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**UVB Treatment (Ultraviolet B)**

Patient questions and answers sheet\*

**This information sheet aims to answer the most commonly asked questions about UVB, but please feel free to ask your Nurse or Doctor if you are unsure of anything.**

**What is UVB?**

UVB means Ultraviolet B. Particular UVB rays (“narrowband UVB”) are produced by treatment lamps. These rays have anti-inflammation effects on the skin. Although these rays are included in sunlight, UVB treatment is usually more effective than sunlight because harmful and ineffective sunlight rays are missed out.

**Why am I having UVB?**

This treatment has been found to be particularly useful for many different skin conditions including psoriasis and eczema and also to build up tolerance to natural ultraviolet light for people with light sensitive skin conditions. The treatment does not offer a permanent cure and the skin may not clear completely.

**What happens when I arrive at the Phototherapy Clinic?**

On your first visit a member of the phototherapy nursing staff will go through the nursing documents used. They will show you round the unit and will explain the treatment and all the procedures to you.

**Centres may use different approaches to decide what dose your light treatment should be started at.**

Before you begin light treatment you will usually receive a small test dose, called an MED (Minimal Erythema Dose). A number of doses of ultraviolet light B will be shone on small circles on your back or arm, this takes several minutes and the result will be read the next day (24 hours later). This result will help decide what dose your light treatment should be started at.

Even if you have had UVB treatment in the past an MED will normally be required because your skin sensitivity to UVB can change. The MED not only makes sure that you are treated at a safe UVB dose, but also makes sure you are started at a high enough dose for you.

Alternatively, if an MED cannot be done, treatment has to be started at a low dose, and often the first treatment will be to a small test area such as the forearm to determine a safe starting dose. This may be important if you suspect you are unusually sensitive to sunlight or if you are taking medications that may make you extra sensitive. Otherwise, staff may simply ask you about your history with sun exposure, for example whether you tan or burn and use this ‘skin type’ to determine your starting dose.

**How long will I have UVB treatment?**

This varies from person to person, but an average course lasts 8 weeks with individual treatments lasting up to a few minutes with the total visit taking up to half an hour. The treatment is usually given 3 times weekly. The staff will assess you at each visit. If required a Doctor will see you.

**What about my creams?**

Please continue to use regular moisturisers during your treatment. If you use any other treatment creams the nursing staff will tell you if you should carry on using them. If you have eczema it is particularly important to continue to apply moisturisers before and after treatment. Please check that you are using appropriate moisturisers and try to keep roughly (+/- 1 hour) the same time between when you apply your moisturiser and when you have UVB treatment.

**What about my medicines?**

Before you start UVB treatment the doctor will check the medications and natural supplements that you are taking.

If any medications you are taking (including anything you are taking over-the-counter) are changed during UVB treatment, please let the nursing staff know before they start your next treatment. This is because some tablets can affect the way this treatment works.

**Things to avoid**

* On the day of treatment please avoid using perfumed products such as, cosmetics, perfumes or aftershaves as these can make your skin more sensitive to the light.
* You should not use any salicylic acid preparation or moisturiser containing yellow soft paraffin before treatment as this can act like a sunscreen and stop the treatment working.
* You should avoid sunbeds and sunbathing throughout the course of treatment.
* You should avoid severe haircuts during your course of treatment. If necessary, have your hair cut prior to starting treatment or within the first two weeks.
* You should avoid applying false eyelashes before/during the course of your treatment
* You should avoid using sunless tanning (“fake tan”) products during your course of treatment.
* You must not use spray deodorants in the UVB treatment departments.
* If you wear clothing during treatment it is important that you wear the same clothing or exact same style for every treatment of the course.
* You should notify staff of any temporary skin covering (e.g. pain patch, contraceptive patch etc) prior to starting your treatment

**Effects that could happen during your course:**

* It is likely that you will get a mild sunburn reaction at least once during your course.
* If you get any severe sunburn-like reactions then you should contact the phototherapy unit which you are attending, unless they have given you other details about what you should do to get advice. If there is any delay in getting further advice then if you have a steroid ointment at home it would be appropriate to apply this as well as moisturisers.
* You may get a spotty, itchy rash during your course (about one out of 10 people do).
* Depending on your natural skin colour, if your skin goes brown easily in sunlight, you may develop a dark tan.
* Your skin may become dry and itchy.

If you experience any of these reactions, your moisturiser will help to soothe your skin.

If you are very uncomfortable, please discuss this with your nurse. We will ask a doctor to see you if needed.

**Are there risks associated with having many courses?**

* **Skin Cancer**

People who have a lot of sunlight exposure have an increased risk of cancer.

Although we do not know the human risk of this particular type of ultraviolet light (narrowband UVB), if we assume that the risk is the same as with sunlight, a course every year over the whole of a patient’s life would in general double the risk of treatable skin cancer. Many factors affect this. If you are not having your face treated this risk will be reduced.

**Review:** It is usual practice to be asked to attend your local clinic for a specific skin cancer review once you have received more than 500 UVB treatments.

* **Photoaging**

It is also possible if you need many treatments that you may develop sunlight induced skin changes with wrinkling and skin discolouration, similar to that of the ageing process or produced by cigarette smoking

**Final Points**

* UVB treatment is safe during pregnancy.
* Staff will give you close fitting goggles and a faceshield to wear while you are in the cubicle (unless your Doctor has told you not to). Sometimes, particularly for bad eczema affecting eyelids, people are treated without goggles. Human eyelid skin prevents transmission of UVB. If you are treated without goggles it is **essential** that you keep your eyes shut throughout the treatment – even occasionally blinking them open during treatment can allow the UVB to cause a painful keratitis (inflammation of the front of the eye).
* Most patients will be treated without clothing in the cubicle. However, male patients should wear genital protection during treatment.
* If you have a history of frequent cold sores, you should apply “sunblock” cream before each treatment, if you are not advised to wear a faceshield during treatment.
* Valuables are your responsibility.

Your UVB treatment is planned specifically for you. If you have questions about any aspect of your treatment, please ask any member of staff while you are having your treatment.

**If you require an alternative format**, please contact nss.equalitydiversity@nhs.scot, telephone: 0131 275 6000

**British Sign Language**, please contact Scotland BSL: [www.contactscotland-bsl.org](http://www.contactscotland-bsl.org)