Many reports have been published concerning the treatment of vitiligo with oral administration and/or topical application of 8-methoxypsoralen (8-M.0. P., xanthotoxin). A number of factors appear to influence the chance of repigmentation, e.g. the colour of the skin, the age of the patient, the localization of the eruption, and the frequency of exposure to sun- or artificial light. Rather frequently depigmentation of healed areas after discontinuation of the therapy has been observed.

Although probably oral administration of low doses of M.0. P. does not have harmful effects, in contrast to the serious side-effects in guinea-pigs treated with high doses, we prefer topical application.

We have treated 14 patients (5 coloured, 9 white) with topical application of 8-M.0. P. (0.005% or 0.01% in alcoholic solution). One hour after application the skin areas were irradiated with longwave ultra violet light, obtained from a water cooled super high-pressure mercury lamp (SP 500 Philips), with 2 glass lenses and 3 layers of glass, to exclude the short wave ultra violet light (Röttier and van der Leun).

Patches were irradiated once in a week or once in two weeks. Extensive vitiligo in a 14-year-old coloured girl was repigmented after 11 to 44 irradiations; no depigmentation was observed after 3 years. Vitiligo in the face of a 13-year-old coloured boy was also wholly repigmented. The other 3 coloured patients showed no or only a slight repigmentation. Of the white patients complete repigmentation could be obtained in a 34-year-old woman with vitiligo of the right arm after 8 irradiations. In the other patients no or only a slight and temporary improvement could be obtained.

These results are in accordance with those reported by other authors.