

INFORMATION FOR PATIENTS

Phototherapy

(including TLO1, systemic PUVA and local PUVA)

This leaflet has been written to help you understand more about phototherapy.

What is phototherapy?

Phototherapy means the use of light to treat medical conditions. Natural sunlight has been known to be beneficial in certain skin disorders for many years. It is the ultraviolet part of the radiation produced by the sun that is used in phototherapy, in particular ultraviolet A (UVA) and ultraviolet B (UVB) wavelengths.

Patients can be treated with a small part of the UVB spectrum (narrowband UVB) or UVA spectrum in combination with a sensitiser (a chemical that increases the effect of UVA on the skin) called psoralen. This treatment is known as PUVA – Psoralen with UVA).

How does phototherapy work?

Ultraviolet light reduces inflammation of the skin and can help in various inflammatory skin disorders. However, although it can cause skin conditions to clear, this is usually temporary and not a cure.

PUVA is a more potent form of treatment, so is usually reserved for people who do not respond to UVB.

What conditions can be treated with phototherapy?

Psoriasis is the most common condition treated with ultraviolet light, although a variety of other common conditions may benefit, including atopic eczema, other forms of dermatitis, polymorphic light eruption, generalised itching, pityriasis lichenoides, cutaneous T cell lymphoma, lichen planus, vitiligo and many others that are less common (disseminated granuloma annulare, morphea, and so on).

What does phototherapy involve?

Ultraviolet treatments are administered in the hospital outpatient's department. The first few treatments will often be very short and the duration of exposure to ultraviolet light will gradually increase.

A visor or goggles will be worn to protect your face and eyes dependent upon the extent of your skin condition.

- **TLO1** – you attend the Dermatology department three times a week (Monday, Wednesday and Friday) for approximately eight weeks.

- The treatment is administered using a walk-in cabinet containing fluorescent light bulbs.
- **Systemic PUVA** - you attend the Dermatology department twice a week (Monday and Friday) for approximately eight weeks. The treatment is administered using a walk-in cabinet containing fluorescent light bulbs.

Systemic PUVA treatment involves making your skin sensitive to UVA by means of a product known as psoralen, which is available in two forms:

- **Tablet PUVA** - psoralen tablets are taken two hours before exposure to the UVA light. These should be taken with a light snack.
- **Bath PUVA** - psoralen solution is added to an 80 litre bath of warm water in which you will soak for 15 minutes.

Suitable sunglasses (those that filter all UV light) must be worn for:

- 24 hours after ingestion of psoralen tablets.
- 4 hours after bath PUVA.

- **Local PUVA** – you attend the Dermatology department twice a week (Monday and Friday of each week) for approximately 12 weeks. The treatment is administered using specially designed boxes containing fluorescent light bulbs.

Local PUVA treatment involves making your skin extra sensitive to UVA by means of a psoralen, which is a solution added to a bowl containing five litres of warm water for a 15 minute soak.

You then wait for 30 minutes, to optimise the effects of psoralen sensitising the skin, before exposure to the UVA light.

What reason might prevent you having phototherapy?

- If you are unable to attend regularly for treatment.
- If you are unable to stand unaided for up to ten minutes.
- If your skin condition is made worse by natural sunlight.
- If you have xeroderma pigmentosum or lupus erythematosus.
- If you have had a skin cancer.
- If you are taking medicine which suppresses your immune system, such as ciclosporin or methotrexate.
- If you are pregnant.

Your doctor may decide that phototherapy treatment is not suitable for you if you are very sensitive to sunlight, taking medicines that make you more light sensitive to sunlight, or if your skin has been damaged by sunlight, sunbeds or previous ultraviolet treatments.

Do I need to avoid anything whilst having PUVA?

- Medicines that make you more light sensitive to ultraviolet light. You should inform the phototherapy staff of any new medicines prescribed or purchased, including herbal preparations.
- Additional exposure or the use of sunbeds.
- Excessive quantities of foods such as celery, carrots, figs, citrus fruits, parsnips and parsley – these can make you more sensitive to ultraviolet light.

- Perfumed products.
- Creams, ointments and lotions other than moisturiser (four hours prior to treatment), unless directed by your doctor or phototherapy staff.
- Short haircuts, as they may result in burning of previously covered skin.

What are the potential side effects of phototherapy?

The short-term side effects of phototherapy may include:

- Redness and discomfort (sunburn).
- Dry and itchy skin.
- Rashes – a sunlight-induced rash called polymorphic light eruption may develop whilst receiving ultraviolet light.
- Cold sores – if you are prone to these it is advisable to cover the area usually affected with sun block when having ultraviolet treatment.
- Blisters in areas of psoriasis.
- Worsening of skin disease.

Potential long-term side effects of phototherapy include:

- Premature skin ageing.
- Skin cancer - the risk of skin cancer is related to your total lifetime exposure to ultraviolet light, and other factors such as how easily you burn in the sun. The risk is higher with repeated courses of phototherapy.

A practical point when attending for phototherapy

Use a good sunblock every day, but on treatment days not until after your phototherapy.

Contact details

If you develop any discomfort or redness of the skin after treatment please contact the Dermatology nursing staff on telephone 01623 672310.

The department is open Monday to Friday, from 9am to 5pm.

Please note we are closed weekends and bank holidays. During these times we advise you to contact your own doctor (GP).

As a basic guide when your skin has developed redness/soreness:

- Bathe in cool water.
- Apply a moisturiser as frequently as needed to relieve soreness.
- Apply a prescribed steroid based cream, as directed, to the affected areas.

Useful websites

- www.bad.org.uk
- www.dermnetnz.org
- www.psoriasis.org

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.

External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them.

If you require a full list of references for this leaflet, please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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