

M89, a combination of 89% Vichy mineralizing water and hyaluronic acid reinforces the skin barrier and shows efficacy and high tolerability in various facial inflammatory dermatoses and esthetic procedures as adjunct

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Funding: This assay was funded by Laboratoire Vichy International

Conflict of interest: Delphine Kerob is an employee of Laboratoires Vichy International, France. Jerry Tan is a member of advisory boards organized by Laboratoires Vichy. The other authors have no conflict of interest to disclose.

Acknowledgements: The authors acknowledge the editing assistance of Karl Patrick Göritz, SMWS France and Dominique Poisson for the poster-lay out.

Introduction

The skin exposome comprises external and internal factors including UV radiation, climatic conditions (heat and humidity), medications, pollution, stress, and dermatology procedures that may damage the skin barrier, induce skin diseases or accelerate skin ageing.¹⁻⁵

Mineral 89 (M89, Vichy Laboratoire), containing 89% Vichy mineralizing water recognized to be a volcanic mineralizing water (VW) and hyaluronic acid, was developed to reinforce the natural skin barrier and to protect against exposome factors.⁶⁻⁹

Aim of the study

This study assessed the efficacy and tolerability of M89 in subjects with facial inflammatory dermatoses including rosacea/sensitive/reactive skin and in those undergoing dermatology procedures.

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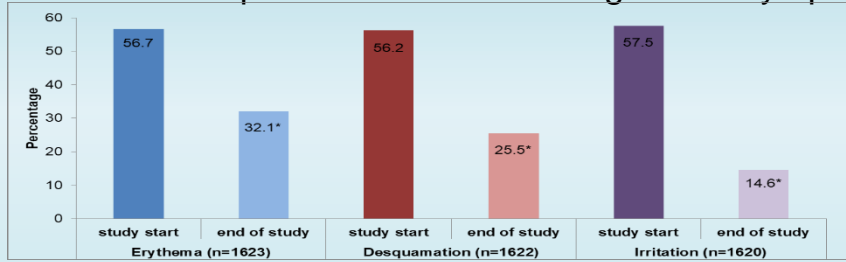
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Methodology

- 1630 adults with facial inflammatory dermatoses or undergoing dermatologic procedures were included; 309 with rosacea and/or sensitive and/or reactive skin; 1101 undergoing a dermatologic procedure
- M89 was applied twice daily for 4 weeks as adjuvant to standard treatment
- Clinical evaluations at baseline and after 4 weeks included
 - Clinical signs: erythema, desquamation and irritation, on a scale of 0 (absent) to 4 (very intense)
 - Subject-ratings of dryness, burning sensation, itching, stinging/tingling on a scale of 0 (absent) to 10 (most intense)
- After 4 weeks
 - Physician-rated global satisfaction on a scale of 0 (unsatisfied) to 3 (very satisfied)
 - Subject-rated satisfaction on a visual scale (0 = very unsatisfied to 10 = very satisfied)
 - Tolerance

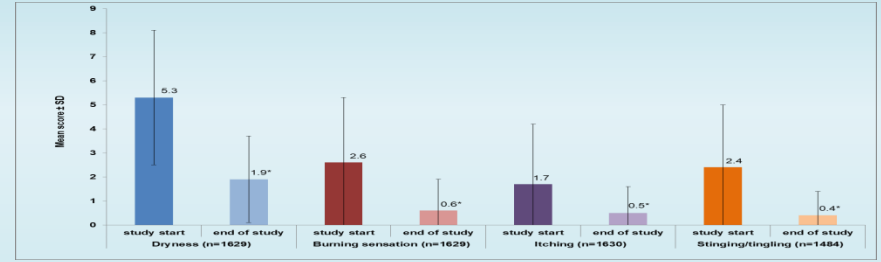
Results

- Entire group: 67.5% underwent a dermatologic procedure and 32.5% had a dermatological condition including rosacea/sensitive/reactive skin (309 subjects). Mean age was 41.1 ± 11.3 years; 92.5% were women. Improvement of clinical signs and symptoms after 4 weeks of use of M89 are shown below.



*p<0.0001

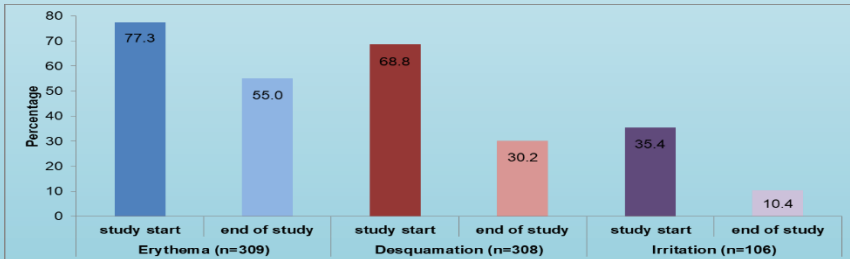
Figure 1 Subjects with signs at study start and end of study



*p<0.0001

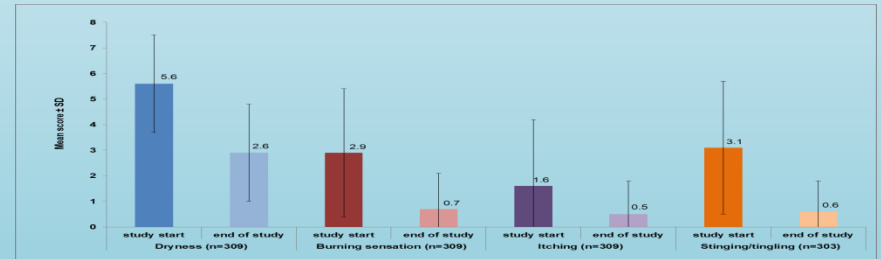
Figure 2 Symptom scores at study start and end of study

- Rosacea/sensitive/reactive skin population: 19.0% of subjects had rosacea/sensitive/reactive skin. Mean age: 39.1 ± 11.2 years; 96.1% were women.
- Improvement of clinical signs and symptoms after 4 weeks of use of M89 are shown below.



*p<0.0001

Figure 3 Subjects with signs at study start and end of study



*p<0.0001

Figure 4 Symptom scores at study start and end of study

Results

- *Satisfaction scores (mean) at 1 week and 4 weeks, respectively (p values versus baseline)*
 - *Entire group: 8.4±1.8 and 9.0±1.6 (both p≤0.0001);*
 - *Rosacea/sensitive/ reactive skin population: 8.7±1.6 and 9.0±1.5 (both p≤0.0001);*
- *Dermatologic procedure group: erythema resolved or improved in 72.5%, desquamation 75.2%; irritation in 88.1%. Dryness, burning, itching and stinging/tingling scores decreased by 62.1%, 78.8%, 70.0% and 84.2%, respectively (all p≤0.0001 compared to baseline).*
- Almost all subjects reported soothed or very soothed skin as early as after one week and reported sufficiently hydrated skin.
- Almost all physicians were satisfied or very satisfied with M89.
- *Tolerance: good to very good in 98.5% of both populations (dermatologic procedures and dermatological indications) and 99.7% of the rosacea/sensitive/reactive skin population.*

Conclusions

M89 (89% VVW and hyaluronic acid) as adjunct to standard management improves skin signs and symptoms at 1 and 4 weeks of continued use with high tolerability and satisfaction levels in those with rosacea, sensitive/reactive skin and post-dermatologic procedures.