

# Lightening Becker nevus with topical glycolic acid



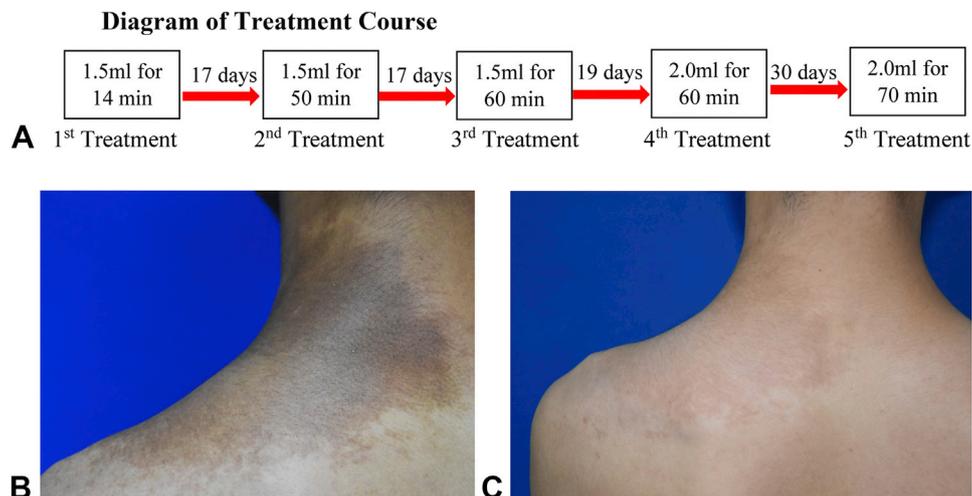
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## THERAPEUTIC CHALLENGE

Becker nevus is a hyperpigmented skin disorder. Although a variety of approaches are available for treating this condition, they are often costly, resulting in mixed outcomes.<sup>1</sup>

## SOLUTION

The topical application of glycolic acid can lighten a Becker nevus. The involved area is first treated topically with 70% glycolic acid solution (Fig 1, A), immediately followed by topical application of 10% sodium bicarbonate. An ice pad is then placed on the treated area for 30 minutes. Afterward, a collagen patch is placed on the treated area twice daily for 1 week. Skin pigmentation is markedly improved after 1 treatment and appears almost normal 22 days after the last treatment (Fig 1, B and C). Adverse events include temporary edema, erythema, and stinging on the treated area. These symptoms are tolerable and disappear within 48 to 72 hours after treatment. During the first 2 treatments, scales appear within 3 to 4 days but disappear within 1 week after each treatment. No more scales have been observed on the treated area during following treatments, and there is no recurrence during 3 months of follow-up.



**Fig 1.** **A**, Treatment course. **B**, Pretreatment clinical presentation. **C**, Clinical picture after the last treatment.

## REFERENCE

1. Momen S, Mallipeddi R, Al-Niaimi F. The use of lasers in Becker's naevus: an evidence-based review. *J Cosmet Laser Ther.* 2016;18:188-192.

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