

Clinicopathological Features of Superficial Morphea and a Novel Therapeutic Outcome of Excimer Light Therapy

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Introduction

Nowadays, psychological dissatisfactions that result in low self-esteem are linked to the quest for the ideal body. The body was undervalued in recent decades, but it is now overvalued and seen as a valuable good. Because of this, there has been an alarming rise in the demand for invasive or noninvasive therapies in aesthetic medicine. Cellulite, also known as gynoid lipodystrophy and edematous fibrosclerotic panniculopathy, is one of the most prevalent physical dissatisfactions that lead to complaints among women after adolescence. This is a chronic aesthetic condition that primarily affects the gluteus and thighs and results from metabolic and anatomical disorders of the skin and subcutaneous tissue. The appearance of the body's contour is altered visibly as a result of the condition. Damage to the fibrotic septum causes abnormalities including depression and elevation of the skin relief, sometimes known as "orange peel" or "cottage cheese." There is various examination techniques used to make the cellulite diagnosis that are not well defined.

Description

A system of clinical evaluation for cellulite was created in 1978 by Nurnberger and Muller, who graded the condition's severity from zero to three. The measure is used as a benchmark for evaluating aesthetic treatments, but it has drawbacks because it does not assess the morphological factors that influence the degree of cellulite. A new scale for assessing the severity of cellulite was developed, and it included the Nurnberger and Muller scale as well as evaluations of the texture of the skin, including the number and depth of depressions, classification of the skin's morphological look, and degrees of faccidity. The cellulite is categorised as light (1 points-5 points), moderate (6 points-10 points), and severe (11 points-15 points) based on the sum of the scores for each item. The authors claim that the tool affects how the treatment is delivered and its outcome stress, the authors came to the conclusion that one independent application of ESWT can enhance the aspect of cellulite. The oxidative stress of the adipose tissue, which is potentialized by the degree of inflammation and Topical agents like cosmetics, ultrasound, radiofrequency laser therapy, therapeutic massage, vibration/oscillation platform therapy, carboxytherapy,

intense pulsed light, and most recently Extracorporeal Shock Wave Therapy (ESWT) have all been suggested as therapeutic modalities for the treatment of cellulite. For the treatment of cellulite, a number of therapeutic approaches and associations have been created; however, science has been showing that cellulite is a complex metabolic condition that is, in some ways, mysterious. As a result, there is currently no ground breaking therapy that can effectively treat cellulite. Nevertheless, technological advancement has brought us new opportunities for the restoration and enhancement of health. The current finding supports the first publication on ESWT therapy, which was published in 2005 and in which the researchers evaluated the independent and combination forms of ESWT with two weeks of decongestive therapy. Because the therapy can significantly lower the levels of plasma Malondialdehyde (MDA), a biomarker of the level of oxidative subsequent degree of tissue hypoxia, leads to an imbalance in the production and generation of free radicals and is one of the characteristics of cellulite. With the aim of reducing cellulite's degrees, enhancing the appearance of the skin, and reestablishing quality of life with results that last even after treatment, it can be said that ESWT using a magnetic generator and applicator by radial waves is effective and safe. Morphea, also known as Localised Scleroderma (LS), is a rare form of connective tissue fibrosis that affects both the skin and underlying tissue. The condition is characterised by an excess buildup of collagen, which thickens the skin. The reticular dermis (traditional morphea) is often where collagen is deposited, though it can also spread into the subcutis (subcutaneous morphea). A rare condition called Superficial Morphea (SM) is distinguished by the localised deposition of additional collagen in the papillary and higher reticular dermis. There is disagreement over this variant's relationship to other atrophodermic disorders, despite the fact that there are few studies outlining the clinical and pathological aspects of this variant. The majority of earlier findings on superficial morphea depicted the lesions as pigmented patches or moderately indurated plaques. The lesions are typically numerous and primarily seen on the trunk and intertriginous areas. Morphea or confined scleroderma is an unprecedented immune system and fiery illness which influences patients of all ages. Regardless of whether morphea sores present foundational side effects as myalgias or joint pain, it is particular from fundamental sclerosis since it doesn't relate Raynaud's peculiarities or sclerodactyly, which are experienced in fundamental scleroderma.

Conclusion

The most widely recognized type of morphea in kids is 'en upset de saber', which can adjust the neighborhood life structures by profound tissue contribution. Conversely, the most successive structure that influences grown-ups is addressed by delineated morphea. The underlying sores present a fiery stage that appears as erythematous plaques, in some cases joined by edema. In later stages, the irritation diminishes and the sores become sclerotic to atrophic. Treatment is most gainful when started in the provocative stage. Effective use of high strength steroids alongside phototherapy exhibits the best outcomes in the dynamic period of the illness. Confined shallow morphea can be treated with the excimer laser (utilizing bright sort blight, in scope of 308 nm) assuming effective steroid organization shows no critical clinical improvement. Phototherapy with bright light is fit for diminishing irritation and may likewise have immunomodulatory impacts.

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