

Genital and perineal bleaching in women: Correction of hyperpigmentation in the genital-perineal area, inner thighs and groins by the administration of topical treatment with **dermamelan® intimate**.

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INTRODUCTION

The aging process takes place in the genital area in the same way as in the rest of the body. Because of this, loss of elasticity and firmness as well as a change in the colour of the area can be seen. Genital hyperpigmentation is a disorder caused by an excess formation of melanin that involves skin darkening around the anal and external genital area.¹

Genital pigmentation increase is an event of multifactorial origin that is closely related to aging and other factors affecting mainly women in the different times of their lives. Hormonal changes (pregnancy, use of contraceptives, hyperinsulinism, etc.), sun exposure, mechanical friction, depilation or personal predisposition to excessive skin pigmentation are causes related to the skin pigmentation change in the genital-perineal area. In addition, the fact that melanocyte activity is greater in this area than in the rest of the body is also responsible for the high prevalence of the colour change in this area.²

Genital hyperpigmentation per se does not involve any impact in the functional well-being of the patient; however, it is a growing reason for consultation as it affects adversely the self-esteem and quality of life of patients, with an impact in their personal and sexual relations.³

Today there are non-invasive solutions for treating effectively and safely hyperpigmentation in the intimate area. The use of **dermamelan® intimate** contributes a differential value over other medical-aesthetic treatments, as it does not only allow to correct genital hyperpigmentation by topical route safely, effectively and painlessly for the patient in a single clinical session, but it also achieves a significant improvement in skin quality, turgor and water-retention of the area.

OBJECTIVE

Evaluate the efficacy and safety of the topical administration of **dermamelan® intimate** method for the treatment of hyperpigmentation of the genital-perineal area, inner thighs and groins.

MATERIALS AND METHODS

Between January 2019 and September 2019 a multicentre clinical study was performed, which included 25 women aged 27-50 years. Women with hyperpigmentation in the intimate area were included, with the following exclusion criteria: pregnant or post-partum and breast-feeding women, history of vulvar cancer, active local herpes simplex or herpes zoster, local dermatitis, squamous papilloma of the vulva, mycosis, bacterial infections, autoimmune disease and history of adverse reactions to depigmentation treatments.

The treatment protocol consisted of the application of a session at the clinic for the purpose of renewing the dermis and inhibiting reversibly melanogenesis and a home treatment to complete epidermal renewal and regulate melanogenesis.

PHASE 1: AT THE CLINIC

Clean the area using a gauze impregnated with warm water. Dry with help of a gauze.

1. Apply **mesolips protector** to protect the mucosa, labia minora and their external area.
2. Apply **dermamelan® intimate peeling** over the area to be treated:

> **RECOMMENDED EXPOSURE TIME: 7 min**

3. Apply **post-peel neutralizing spray**.
4. Apply the 7 mL of **dermamelan® intimate mask** in multiple layers.
5. Place **dermamelan® intimate film** to facilitate the action of the active ingredients. Leave on for 2 hours.

PHASE 2: AT HOME

1. Remove **dermamelan® intimate film** and **dermamelan® intimate mask** with plenty of warm water and an intimate gel.
2. Apply **dermamelan® intimate crystal fiber mask** and leave on for 10-15 minutes.
3. At 48 hours of the end of the protocol at the clinic, apply **dermamelan® intimate gel**, at night once a day for 45 days.

TREATMENT PROTOCOL

PHASE 1: AT THE CLINIC



PHASE 2: AT HOME



RESULTS IN VIVO

The objective clinical assessment performed by inspection and photograph, as well as the subjective assessment performed using a Likert-type scale, evidenced satisfactory outcomes in the reduction of pigmentation in different phototypes in 100% of the patients treated.

CASE 1



CASE 2



CASE 3



CASE 4



Asked about the tolerability of the treatment, all volunteers agreed that the application of **dermamelan® intimate** was tolerable, and allowed them to continue their work and social activities immediately.

No adverse effects were reported in any of the patients treated. With regard to the side effects, they were minor (fine flaking and erythema), not lasting more than 3 days, so, in terms of **safety**, it can be concluded that the treatment was safe in 100% of the cases.

CONCLUSIONS

- ▶ Efficacy in 100% of the cases treated.
- ▶ Results visible in a single clinical session. Unlike other methods requiring several sessions to reach the same or a lower efficacy.
- ▶ Genital depigmentation treatment with **dermamelan® intimate** is a safe, effective option for the treatment of genital melanoderma or hyperpigmentation in the different phototypes with a single session.

**The times of product application can be modulated according to medical criterion and the individual characteristics of each patient.*

1. Lephart, E. D. (2018). A review of the role of estrogen in dermal aging and facial attractiveness in women. Journal of Cosmetic Dermatology, 17(3), 282–288. doi:10.1111/jocd.12508 2. Gaviria J., Betancourt A. (2017). Blanqueamiento genital femenino con láser. Acta bioclinica Vol 8 N°15. 3. Vanaman, M., Bolton, J., Placik, O., & Fabi, S. G. (2016). Emerging Trends in Nonsurgical Female Genital Rejuvenation. Dermatologic Surgery, 42(9), 1019–1029. 4. Scan the QR code to view the protocol of application of **dermamelan® intimate**.

