

TREATMENT OF PFB (PSEUDOFOLLICULITIS BARBAE) WITH A 650µs PULSED Nd:YAG 1064nm LASER.

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41-year-old male with Fitzpatrick skin type VI treated for PFB with FriendlyLight MicroPulse™ 650µs 1064nm laser. One pass, fluence 25 j/cm², spot size 6mm, rep. rate 1Hz. Results after 5 treatment sessions.



Before treatment



After treatment

33-year-old male with Fitzpatrick skin type VI treated for PFB with FriendlyLight MicroPulse™ 650µs 1064nm laser. One pass, fluence 25 j/cm², spot size 6mm, rep. rate 1Hz. Results after 3 treatment sessions.



Before treatment



After treatment

Background and Objective:

To evaluate the safety and efficacy of a 650µs pulsed Nd:YAG 1064nm Laser in treating PFB (Pseudofolliculitis Barbae) on patients of Fitzpatrick skin types V and VI. Since the laser's pulse duration of 650µs is below the TRT (Thermal Relaxation Time) of the skin tissue, the laser should have the ability to effectively treat PFB without causing non-selective collateral tissue damage and the pain that is normally caused by that.

Study Design/Materials and Methods:

16 female patients aged 25-69 and 6 males aged 34-58 were treated on the beard, anterior neck and chin areas. A portable MicroPulse™ 650µs Nd:YAG 1064nm laser manufactured by FriendlyLight, Tarrytown, NY was used. During treatment one pass was applied over the affected area. A fluence of 20-25 j/cm² was used with a pulse duration of 650µs, spot size of 6mm and a repetition rate of 1Hz. 6 males with skin type VI were treated with a fluence of 25 j/cm², while 10 females with skin type V and 6 females with skin type VI were treated with a fluence of 25 j/cm². Pretreatment with topical Benzocaine 20% were used; this laser does not contact the skin during treatment and does not require any skin cooling during the procedure. All patients were followed and evaluated for at least 5 months – some longer. Improvement was documented. Discomfort during treatment and after treatment was assessed. Complications, if any, were documented.

Results:

Patients reported low discomfort during treatment. All patients showed visible improvement after the first treatment. Treatments were repeated on a monthly basis. PFB completely resolved in 15 patients after 4 treatment sessions. After 5 treatment sessions, in most cases, minimal hair regrowth was noted. Minor areas of small spot hypopigmentation occurred on 1 patient but the areas involved completely repigmented in 4 weeks. All patients were satisfied with the results and reported low discomfort during treatment. Currently, several other patients with type V or VI skin, with facial hirsutism and PFB, are being treated with this laser.

Conclusion:

The technique of applying one pass of 650µs MicroPulse™ Nd:YAG laser appears to be safe and effective in removing PFB on patients of Fitzpatrick skin types V and VI. The device is portable and easy to use. The treatment is quick and practically painless.

36-year-old female with Fitzpatrick skin type VI treated for PFB with FriendlyLight MicroPulse™ 650µs 1064nm laser. One pass, fluence 25 j/cm², spot size 6mm, rep. rate 1Hz. Results after 4 treatment sessions.



Before treatment



After treatment

44-year-old female with Fitzpatrick skin type V treated for PFB with FriendlyLight MicroPulse™ 650µs 1064nm laser. One pass, fluence 25 j/cm², spot size 6mm, rep. rate 1Hz. Results after 3 treatment sessions.



Before treatment



After treatment