Sir,

All substances that are considered photosensitizers are fluorescent ones: this means that they are natural or chemical elements that after having absorbed some exciting radiation, are able to modify it and to cease newly it in the guise of one or more radiations characterized by major wavelength and minor frequency of the absorbed one previously [1,2].

Substances that are photosensitizers may be absorbed orally and/or topically and all of them may provoke, under the sun rays of whichever wavelength or frequency, the Andrija Kornhauser-Constantine Zervos’ actinic prophiria.

Amongst the photosensitizers that act assumed both orally or topically, it is possible to find phylloeritrines (contained in chlorophyll), furocoumarines (Coronilla glauca, Ficus carica, Phebalium argenteum, Zanthoxylum flavum), xanthotoxins (Angelica arhangelica, Amni majus, Facara xanthoxyloides, Ruta chalepensis, Ruta montana), bergaptens (Apium graveolens, Citrus acida, Citrus bergamia, Heracleum gigantum, Ligusticum acutilobum, Pastinaca sativa, Petrosilum sativum), oxypeucedanines (Imperatoria ostruthium), quinolones (Chinona calisaya), antraquinones (rhubarb, aloe faerox, sena, cascara sagrada, frangula).

Amongst the topical photosensitizers one may number all the forage containing hypericin, Phagopyrines (Polygonum fagopyron, Trifolium hybridum, Medicago sativa, Lupinus coeruleus) and this situation may occur when people love to lie on the grass during the
hot seasons and all the oil derivatives, as coal and naphthalenes.

The AA has recruited a volunteer, a man 42 y. old, living at Cyprus and who has been using to spread pure essential oils to his face and neck (ambergris, opoponax, lemongrass, ambrette, musk) and drive the car 4 hours a day to go to work and come back home under the sun that filtered from the car windows and contracted a severe actinic porphyria, with itch, red and leathery skin, bumps and feeling of rubbery epidermis, and all these are the symptoms of the Andrija Kornhauser-Constantine Zervos’ actinic porphyria [3].

In a recent paper the same AA had written about the poikiloderma of Civatte [4] they used shellac and Lycopus extract to treat the syndrome and revealed optimal results after 2 weeks of applications of the ointment, they now have decided to use an inert powder apt to behave as a patch or salbe, some natural vasoconstrictor agents and three lypophilic vitamins (A,E and F).

The real formula was the following: Talc de Trimouns-Luzenac; Ruscus aculeatus glyceric extract; Achillea millefolium glyceric extract; Ginkgo biloba glyceric extract; Vit A; Vit E; Vit F.

The applications lasted 2 weeks.

The volunteer used to spread the salbe only before to go to bed and did not wash his face and neck, this because during the day sebum of the skin permits to have an oily epidermis and so the paste could penetrate better through the barrier of stratum corneum, by diachisis (Hippocrates used to refer: Similes cum similibus and so an oily phase can be absorbed better by an oily surface, not cleansed at all).

When he woke up in the morning he washed skin and neck with water and a toning lotion (containing Arctium Lappa extract reputed an exceptional astringent agent) and used to spread Argan oil mixed with petroleum jelly.

He did not use sunscreens and remained at home without expose to the sun for the 2 weeks of treatment.

The very first 4 days he felt a feeling of tingling when he spread the paste on his face and neck, but at 5th day his face and neck were bleached and flesh-coloured and all bumps and scares disappeared as well.

He showed a real satisfaction for this remedy.

Consent

The examination of the patient was conducted according to the Declaration of Helsinki principles.

REFERENCES


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