IPL THERAPY AND OCULAR ROSACEA


How this treatment can add an aesthetics element to your practice by dramatically improving cosmetic results for patients.

BY REBECCA MILLER, OD, AND CINDY LANG, OD

Rosacea is a chronic inflammatory disease that affects about 10% of the population.[1] Most patients first notice the classic "rosy" look of the cheeks, chin, nose, and central forehead. Patients can be frustrated with the appearance of their skin, persistent rash, telangiectasia, and painful symptoms of dry eye, and many search for cosmetic rosacea solutions that amount to thousands of dollars in creams and lotions but don't always provide the result they're looking for.

In recent years, dermatologists and aestheticians have recommended "photo facials" or intense pulsed light (IPL) therapy to improve skin tone, reduce redness, and diminish age spots for patients with vascular or inflammatory rosacea. IPL therapy has proven to be a safe and effective treatment for severe dry eye and meibomian gland dysfunction (MGD), which are often symptoms of ocular rosacea.[2] In a retrospective study of patients with refractory dry eye who had exhausted conventional treatment and elected to receive IPL therapy and meibomian gland expression, 58% of their symptoms improved by 25% to more than 50% with treatment.[3]

Many of the patients we've seen who have had IPL therapy for cosmetic reasons also noticed some improvement in their dry eye symptoms. With an even more targeted approach, and by treating the eyelids, we can dramatically improve these results.

LESSONS LEARNED

We implemented IPL therapy into our practice a year ago, and we didn't know what to expect at first, but we have since been amazed with the dramatic improvements it has produced in our patients with dry eye and MGD, as well as the cosmetic results, including patients with rosacea. Although IPL therapy can be a great option, it is not safe for everyone—specifically those with darker pigmented skin tones, as they have a higher risk of burns, hyperpigmentation, and scarring (see Table). With that in mind, we are now considering the addition of other treatment options, such as radiofrequency (RF), to our IPL package. RF is commonly used to tighten skin, improving fine lines and wrinkles. Combined treatment of IPL therapy, RF, and meibomian gland expression can aid in MGD.[4]

When we first started offering IPL therapy, we performed an average of one to four treatments per week. We now perform 15 to 20 treatments per week. In total, 80% of the patients we treat with IPL therapy have ocular rosacea; for patients with facial rosacea, we recommend seeing a dermatologist. We attribute the dramatic increase in treatments to the success we've seen. Our doctors are now recommending IPL therapy, along with other first-line dry eye therapies, and seeing long-lasting results for their patients. For many, it takes experiencing the results firsthand to confidently recommend the treatment.

TABLE. Fitzpatrick Classification of Skin Types

FITZPATRICK SKIN PHOTOTYPE	SKIN APPEARANCE	IPL TREATMENT LEVEL	FLUENCE (J/cm^2)*
Fitzpatrick type I	Pale white	6	13.0
Fitzpatrick type II	White	5	12.2
Fitzpatrick type III	Light brown	4	11.4
Fitzpatrick type IV	Medium brown	3	10.6
Fitzpatrick type V	Dark brown	2	9.8
Fitzpatrick type VI	Very dark brown	Not suitable for IPL therapy	

*Fluence levels vary for different units; those listed here are for the OptiLight (Lumenis)

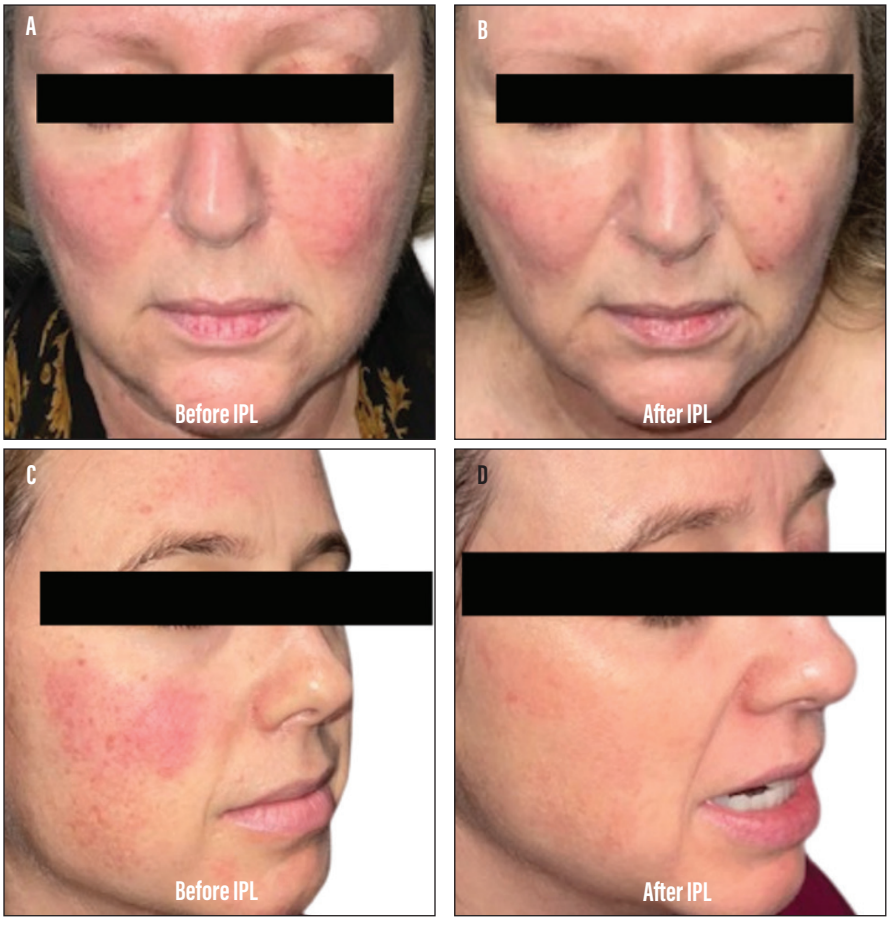

Figure. Two female patients with facial rosacea in our practice before receiving IPL therapy (A,C). Both experienced significant improvement in their facial symptoms with IPL therapy (B,D).

WHAT WORKS FOR US

Before initiating treatment, we conduct a Fitzpatrick skin type test to ensure IPL therapy is safe to perform on the patient. Our office then recommends offering patients with rosacea a package of four treatments for the best outcomes. We see optimal results when we schedule the second treatment 2 weeks after the first, the third treatment 3 weeks after the second, and the final treatment 3 to 4 weeks after the third. With each treatment, we express the meibomian glands for optimal MGD improvement. Patients then return 6 months after their fourth session and may opt to have a single treatment in the case of worsening symptoms. Many benefit from one or two yearly IPL treatments moving forward.

THE TAKEAWAY

Many medical optometry practices want to provide comprehensive ocular surface disease treatments while creating diversified income streams; IPL therapy can fit nicely into that cross-section. IPL treatments will thrive in a clinic focused on delivering customized care and premium results. Once a doctor is experienced in identifying facial and/or ocular rosacea, discussing and offering treatment options to a patient doesn't take long and can open the door to symptom relief that patients have been looking for. ■

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