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## ***Interactive comment on* “Estimated UV doses to psoriasis patients during climate therapy at Gran Canaria in March 2006” by L. T. N. Nilsen et al.**

### **Anonymous Referee #2**

Received and published: 15 February 2008

#### General Comments:

This paper presents estimated UV doses received by psoriasis patients at a climate therapy clinic in Gran Canaria in March 2006. UV radiation doses received by patients in the Canary Islands have been known for some time (Snellman et al Photodermatol Photoimmunol Photomed 1992; 9: 40-43). Centres that provide UV phototherapy have (or should have) a regular programme of UV dose measurements as part of their quality control. Knowing the values measured in one month in 2006 may be important to those carrying out the treatment but is of very little interest to the wider scientific community.

#### Specific Comments:

The authors report the use of broadband devices without consideration of the limita-

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tions of the accuracy of these devices, particularly in the UVB region where the sunlight spectrum changes rapidly with wavelength.

They then present a table with values of UVB, UVA, CIE-weighted UVB, CIE-weighted UVA and CIE-weighted UV without any discussion as to which, if any, of the parameters are of any significance. Eventually, they seem to decide to use the SED, which is surprising because this is a measure of the erythral effectiveness. When delivering UV phototherapy the aim is generally to deliver as much UV as possible while minimising the erythema. This is the reason for using narrow-band TL01 UVB.

The authors show that there is no correlation between SED and %PASI reduction. I do not see any point in showing this data without detailed analysis. In a situation where all patients receive fairly comparable, and fairly high levels of UV dose, then the %PASI reduction is likely to be related to individual patient variability, and study of this is a considerable piece of work in its own right.

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Interactive comment on Atmos. Chem. Phys. Discuss., 8, 1, 2008.

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