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Virtual issue on Vitiligo



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Preface by [Alain Taieb](#)

Common generalised (non segmental) vitiligo is an acquired, chronic disorder of pigmentation characterised by white patches, often symmetrical, which usually increase in size with time, due to a substantial loss of functioning epidermal and/or hair follicle melanocytes. Vitiligo affects approximately 1% of the world population.

In terms of hard outcome measures, vitiligo is a benign disorder. However, it is associated with a heavy psychosocial burden especially in pigmented individuals. In the field of pigment cell research, the contrast is marked with the potential killer pigment cell disease melanoma, a clearly identified public health priority in developed countries. A total of about 200 articles on vitiligo are released every year in the medical literature (compared to approximately 1000 on atopic dermatitis, 1300 for psoriasis common skin disorders more visible on fair skin, and 2700 for melanoma).

Globalisation and economic empowerment of South and East Asian countries are happily now driving forces in this field. Initiatives are awaited in the pharmaceutical industry because of a large and profitable market. The recently created Asian Society for Pigment Cell Research has put vitiligo as the top priority on its agenda. International Consortia, Task Forces and Special Interest Groups are trying to merge individual efforts into more successful actions. Patient support groups are helping physicians in their research and lobbying for more disease awareness in political circles. Rapid progress in cellular and developmental biology of melanocytes has attracted the attention of top scientists into pigment cell research. The pathophysiology of pigment cell disorders is a new frontier, and the elusive nature of vitiligo is apt to seduce penetrating minds. Vitiligo is probably going to become the new Grail of pigment cell science: how are melanocytes disappearing in vitiliginous skin and what can be done to fix the problem? The debate, as reflected by reviews published recently in the journal (1-5), is fuelled by a multitude of facts and arguments, but definitive answers need more work.

Pigment Cell Research has a strong commitment to support the best papers in this field. It has published in recent years original research papers, which reflect both the current trends in the field and the broad international basis of the journal: epidemiology (6), autoimmunity (6-7), genetics or association with predisposing traits (8-11), cytokines (12), pharmacology (13), oxidative stress (14-15), catecholamines (16), or phototherapy (17), as well as reviews on therapy (18). The journal is interested in scientific papers addressing the whole scope of the disease and its management. In order to be evaluated, vitiligo research should first define precisely the type of disease studied, its stage, extension, duration and ongoing treatments whenever research is made on skin biopsies or blood samples. The journal is more research than clinically oriented, but clinical reports suggesting new hypotheses, or providing new insights of particular relevance to

pathophysiology or treatment of the disease, may be considered. Reviews are usually invited, but spontaneous submissions covering new areas relevant to vitiligo research are welcome.

1. [Ongenaes K, Van Geel N, Naeyaert JM. Evidence for an autoimmune pathogenesis of vitiligo. *Pigment Cell Res.* 2003; 16:90-100.](#)
2. [Gauthier Y, Cario Andre M, Taieb A. A critical appraisal of vitiligo etiologic theories. Is melanocyte loss a melanocytorrhagy? *Pigment Cell Res.* 2003;16:322-32..](#)
3. [Wankowicz-Kalinska A, Le Poole C, van den Wijngaard R, Storkus WJ, Das PK. Melanocyte-specific immune response in melanoma and vitiligo: two faces of the same coin? *Pigment Cell Res.* 2003;16:254-60.](#)
4. [Boissy RE, Mança P. On the etiology of contact/occupational vitiligo. *Pigment Cell Res.* 2004 ;17:208-14.](#)
5. [Imokawa G. Autocrine and paracrine regulation of melanocytes in human skin and in pigmentary disorders. *Pigment Cell Res.* 2004;17:96-110.](#)
6. [Alkhateeb A, Fain PR, Thody A, Bennett DC, Spritz RA. Epidemiology of vitiligo and associated autoimmune diseases in Caucasian probands and their families. *Pigment Cell Res.* 2003 Jun;16 \(3\):208-14.](#)
7. [Blomhoff A, Helen Kemp E, Gawkrödger DJ, Weetman AP, Husebye ES, Akselsen HE, Lie BA, Undlien DE. CTLA4 polymorphisms are associated with vitiligo, in patients with concomitant autoimmune diseases. *Pigment Cell Res.* 2005;18:55-8.](#)
8. [Tastan HB, Akar A, Orkunoglu FE, Arca E, Inal A. Association of HLA class I antigens and HLA class II alleles with vitiligo in a Turkish population. *Pigment Cell Res.* 2004 Apr;17\(2\):181-4.](#)
9. [de Vijlder HC, Westerhof W, Schreuder GM, de Lange P, Claas FH. Difference in pathogenesis between vitiligo vulgaris and halo nevi associated with vitiligo is supported by an HLA association study. *Pigment Cell Res.* 2004;17:270-4.](#)
10. [Na GY, Lee KH, Kim MK, Lee SJ, Kim do W, Kim JC. Polymorphisms in the melanocortin-1 receptor \(MC1R\) and agouti signalling protein \(ASIP\) genes in Korean vitiligo patients. *Pigment Cell Res.* 2003 Aug;16\(4\):383-7.](#)
11. [Jin SY, Park HH, Li GZ, Lee HJ, Hong MS, Hong SJ, Park HK, Chung JH, Lee MH. Association of angiotensin converting enzyme gene I/D polymorphism of vitiligo in Korean population. *Pigment Cell Res.* 2004;17:84-6.](#)
12. [Moretti S, Spallanzani A, Amato L, Hautmann G, Gallerani I, Fabiani M, Fabbri P. New insights into the pathogenesis of vitiligo: imbalance of epidermal cytokines at sites of lesions. *Pigment Cell Res.* 2002;15:87-92.](#)
13. [Lee AY, Kim NH, Park SW. All trans-retinoic acid \(ATRA\) elevated eukaryotic translation initiation factor 4A1 \(eIF4A1\) mRNA in ATRA-responsive vitiliginous epidermis. *Pigment Cell Res.* 2004 ;17:659-67.](#)
14. [Dell'Anna ML, Urbanelli S, Mastrofrancesco A, Camera E, Iacovelli P, Leone G, Manini P, D'Ischia M, Picardo M. Alterations of mitochondria in peripheral blood mononuclear cells of vitiligo patients. *Pigment Cell Res.* 2003;16:553-9.](#)
15. [Agrawal D, Shajil EM, Marfatia YS, Begum R. Study on the antioxidant status of vitiligo patients of different age groups in Baroda. *Pigment Cell Res.* 2004;17:289-94.](#)
16. [Cucchi ML, Frattini P, Santagostino G, Preda S, Orecchia G. Catecholamines increase in the urine of non-segmental vitiligo especially during its active phase. *Pigment Cell Res.* 2003;16:111-6.](#)
17. [Lei TC, Vieira WD, Hearing VJ. In vitro migration of melanoblasts requires matrix metalloproteinase-2: implications to vitiligo therapy by photochemotherapy. *Pigment Cell Res.* 2002;15:426-32.](#)
18. [Tsukamoto K, Osada A, Kitamura R, Ohkouchi M, Shimada S, Takayama O. Approaches to repigmentation of vitiligo skin: new treatment with ultrasonic abrasion, seed-grafting and psoralen plus ultraviolet A therapy. *Pigment Cell Res.* 2002;15:331-4.](#)

Recent Articles Published on Vitiligo

2007

[Vitiligo puzzle: the pieces fall in place](#)
 Wiete Westerhof, Marco d'Ischia
 Pages 345–359

October 2007

Vitiligo-associated multiple autoimmune disease is not associated with genetic variation in AIRE

Ying Jin, Dorothy C. Bennett, Anita Amadi-Myers, Paulene Holland, Sheri L. Riccardi, Katherine Gowan, Pamela R. Fain, Richard A. Spritz

Pages 402-404

October 2007

NALP1 and the inflammasomes: challenging our perception of vitiligo and vitiligo-related autoimmune disorders

Alain Taïeb

pages 260-262

August 2007

The genetics of generalized vitiligo and associated autoimmune diseases

Richard A. Spritz

pages 271-278

August 2007

Keratinocyte cultures from involved skin in vitiligo patients show an impaired in vitro behaviour

Sergio Bondanza, Riccardo Maurelli, Patrizia Paterna, Eleonora Migliore, Fabio Di Giacomo, Giovanni Primavera, Emanuel Paionni, Elena Dellambra and Liliana Guerra

pages 288-300

August 2007

Abnormal histological findings in active vitiligo include the normal-appearing skin

Flavia M.N. Pretti Aslanian, Rosangela A.M. Noé, Tullia Cuzzi, Absalom L. Filgueira

April 2007

The definition and assessment of vitiligo: a consensus report of the Vitiligo European Task Force

Alain Taïeb and Mauro Picardo on behalf of the other VETF members

Assessment Form to download [here](#)

2006

Activation of the Mitf promoter by lipid-stimulated activation of p38-stress signalling to CREB

Bidisha Saha, Suman Kumar Singh, Chinmoy Sarkar, Rabindranath Bera, Jagnyeswar Ratha, Desmond J. Tobin, Ranjan Bhadra

December 2006

A review and a new hypothesis for non-immunological pathogenetic mechanisms in vitiligo

Maria Lucia Dell'Anna, Mauro Picardo

October 2006

In vivo and in vitro evidence of dermal fibroblasts influence on human epidermal pigmentation

Muriel Cario-André, Catherine Pain, Yvon Gauthier, Vincent Casoli, Alain Taïeb

October 2006

Antioxidant status of segmental and non-segmental vitiligo

EM Shajil, Rasheedunnisa Begum

April 2006

HLA class II haplotype DRB1*04-DQB1*0301 contributes to risk of familial generalized vitiligo and early disease onset

Pamela R. Fain, Sunanda R. Babu, Dorothy C. Bennett, Richard A. Spritz

February 2006

2005

Early disease onset and increased risk of other autoimmune diseases in familial generalized vitiligo

Greggory Laberge, Christina M. Mailloux, Katherine Gowan, Paulene Holland, Dorothy C. Bennett, Pamela R. Fain, Richard A. Spritz

August 2005

Melanocyte-specific, cytotoxic T cell responses in vitiligo: the effective variant of melanoma immunity?

Silvia Garbelli, Stefania Mantovani, Belinda Palermo, Claudia Giachino

August 2005

CTLA4 polymorphisms are associated with vitiligo, in patients with concomitant autoimmune diseases

Anne Blomhoff, E. Helen Kemp, David J. Gawkrodger, Anthony P. Weetman, Eystein S. Husebye, Hanne E. Akselsen, Benedicte A. Lie and Dag E. Undlien

February 2005