Hydroquinone

Description

Hydroquinone is 1, 4-benzenediol. Hydroquinone occurs as fine, white needles. The drug is freely soluble in water and alcohol. Chemically, hydroquinone is designated as p-dihydroxybezene.

Clinical Pharmacology

Topical application of hydroquinone produces a reversible depigmentation of the skin by inhibition of the enzymatic oxidation of tyrosine to 3, 4-dihydroxphenylalnine (dopa) and suppression of other melanocyte metabolic processes.

Exposure to sunlight or ultraviolet light will cause regimentation of the bleached areas, which may be prevented by the use of sun blocking agents or sunscreen agents.

Indications and Use

The gradual bleaching of hyper pigmented skin conditions such as chloasma, melasma, freckles, senile lentigines, and other unwanted area of the melanin hyper pigmentation.

Contraindications

Prior history of sensitivity or allergic reaction to this product or any of its ingredients. The safety of topical hydroquinone use during pregnancy or in children (12 years and under) has not been established.

Warnings

Avoid contact with eyes. Sunscreen use is essential aspect of hydroquinone therapy because even minimal sunlight exposure sustains melanocytic activity. Contains sodium metabisulfite, a sulfite that may cause serious allergic type reactions (hives, itching, wheezing, anaphylaxis) in certain susceptible persons. Treatment should be limited to relatively small areas of the body at one time since some patients experience a transient skin reddening and a mild burning sensation which does not preclude treatment.

Pregnancy Category C

Animal reproduction studies have not been conducted with topical hydroquinone. It is also not known whether hydroquinone can cause fetal harm when used topically on a pregnant woman of affect reproductive capacity. It is not known to what degree, if any, topical hydroquinone is absorbed systemically. Topical hydroquinone should be used on pregnant women only when clearly indicated.

Adverse Reactions

No systematic adverse reactions have been reported. Occasional hypersensitivity (localized contact dermatitis) may occur, in which case the medication should be discontinued and the physician notified immediately.

Dosage and Administration

A thin application should be applied to the affected area twice daily or as directed by a physician. If no improvement is seen after three (3) months of treatment, use of the product should be discontinued. Sun exposure should be limited by using a sunscreen agent, a sun blocking agent, or protective clothing to cover bleached skin when using and after using this product in order to prevent repigmentation.

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