[0007] In another aspect, provided herein is the use of the composition described herein in the manufacture of a medicament for treating excess pigmentation.

[0007a] In another aspect, provided herein is the use of a composition comprising a polyamine synthesis inhibitor in the manufacture of a medicament for treating or reducing excess pigmentation in a subject in need thereof, wherein the composition is to be administered to the subject.

[0007b] In another aspect, provided herein is the composition described herein for use in therapy.

[0007c] In another aspect, provided herein is a method of cosmetically reducing excess pigmentation in a subject in need thereof, the method comprising administering a composition comprising a polyamine synthesis inhibitor to the subject

DEFINITIONS

[0008] The term "excess pigmentation" refers to any state wherein the amount of pigmentation in the skin is deemed undesirably high. For example, an area of skin may have increased pigmentation compared to the rest of the skin surrounding said area, thus, said increased pigmentation may be considered as "excessive", and said area has "excess pigmentation". The terms "excess pigmentation" and "hyperpigmentation" can be used interchangeably. Excess pigmentation is generally caused by increased or abnormally high amounts of the skin pigment melanin in the skin or in the epidermis. Excess pigmentation can be associated with various physiological causes, such as inflammatory responses, yeast infections, pregnancy, hormonal changes, genetics, sun exposure and aging, etc. Excess pigmentation can be ameliorated by reduction of melanin in the skin or epidermis, for example, through reducing melanin production by melanocytes in the skin.

[0009] Some examples of excess pigmentation may include increased pigmentation caused by natural processes, such as aging, due to genetics, due to hormonal changes, benign skin lesions comprising excess pigmentation (e.g., in moles and freckles). Excess pigmentation may also be caused by pigmentation disorders such as hyperpigmentation disorders. Hyperpigmentation disorders may be caused directly or indirectly by medical conditions, and include but are not limited to melasma (also known as chloasma), lentigo (plural: lentigines) (e.g., solar and non-solar lentigo), post-inflammatory hyperpigmentation (PIH), fungal infection (e.g., tinea versicolor), inflammation, or underlying medical conditions (e.g., acanthosis nigricans), drug-induced hyperpigmentation (e.g., ochronosis).

[0010] Melasma, also known as chloasma or the mask of pregnancy, appears as dark, irregular well demarcated hyper-pigmented macules to patches, commonly found on the upper cheek, nose, lips, upper lip, forehead, and other parts of the body that are exposed to the sun.

[0011] Post-inflammatory hyperpigmentation (PIH) is an acquired hypermelanosis occurring after cutaneous inflammation or injury. PIH results from the overproduction of melanin or an irregular dispersion of pigment after cutaneous inflammation. PIH typically manifests as macules or patches in the same distribution as the initial inflammatory process.

[0012] Hyperpigmentation can also be associated with fungal infection, which is then considered to be a type of a skin condition known as tinea versicolor, also termed pityriasis versicolor. It can be caused by infection with fungi, for example, of the genus *Malassezia*, such