Narrowband UVB

Dermatology Department
Narrowband UVB

Ultraviolet radiation from artificial light sources has been used by dermatologists for almost 100 years and is a widely used and effective treatment for a number of skin disorders. The choice of UVB over other forms of treatment depends on a wide range of factors including age, disease, skin type, previous therapy, current medication etc.

Your doctor decided to use Narrowband UVB, which is the latest development in UV treatment of skin disorders. It is more effective than conventional broadband UVB in the treatment of psoriasis and possibly other skin diseases too. We may therefore recommend this treatment even if previous conventional UVB treatments have been disappointing.

Procedure

Following assessment in the General Dermatology Clinic by a doctor, a nurse will book 15-30 phototherapy appointments for you (the exact number of treatments depends on various factors). The appointment time allocated to you will usually be the same at each visit.

The Phototherapy unit is open 08.00 – 17.00 Monday, Wednesday, Thursday and Friday. The unit is closed on all Bank Holidays. The staff will inform you of any changes.
Narrowband UVB treatment is given 3 times per week, ideally on the following days:

Monday, Wednesday and Friday

At the first visit a series of test UV doses is given on the back. This so-called MED test is read 24 hours later to determine your subsequent treatment starting dose. At subsequent visits, the UV dose will be increased each time, depending on skin type, disease and skin response (or lack of response). Initially treatment will take only a few minutes (or even seconds), gradually increasing to a maximum of 15 minutes.

You might develop mild skin redness after treatment. Occasionally your skin might develop a more marked redness and discomfort (like sunburn). You must inform the nurse if this happens so that we can stop further increments or reduce the dose.

All treatments are nurse supervised and given in stand-up cabinets surrounded by fluorescent lamps. A visor or goggles will be provided to shield your eyes / face. If the eyelids are also affected patients may stand without goggles but with their eyes closed from the start of treatment. Provided the eyes are properly shielded during treatment, there is no danger to those with cataracts, lens implants or other eye disorders. There is no need to protect your eyes after treatment.
Adverse Effects

Side effects are common, usually mild and virtually never permanent. Most of them can be treated with creams or will spontaneously disappear a few days after stopping UV treatment.

- **Erythema**: Sometimes some redness and discomfort of the skin may occur. Very occasionally blisters develop, we may then suspend treatment and treat with a topical steroid cream until symptoms have settled.

- **Skin Dryness**: There will be an increased tendency to dryness of the skin during treatment and for about 4 weeks after treatment. As part of your treatment you must regularly use moisturisers, i.e. twice daily to your whole body (not just the lesions).

- **Folliculitis**: Inflammation of hair follicles may occur. These do not cause discomfort and usually require no treatment or interruption of UV therapy. This may be prevented by applying moisturiser in downward strokes only.

- **Herpes Simplex**: Those who have had cold sores previously may get a flare up. We therefore recommend sunscreen application to the lips during treatment in order to reduce the risk of cold sores. Remember to ask the nurse for a lip sunscreen before every treatment.

- **Photosensitivity**: In those who have a concomitant photodermatosis, i.e. a condition caused or aggravated by light, a flare up may occur.
• **Itchy skin**: Sometimes the skin can become itchy after light treatment. This may last for some days. Anti-itch emollients such as Balneum PLUS cream or Dermol cream can be helpful (store in the fridge for added relieve). Please let us know if you suffer with this problem.

**Do’s and Don’ts**

• Always remember to inform the doctor or nurse if you are taking, or about to start any new medication or cream while having UV treatment. This includes over-the-counter products such as St. John`s Wort.

• **Dry flaky skin will deflect the light**, rendering UVB therapy less effective. It is therefore especially important to keep your skin well moisturised by applying an emollient *liberally* twice a day. However, as some creams are not ideal to be used directly prior to UV treatment, we recommend to **apply only Diprobase cream, Cetraben Cream, Oilatum cream or Doublebase** before treatment on phototherapy days. Avoid tar containing creams, steroids, oils and vitamin D and A preparations prior to your UV treatment.

• Never use a sun bed or indulge in sunbathing during your course of UV treatment. This would increase the risk of burning and makes it impossible to determine the cause and / or dose of burning. **On bright days, protect exposed areas from the sunlight** by wearing long sleeves, hats, sun block, etc.
• Plants and weeds may have photo-sensitisers in them, so avoid handling them for at least two hours before treatment (e.g. cooking with celery, parsnips or figs).

• In order to maximise the benefits of UVB, and so as not to inconvenience other patients, regular and punctual attendance is mandatory. Treatment will otherwise have to be withdrawn.

• Jewellery, e.g. rings, if worn at the start of treatment should then be worn at every treatment thereafter, as areas covered at the start will burn if subsequently exposed.

• For the same reason, avoid radical hairstyle changes or haircuts midway through treatment.

• If you need to bring children with you it is advisable to bring another adult along to supervise them.

• Please bring a bag suitable for your clothes and personal belongings.

• Do not indulge in cosmetic facials, peels, or dermabrasions during your course of phototherapy. These could cause the skin on your face to become much more light sensitive.

**Additional Information**

In case of emergencies or if you need to cancel your appointment please telephone: **01932 723322.** An answer phone is in use when the unit is not open.
Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Advice and Liaison Service (PALS) on 01932 723553 or email pals@asph.nhs.uk. If you remain concerned, PALS can also advise upon how to make a formal complaint.
We can provide interpreters for a variety of languages, information in larger print or other formats (e.g. audio) - please call us on 01932 723553.

To use the Text Relay service, prefix all numbers with 18001.

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Se precisa de uma tradução por favor contacte: 01932 723553

Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

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