



## Treatment of Melasma in Asian Skin

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Introduction:

Melasma is one of the most common pigmentary disorders among Asians, with many noticing the onset of this disorder in their late 20s. It remains a challenge to treat Melasma effectively as it tends to take a long time to show improvement and often relapses. In many cases, the usage of incorrect parameters can lead to a worsening of the condition. Hence it is important to treat with settings that are adequate to cause enough damage through a photoacoustic effect, while not too excessive in generating heat, which may worsen the condition.

Laser	Fotona EBD	
	1st session	2nd session
Wavelength	Nd:YAG (1064 nm)	Nd:YAG (1064 nm)
Handpiece	Black	Black
Spot size& Fluence	8 mm (0.5 J/cm <sup>2</sup> ) 4 mm (1.0 J/cm <sup>2</sup> )	8 mm (0.5 J/cm <sup>2</sup> ) 4 mm (1.0 J/cm <sup>2</sup> )
No. of Passes	Black 8 mm: 2 passes Black 4 mm: 2 passes	Black 8 mm: 2 passes Black 4 mm: 2 passes
Endpoint	Mild Erythema	Mild Erythema



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## CLINICAL CASE:

A 50-year-old female patient with skin type FP IV presented with a 3-year history of melasma, which had been increasing both in size and intensity. She had previously received 6 treatments with Q-switched Nd:YAG at a different center, however, the result was not obvious. The patient underwent a total of 2 sessions of StarWalker PQX treatment with a one-month interval, with facial done prior to each session of PQX treatment. The patient was also using skincare containing arbutin, Kojic acid and Tranexamic acid. Avoidance of excessive sun and heat exposure had been well observed. The end point was observed for each 1064 nm session, resulting in mild erythema. The patient tolerated the procedure well, with a pain score of 1/10. A reduction in pigment was noticeable after 2 sessions of StarWalker PQX treatment. The patient is happy with the noticeable improvement.



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