

Photodynamic Therapy (PDT)

What is PDT?

PDT involves skin application of a light sensitive chemical called Metvix followed 3 hours later by application of red light. This combination is known to result in destruction of certain skin cancers.

What is PDT used for?

The commonest forms of skin cancer such as superficial basal cell carcinomas (BCC), Bowen's disease (squamous cell carcinoma in situ; SCC) and solar keratoses (sun-spots) can all be treated successfully. Those on the back, chest, arms and legs are well suited to the treatment but thick or deep skin cancers and those on the mid face and ears are not suitable.

Sun related ageing is often associated with sun spots. In this case PDT can be combined with Intense Pulsed Light (IPL) to eliminate both the sun damage and to freshen, smooth and give the skin a more vital appearance. This treatment is called photodynamic rejuvenation (PDR)

How will I know if PDT is best for me?

Your doctor will recommend the treatment if the skin cancer to be treated is suitable.

What is the chance of the skin cancer coming back following PDT?

The cure rate with PDT is not as high as with surgery. Overall it is in the range of about 80%. As PDT can avoid the need for surgery and scarring it is often a very good option for treatment.

So what is actually involved with the PDT on the day?

Two treatments are required on the same day. The first involves your doctor gently scraping the skin cancer to allow the cream to soak in. It is rare for local anesthetic injections to be needed although the scraping can be a little uncomfortable. The cream is then applied and can sting for a few minutes. The area is covered with plastic and you will be able to leave the office.

Three hours later the cream is removed and a red light applied for about 10 minutes. As this part can be painful, a very cold air is blown across the treatment site to cool the skin and relieve any pain. If necessary, local anesthetic can be injected.

What will happen after the treatment?

Following the treatment the area will be red, may swell and will sometimes weep a little before forming some fine scabs which will heal over 5-7 days. You may have some discomfort for 2-3 days which can be relieved with Panadol. Once things settle there should be little obvious scarring.

The treatment site will be checked at any time between 1 week and 3 months to see if another treatment is required.

Are there alternatives to PDT?

Yes there are. Other suitable treatments include Aldara cream, scraping (cutterage), freezing with liquid nitrogen, excision with stitching and even X-ray treatment (radiotherapy). If PDT has been recommended it is because when considering all the benefits and risks, it is the best choice for your situation.

What are the risks and complications?

There are a few risks. Scarring is rare but some whiteness in the treated area occurs frequently. Red and lumpy scarring is occasionally seen.

If the skin cancer returns then it is unlikely more PDT will be recommended, instead surgery or one of the other techniques mentioned above will be used.

