## IN THIS ISSUE...

## Topics of a Wide Range: From Cancer to Ulcer Pain and Facial Wrinkles, and From Chlamydia Tests to Herbal Drug Allergy

Ipilimumab, investigated by Konstantinou et al. (p. 45–49) is a monoclonal antibody that acts to potentiate anti-tumour response by antagonising cytotoxic T-lymphocyte antigen-4 (CTLA-4), which results in improved survival of patients with stage IIIc-IV melanoma. The authors examined the efficacy of ipilimumab in patients with melanoma with brain metastases, which usually have a median survival of 3.8 months. Results showed that ipilimumab may be effective for those without extracranial metastases but patients with uncontrolled primary metastases may not benefit from this treatment.

Renner et al. (p. 50–53) evaluated pain levels associated with chronic leg ulcers. Data was collected in 2010 and when analysing the answered questionnaires the authors were surprised by the insufficient pain therapy for those with chronic wounds. There also seemed to be a stronger association between health status and pain levels for men than in women, thus indicating that women disregard pain when evaluating their general health status.

Between 1997 and 2005 there has been a 10–15% annual increase in chlamydia cases in Sweden despite mandatory partner notification. However, home sampling tests may decrease the delay between start of partner tracing to start of testing, as reported by Falk et al. (p. 72–74). The benefit of home sampling was seen when

partners for tracing were not current, however current partners of chlamydia-infected individuals were treated quickly irrespective of tracing mode.

While on the topic of self-diagnosis, home remedies such as herbal drugs are often erroneously considered as safe due to their natural origin but they are actually associated with various side effects. Norisugi et al. (p. 58–62) present 2 cases of skin eruptions induced by herbal drugs. Both patients had eosinophilia but the symptoms disappeared 2–4 weeks after stopping with the herbal medicines. The authors therefore suggest a useful *in vitro* tool for diagnosing herbal drug-induced skin eruptions.

On a different note, Yoon et al. (p. 4–8) investigated whether long-term topical oestrogen treatment would improve facial wrinkles and skin elasticity of sun-exposed skin. Many studies have attempted to assess wrinkle severity but limited evidence is available to support the anti-aging properties of oestrogen in sun-exposed skin. Yoon et al. demonstrate that long-term topical oestrogen did not improve facial wrinkles but induced the expression of matrix metalloproteinase-1 (MMP-1), a key regulator of collagen degradation, which indicates that topical oestrogen is in fact detrimental in photoaged skin. However, oestrogen suppresses MMP-1 expression in sun-protected skin *in vivo*, suggesting that there is a different regulatory mechanism between sun-protected and sun-exposed skin.

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