

CMR in 5 (10%) cases, CCR in 7 (14%) cases and CHR in 22(48%) cases. Only 3(6%) patients experienced a relapse in less than a year after remission with Imatinib. On the other hand,8(16%) patients with conventional therapy experienced recurrence during the same period of time.

Conclusion: The tyrosine kinase inhibitors represent the current most efficient therapy for CML in chronic phase. The treatment discontinuation is almost invariably followed by a recurrence. The introduction of targeted therapy has transformed this disease from an incurable malignancy to a manageable chronic condition.

90. THE EXPERIENCE OF TREATMENT WITH ISOTREXIN GEL IN ACNE VULGARIS

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Introduction: Isotretinoin (13-cis-retinoic acid) is a derivative of vitamin A, being a stereoisomer of tretinoin. Applied topically it has the following actions:1. Regulates the keratinization, reducing the cohesion between the keratinocytes at the level of pilo-sebaceous infundibulum and stratum corneum, promoting and preventing peeling and the appearance of comedones; 2. Determines decrease by 50% of sebaceous gland size; 3. Inhibits the migration of polymorphonuclear neutrophils induced by leukotriene B₄, thus having anti-inflammatory action.

Purpose and objectives: The efficacy and safety of treatment with gel Istorexin in acne vulgaris II-nd and III-rd degree.

Materials and methods: For observations were subjected 30 patients with acne vulgaris II-nd and III-rd degree (12 men and 18 women, mean age 20 ± 4 years). Inclusion criteria according to the degree of acne severity proposed by G.Plewig,M.Kligman,.2004: 20 patients with acne vulgaris, II-nd degree: more than 20 comedones, 10-20 papulopustular units; 10 patients with acne vulgaris, III-rd degree: huge number of comedones, over 21 to 30 papulopustular units , up to 5 nodules.The algorithm of implementation: 1) thorough cleansing of the skin with prior degreasing;2) Istorexin gel, 2 times daily, on the affected areas (eight weeks); 3) Cream complementary for excessive dryness of skin.

The drug is not applied on skin with other solutions or other dermatoses (eczema, irritant contact dermatitis, excoriation...). The evidence of morphological features in the focal lesion is made before the beginning of the treatment and during the therapy over 1 to 2 months.

Results: At the end of the observation period (8 weeks) was noticed: reduction in open and closed comedones - in the average of 28 ± 1 to 9 ± 1 , reduction of bullous - papulopustular eruptions - from 20 ± 1 to 7 ± 1 ; skin lesions during the conduct of the therapy becomes smooth and elastic. Endpoint (8 weeks): clinical recovery - 15 patients (50%), significant improvement - 8 patients (25%), the total clinical score (recovery + improvement) - 75%. Safety Results Notes: 5 patients (16%) reported a significant subjective sensations of dry skin tension on the face, the indication of moisturizing cosmetic preparations allowed coupling of this state during the 4-5 days without suspension of the gel, this way Istorexin gel was maximal efficient and not led to cases of suspension of the treatment.

Conclusions: The combined topic acne efficacy profile showed a high efficacy (75%) and a maximal safety (in combination with other moisturizing cosmetic drugs) in the treatment of patients with medium and severe forms of acne vulgaris, II-nd and III-rd degree.

Keywords: Acne vulgaris, isotrexin gel