

# Non Culture Melanocyte Transplant- A Novel Tool in the Armamentarium for Vitiligo

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## 1. Clinical Image

Non culture melanocyte transplantation (NCMT) is a novel modification in the surgical management of vitiligo. Melanocytes are taken from a healthy skin area and are transferred as a cell suspension onto the depigmented patches. This procedure can be performed as an outpatient procedure within 1-3 hours. A large area can be treated in a single operative session with a small piece of donor area skin *viz.* 10cm<sup>2</sup> donor skin being sufficient to treat upto 100cm<sup>2</sup> vitiligo area [1,2].

Long term results suggest that NCMT is safe and effective, in particular for re-pigmenting stable and localised types of vitiligo, with repigmentation rates ranging from 90-100%, with results persisting for as long as 10 years of follow up (**Figure 1**). Loss of pigmentation has been reported only in cases of generalised vitiligo and not segmental vitiligo, piebaldism, halo nevi and nevus depigmentous [3, 4].

Thus it can be safely said that this socially stigmatous condition can be efficiently and permanently dealt with non culture melanocyte transplantation.



Figure 1: Images before and after NCMT

## References

1. Ebrahimi A, Radmanesh M, Kavoussi H. Recipient site preparation for epidermal graft in stable vitiligo by a special fraise. *An Bras Dermatol.* 2015;90:55-60.
2. Ramos MG, Ramos DG, Gontijo G, Ramos CG, Rocha TN, Rocha RH. Noncultured melanocyte/keratinocyte transplantation for the treatment of stable vitiligo on the face: report of two cases. *An Bras Dermatol.* 2013;88:811-3.

3. Mulekar SV. Long-term follow-up study of segmental and focal vitiligo treated by autologous, noncultured melanocyte-keratinocyte cell transplantation. *Arch Dermatol.* 2004;140:1211-5.
4. Bao H, Hong W, Fu L, Wei X, Qian G, Xu A. Blister roof grafting, cultured melanocytes transplantation and non-cultured epidermal cell suspension transplantation in treating stable vitiligo. A mutual self-control study. *J Dermatolog Treat.* 2015;26:571-4.

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