

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
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

	(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

		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.