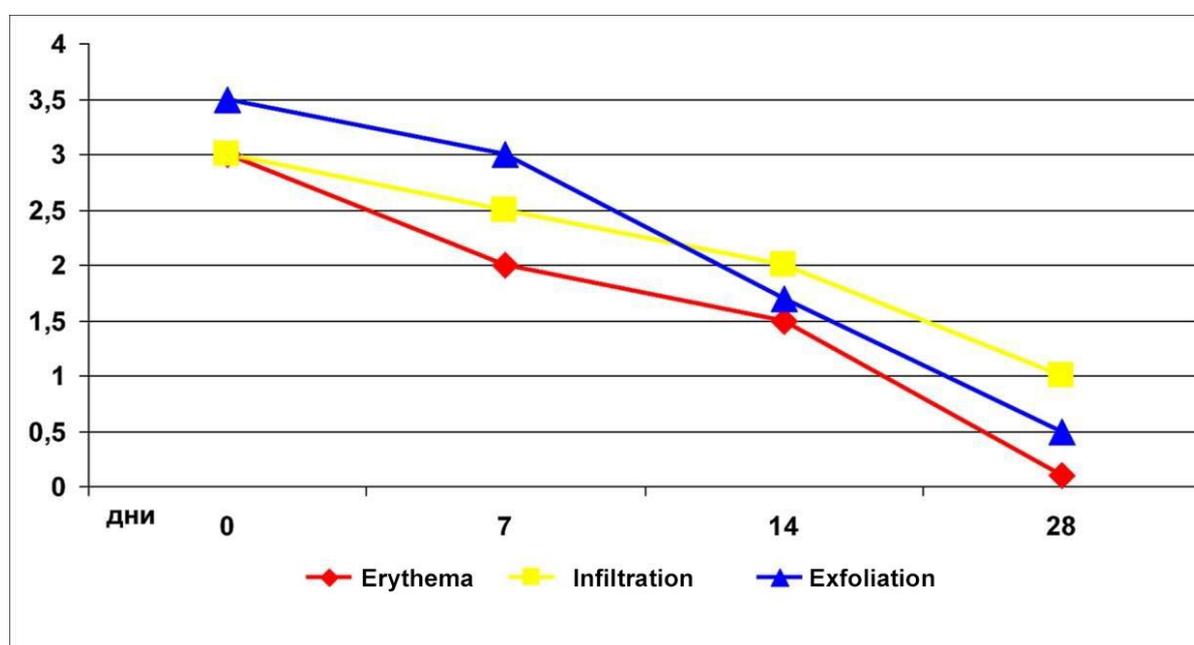
Application method of “Losterin” cream:

Medication was applied on effected areas twice a day. There was no limitation regarding the area of application.

Study result:

“Losterin” cream application combined with a basic therapy demonstrated a positive dynamics on skin – it was accompanied by inflammation reduction, termination of plaques peripheral growth. By day 14 of performed treatment, visual degree of erythema, swelling and exfoliation intensity had decreased. By day 21 of the treatment, the majority of patients in main group noted infiltration reduction in the central part f plaques and an appearance of pseudoatrophic Voronov’s rim. On the day 28 of treatment, the majority of patients – 12 (60%) experienced clinical remission, the rates of exfoliation, erythema and infiltration lowered from 3,5, 3,5 and 4,0 points to 0,5, 0, 1,0 accordingly (Pic. 1).

Pic. 1. Skin clinical implications regress among patients with psoriasis during Losterin cream application



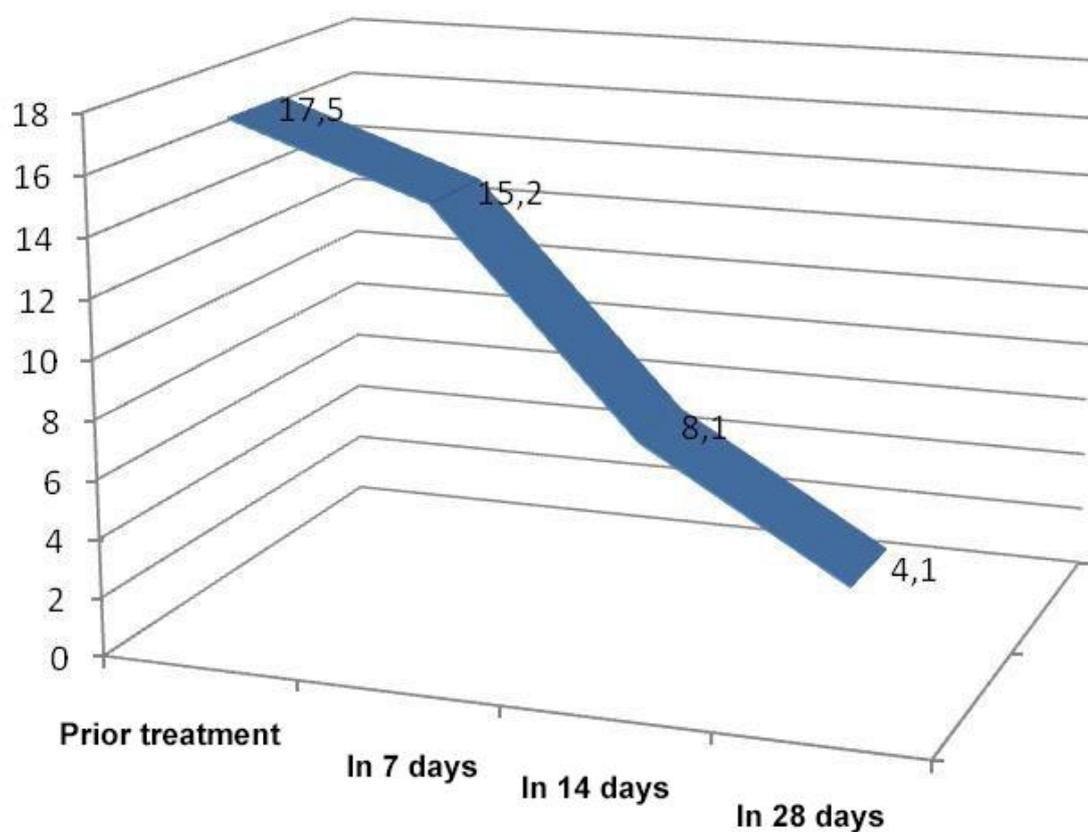
PASI index in the main group had lowered among 12 (60%) of patients (from 17,5 to 3,1), 6 (30%) of patients noted a significant improvement (PASI lowered by 65%), the rest 2 (10%) – experienced insignificant improvement (PASI lowered by 30%). At average, PASI index lowering among the patients in the main group was registered at 77% (from 17,5 to 4,1) and clinical recovery was registered in 90% of the cases (Pic.2)

Side effects and complications were not noted in the main group. Clinical urinary and biochemical blood tests after the treatment were within normal limits. All patients evaluated Losterin cream tolerance and effectiveness as good and very good.

The treatment effectiveness between the patients in control group was lower:

5 (50%) of them developed remission, 2 of the patients noted a significant improvement, 3 of the patients noted insignificant improvement.

Pic 2. PASI index dynamics among patients with psoriasis during Losterin cream application in a combination with complex therapy



Conclusion

Thus, “Losterin” cream is an effective medication for psoriasis disease complex treatment. In 90% of the cases, after 28 days of medication application in complex therapy there was noted a positive clinical effect. “Losterin” cream does not possess any negative side effects, well tolerated and may be recommended for a complex therapy of psoriasis, in under inpatient treatment, as well as outpatiently.

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