

## CLINICAL AND TRICHOSCOPIC EVALUATION OF THE EFFECTIVENESS OF COMPLEX TREATMENT OF ABSCESSING PERIFOLLICULITIS OF THE SCALP

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<b>Heading</b>	CLINICAL OBSERVATIONS
<b>Type of article</b>	Scientific Article
<b>Annotation</b>	<p><b>Introduction.</b> Abscessive perifolliculitis of the scalp (APS), also known as dissecting cellulite of the scalp or Hoffmann's disease, belongs to the chronic purulent-destructive follicular apparatus of the scalp. The disease is characterized by the formation of deep nodules, abscesses, fistulas and progressive scarring, which leads to the development of cicatricial alopecia.</p> <p>Despite its relatively low prevalence, APS has a significant clinical and psychosocial burden, affecting mainly men of working age. The difficulty of timely diagnosis, frequent long-term observation by doctors of other specialties and untimely initiation of pathogenetically oriented therapy contribute to the chronicity of the process and the formation of irreversible changes. In recent years, trichoscopy has been considered an important non-invasive method for diagnosing and monitoring cicatricial alopecia, in particular PGA, allowing to objectify the activity of inflammation, the degree of follicle destruction and the dynamics of fibrosis.</p> <p>At the same time, the question of the optimal long-term therapeutic strategy for PGA remains debatable.</p> <p><b>Purpose</b> of the study. To assess the effectiveness of complex therapy for abscessing perifolliculitis of the head using clinical and trichoscopic criteria in comparison with basic antibacterial therapy.</p> <p><b>Materials and methods.</b> We conducted a clinical and laboratory study of a group of men suffering from abscessing perifolliculitis of the head, aged 18 to 60 years, at the Dzerkalo Medical Center, Dnipro. The study group included 40 men with a verified diagnosis of PGA, who were divided into two treatment subgroups: the group receiving complex therapy (n=20) and basic antibacterial therapy (n=20). The effectiveness was assessed by clinical manifestations and trichoscopic markers after 8 weeks, 9 and 15 months.</p> <p><b>Results.</b> The use of the proposed complex therapy provided a stable regression of inflammatory elements, a significant reduction in trichoscopic markers of destruction and fibrosis. Basic antibacterial therapy was associated with relapses in long-term follow-up.</p> <p><b>Conclusions.</b> The proposed complex therapy is more effective than antibiotic therapy for controlling the course of PGA</p>
<b>Tags</b>	<i>perifolliculitis capitis abscedens et suffodiens, trichoscopy, dermatoses, diagnostics, pathogenesis, clinic, clinical manifestations, dermatotrichoscopic examination, dermatoscopy, treatment, complex treatment, systemic therapy, retinoids</i>
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