

Patient information factsheet

Phototesting

We hope this factsheet will help to answer some of the questions you may have about phototesting and what you can expect when you come in to hospital. If you have any further questions or concerns, please do not hesitate to speak to the doctor or nurse caring for you.

What is phototesting?

Some skin conditions are triggered or made worse by sunlight. They're usually caused by the invisible ultraviolet (UV) part of sunlight, or more rarely by visible light.

Phototesting is a light test to find out how sensitive you are to sunlight and which part of sunlight is causing your skin problem. We use a machine called a monochromator to test small areas of your skin with ultraviolet and visible light. This helps your dermatologist diagnose and treat your skin condition.

The monochromator separates sunlight into different types and colours (wavelengths) of light. Small areas on your back (10mm in diameter, roughly the same size as the end of a pencil) will be tested with different wavelengths and doses of light. We mainly use ultraviolet light because this is the part of sunlight that most commonly causes skin problems.

Provocation testing

In some circumstances we may try to provoke the rash by exposing a larger area of skin (about the size of a mobile phone) on the inside of the forearm to ultraviolet, or visible light. This is known as provocation testing. It helps us to see the characteristics of the rash and to take a sample of skin (biopsy) if necessary to diagnose the condition.

After 24 hours we will review the area and if there is no reaction we may give you a further dose of light. Sometimes we may need to test the area for three consecutive days.

Before your phototesting

- Three days before your phototesting starts, you should stop applying moisturisers or steroid creams (such as Betnovate® or Dermovate®) to your back, forearms and bottom.
- Two days (48 hours) before your phototesting starts, stop taking antihistamines, as they will affect your skin's reactions to the testing. We will advise you when you can start taking them again after the testing is complete.
- Contact the dermatology unit on telephone: **023 8054 0204** for advice if you are taking medicines that suppress your immune system (immunosuppressant medicines), as these will affect your phototest results. This may include steroids taken by mouth, (such as prednisolone), ciclosporin, methotrexate or azathioprine.

On the day of your phototesting

Please bring the following items with you when you come into hospital for your phototesting

appointment:

- a list of all the medicines you are currently taking (including any skin treatments (creams or ointments) that you have been using, as well as any oral medicines (medicines taken by mouth), sprays or inhalers). Your family doctor will be able to give you this information if you are unsure.
- any over-the-counter medicines you have bought yourself and any alternative medicines that you are taking, such as herbal or homeopathic remedies.
- any photographs you may have taken of your skin rash.
- your diary, as we may need to arrange dates with you for follow-up appointments and further treatments.
- We suggest that you wear dark-coloured clothing for the tests if possible, as we will use a marker pen which may stain pale fabrics.

You may bring a friend or adult family member with you to the appointment. Children must be accompanied by a parent or guardian.

At your phototesting appointment

When you arrive at the dermatology department we'll show you to a private cubicle where you will be asked to remove your shirt or top and wear a gown with an opening at the back. We will use a marker pen to outline the areas on your skin that will be tested (most commonly the back or forearm). A specialist nurse will operate the monochromator and expose these areas to the light. The doses are low and only directed at very small areas of the skin, so this isn't harmful.

The test usually takes about an hour and a half, and you can sit and read while it's taking place. It's not painful and should be an entirely comfortable experience. When the test is over you can go home. You will need to come back in the next day for a consultation with your doctor.

After the test:

- don't remove the pen marks until after your appointment the following day as they will help us to assess your results.
- don't apply creams or ointments or take any new medication as we need to see how your sun rash develops.
- do take a photograph of any reactions that appear between your test and your appointment for readings the next day (particularly if your rashes tend to clear within 24 hours).

Getting your phototesting results

The day after your phototesting you will have another appointment with your doctor, who will assess your phototesting results. Please bring in any photographs you may have taken of your skin before and/or after phototesting.

Your doctor will explain what the test results mean and tell you about the relevant treatment. They will need to look at your back to see the results of phototesting on your skin. They may also perform a general examination of your skin.

We will send a letter summarising all the test results, the diagnosis and the treatment plan to your referring consultant and also to your general practitioner (GP). If you'd like a copy of the letter please ask the doctor at your appointment.

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Follow-up appointments

If the results of your phototest show that your skin condition reacts to light, we may offer you some follow-up appointments at the photodermatology clinic. These will usually be arranged once or twice a year to monitor your skin condition and update your treatment plan. Between these appointments you will be cared for by your referring doctor at your local hospital or clinic.

Risks of phototesting

If your skin usually reacts to sunlight, it will probably react in the same way to phototesting in the small areas we test. If you experience a strong response to the tests, the consultant will prescribe a steroid cream to reduce the reaction, which you should apply to the skin as directed.

The doses of light we use for testing are roughly equivalent to 20 minutes of exposure to UK summer sunshine. In healthy skin, it is normal for the longest exposure to turn the skin slightly pink or produce a tan. The reactions normally fade over a few weeks.

Alternative treatments

Some skin conditions that are caused by sunlight can be diagnosed using blood tests. You will be asked to have blood tests to exclude these conditions. Even if the blood test results are positive, we would still advise you to have phototesting, as this will tell us how sensitive you are to the sun and which wavelengths of sunlight cause your skin condition. This information will help us make a diagnosis and develop a treatment plan for you.

Seeking and acting on patient feedback is key to improving the quality of our services. The Friends and Family Test gives you the opportunity to give your view on the care or treatment you've received. You can complete the survey online by visiting www.uhs.nhs.uk/PatientsAndVisitors/Patientexperienceandsatisfaction/Friends-and-Family-Test.aspx and entering the passcode **rhmo** when prompted.

Contact us

If you have any questions or concerns about your phototesting appointment, please contact us on one of the following telephone numbers:

- (Monday to Friday, 8am to 4pm) Dermatology booking office: **023 8054 9200** or the phototesting nursing team: **023 8054 0203**
- (Out of hours) Please leave a message on the booking office number and we will contact you the next working day, where possible.

Useful links

www.bad.org.uk

For a translation of this document, or a version in another format such as easy read, large print, Braille or audio, please telephone **023 8120 4688**.

For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit www.uhs.nhs.uk/additionalneeds