

#MADEEASY



VITILIGO





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- Vitiligo is an **acquired**, chronic skin disorder.
- It is characterized by well-defined white patches of skin resulting from the loss of melanocytes, the cells responsible for producing melanin.
- It affects 0.5-2% of the global population, with no preference for age, sex or ethnicity.
- **Imagine a blackboard with white chalk drawings.**
- Over time, certain areas of the blackboard are erased, leaving clear, white patches where the chalk has been removed.
- Similarly, in vitiligo, the chalk (melanin) that gives colour to the skin is lost in certain areas, leaving white patches behind.
- The surrounding blackboard (normal skin) remains unchanged, creating a stark contrast.

Pathophysiology

- Autoimmune mechanism where the immune system mistakenly attacks and destroys melanocytes in the skin.
- Higher incidence in individuals with a family history of vitiligo or other autoimmune diseases.
- Trauma, sunburn, stress or exposure to certain chemicals may precipitate the onset or exacerbate the condition.

Clinical Features

- Depigmented, well-demarcated macules and patches, chalky white or milky white in colour
- Common sites include the face, hands, feet and genitalia.
- Shows **Koebner Phenomenon** (new lesions appear at sites of skin trauma).
- **Non-Segmental Vitiligo:** The most common type, characterized by symmetrical patches on both sides of the body.
- **Segmental Vitiligo:** Depigmented patches that occur in a segmental distribution, typically confined to one side of the body and often appearing in childhood.





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Types

- Non-Segmental Vitiligo**
The most common type, characterized by bilateral and symmetrical white patches. Typically progressive course, with new patches appearing over time
Subtypes:
Generalized Vitiligo: Widespread and scattered patches over many parts of the body
Acrofacial Vitiligo: Affects the distal extremities (fingers, toes) and facial features (around eyes, mouth)
Mucosal Vitiligo: Affects mucous membranes, such as the lips and genitals
Universal Vitiligo: Extensive depigmentation involving more than 80% of the body surface area.
Focal Vitiligo: Limited to a few scattered patches in a specific area
- Segmental Vitiligo**
Depigmented patches confined to one segment or side of the body. Patches appear on one side of the body having unilateral distribution. Spreads quickly within the affected segment but often stabilizes after 1-2 years. Usually appears at a younger age than non-segmental vitiligo. Less commonly associated with autoimmune diseases
- Mixed Vitiligo**
Features of both non-segmental and segmental vitiligo. Segmental patches on one part of the body with additional non-segmental patches elsewhere
- Inflammatory Vitiligo**
Depigmented patches surrounded by a raised, reddish, inflammatory border. Often itchy and may have active inflammation at the margins of the patches

Type	Description	Characteristics	Example
Non-Segmental Vitiligo	Bilateral, symmetrical patches; various subtypes	Generalized, acrofacial, mucosal, universal, focal	Non-segmental vitiligo is like random patches of grass turning white all over the garden
Segmental Vitiligo	Unilateral patches, often dermatomal	Early onset, rapid progression, less associated with autoimmune diseases	Segmental vitiligo is like a specific section of the garden where the grass has turned white
Mixed Vitiligo	Features of both NSV and SV	Segmental and non-segmental patches	Mixed vitiligo is like having one specific section with white grass and other random patches elsewhere
Inflammatory Vitiligo	Depigmented patches with inflammatory border	Raised, reddish border, often itchy	Inflammatory vitiligo is like having white patches surrounded by a flowers, indicating active changes in that part of the garden



