

Contraindications LED Patches and Hydrocolloids

- DO NOT share the device with any other person. The device is for single person use only.
- DO NOT reuse the hydrocolloid patches between treatment sessions. The hydrocolloid patches are for single use only.
- DO NOT use the device to treat any other conditions apart from those listed in the intended use. The device has not been tested for any other conditions than those listed, and the risk is unknown.
- DO NOT use the device if you are pregnant, planning on becoming pregnant or breastfeeding. The device has NOT been tested on pregnant or breast-feeding women and therefore the risk to the foetus, neonate or pregnant women is unknown.
- DO NOT use the device if you have an allergy to Silicone or Polyethylene terephthalate. The treatment surfaces of the device contain medical grade silicone and Polyethylene terephthalate.
- DO NOT use the device if you have an allergy to Hydrocolloid bandages or any of the ingredients in the hydrocolloid patches outlined above. The LED patch fixes to your face using an adhesive hydrocolloid patch.
- DO NOT use the device if you suffer from light induced headaches.
- DO NOT use the device if you suffer from any genetic conditions of the eyes. If you are unsure about any related eye condition and using the device, contact a health care professional.
- DO NOT use the device if you suffer from lupus erythematosus, photosensitive eczema, or albinism. If you use the device to treat lupus erythematosus, photosensitive eczema, or albinism you may cause a severe skin reaction.
- DO NOT use the device if you suffer from any photosensitive disorder (sensitisation to light). If you use the device and you suffer from a photosensitive disorder; you may cause a severe skin reaction.
- DO NOT use the device if you are taking any medication that can cause photosensitivity. If you use the device and you are taking any medication that can cause photosensitivity you may cause a severe skin reaction.



Photosensitivity is a common side effect of various medications.

These can include certain antibiotics, chemotherapy drugs, and diuretics. If you are unsure about any medication, you may be taking consult your healthcare provider.



Other substances not listed above can also cause photosensitivity.

Common examples of these substances are:

St John's wort, coal tar, deodorants, antibacterial soaps, artificial sweeteners, naphthalene (mothballs), petroleum products, brightening agents found in laundry detergent, and cadmium sulphide (a chemical injected into the skin during tattooing).

There are some instances in which the **device** may prove unsuitable for an individual. Certain medical conditions or drugs may mean that an individual is unsuitable for the treatment.

Precautions due to drug induced photosensitivity

If you are taking any of the drugs listed below, please read the comments section of the table carefully.

| Drug Type | Specific Group or Common Name | Comments |
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| Anti-Arthritic | Gold 50 or Ridaura | If YES, the treatment cannot be administered |
| Anti-Arthritic or Immunosuppressant | Azathioprine (Imuran, Azasan) | If YES, the treatment can be administered as long as the medication has not been taken within the last 5 days. |
| Anti-Arrhythmic | Amiodarone (Cordarone, Pacerone), Aratac | If YES, the treatment can be administered as long as the medication has not been taken within the last 5 days. |
| | Quinidine | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is a 10/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 5 days, then the treatment can be administered. |
| Antibiotics | Fluoroquinolones: Ciprofloxacin (Cipro), Levofloxacin (Levaquin), Lomefloxacin (Maxaquin), Norfloxacin (Noroxin), Ofloxacin (Floxin) Tetracyclines: Demeclocycline (Declomycin), Doxycycline (Vibramycin), Minocycline (Minocin), Oxytetracycline (Terramycin) Others: Azithromycin (Zithromax), Capreomycin (Capastat), Ceftazidime (Fortaz), cycloserine (Seromycin), Metronidazole (Flagyl), nalidixic acid (NegGram), pyrazinamide, sulfamethoxazole/trimethoprim (Bactrim) | If YES, the treatment can be administered as long as the medication has not been taken within the last 5 days. |
| Anti-Cancer | Bexarotene (Targretin), Capecitabine (Xeloda), Dacarbazine (DTIC), Epirubicin (Ellence), Fluorouracil (5-FU), Interferon alfa (Intron A, Alferon-N), Methotrexate (Mexate), Pentostatin | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is between a 1 /100 and 5/100 chance of a light reaction. If the |

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| | (Nipent), Procarbazine (Matulane), Tretinoin, oral (Vesanoid), Vinblastine (Velban, Velbe) | client has stopped taking the medication for ≥ 5 days, then the treatment can be administered. |
| Anticonvulsants | Carbamazepine (Tegretol), Felbamate (Felbatol), Gabapentin (Neurontin), Lamotrigine (Lamictal), Oxcarbazepine (Trileptal), Topiramate (Topamax), Valproic acid (Depakene) | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is a 1/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 5 days, then the treatment can be administered. |
| Antifungals | Flucytosine (Ancobon), Griseofulvin (Fulvicin, Gris-PEG), Terconazole (Terazol) Voriconazole (VFEND) | If YES, the treatment can be administered as long as the medication has not been taken within the last 5 days. |
| Antihistamines | Cetirizine (Zyrtec), Diphenhydramine (Benadryl), Loratadine (Claritin), Promethazine (Phenergan) | If YES, the treatment can be administered as long as the medication has not been taken within the last 5 days. |
| Antihypertensives | Captopril (Capoten), Diltiazem (Cardizem, Tiazac), Enalapril (Vasotec), Nifedipine (Procardia), Sotalol (Betapace) | If YES, the treatment can be administered as long as the medication has not been taken within the last 5 days. |
| Antimalarial | Chloroquine (Aralen), Hydroxychloroquine (Plaquenil), Pyrimethamine (Daraprim), Pyrimethamine/sulfadoxine (Fansidar), Quinine | If YES, the treatment can be administered as long as the medication has not been taken within the last 5 days |
| Antipsychotics | Phenothiazines: Chlorpromazine (Thorazine), Fluphenazine (Prolixin), Perphenazine (Trilafon), Prochlorperazine (Compazine), Thioridazine (Mellaril), Trifluoperazine (Stelazine) | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is between a 2/100 and 3/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 5 days, then the treatment can be administered. |
| Antiretroviral | Ritonavir (Norvir), Saquinavir (Fortovase, Invirase), Zalcitabine (Hivid) | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is approximately a 2/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 5 days, then the treatment can be administered. |
| Antiviral | Amantadine (Symmetrel), Acyclovir (Zovirax) | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is approximately a 1/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 5 days, then the treatment can be administered. |
| Cardiovascular | Thiazide diuretics: Bendroflumethiazide (Corzide), Chlorthalidone (Thalitone), Hydrochlorothiazide (Microzide), Hydroflumethiazide (Diucardin), Indapamide (Lozol), Methyclothiazide (Enduron), Metolazone (Zaroxolyn), Polythiazide (Renese) Diuretics, Other: Furosemide (Lasix), Triamterene (Dyrenium) | If YES, the treatment can be administered as long as the medication has not been taken within the last 5 days. |
| Lipid regulators Other | Fenofibrate (Tricor) | If YES, and the client is currently on the medication it is at the discretion of the |

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| | | client as to whether they commence the treatment. There is a 10/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 5 days then the treatment can be administered. |
| Non-steroidal anti-inflammatory (NSAIDs) Analgesics | Diclofenac (Voltaren, Cataflam), Naproxen (Anaprox) | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is a <1/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 1 day, then the treatment can be administered. |
| Sedatives | Alprazolam (Xanax), Chlordiazepoxide (Librium), Zaleplon (Sonata), Zolpidem (Ambien) | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is a 1/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 5 days, then the treatment can be administered. |
| Skin agents (acne) | Isotretinoin (Accutane, Roaccutane) Tretinoin topical (Renova, Retin-A) Tazarotene (Tazorac) | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is between a 5/100 and a 10/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 5 days, then the treatment can be administered. |
| Skin agents (hair) | Coal tar, Minoxidil (Rogaine) | If YES, and the client is currently on the medication it is at the discretion of the client as to whether they commence the treatment. There is < 0.5/100 chance of a light reaction. If the client has stopped taking the medication for ≥ 5 days, then the treatment can be administered. |