


## Questions and Answers

## Fever blisters

If a client is prone to fever blisters, what should she be aware of regarding esthetic services? Also how long after a fever blister should you wait until you have a lip wax or facial?

A client with a history of fever blisters should take prophylactic oral antiviral medication prior to and for five days following chemical peels, microdermabrasion or lip waxing. Treatments should be withheld during an active outbreak until the lesions have fully healed.

## Eczema

Can eczema of the hands and feet be treated and go away? Do you have any recommendations for treatments in the spa?

Hand eczema can be treated and cleared, but individuals with a propensity to eczema are susceptible to recurrence. Eczema can be cleared through the use of topical steroids, Protopic (a topical immunomodulator) and the use of silicone based protective hand creams. Affected individuals should avoid direct exposure to soaps and detergents. They should also minimize their exposure to frequent hand washing. Nonlipid cleansers such as Cetaphil or Aquanil are recommended for hand washing. Paraffin hand treatments may be beneficial, but one should avoid using fragranced or scented creams.

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## Thin skin

Some of my elderly clients have thin, dry, delicate skin, which makes them very prone to abrasions and cuts, Is there anything they can use to prevent having such delicate skin?

The skin fragility you describe is the result of chronic sun damage. Prevention through the regular use of sunscreens and protective clothing can prevent further damage. The use of vitamin $K$ cream may lessen bruising and the use of a retinoid such as Retin-A, Differin or Tazorac may partially improve the condition. Other agents that stimulate collagen production such as glycolic acid creams may also be helpful.

## Breast scars

How long does it take for scars on the breasts from a reduction to become unnoticeable? Do you have any suggestions on speeding up the healing process?

Not all breast reduction scars become unnoticeable, although most improve over time. Treatment of erythematous (red) or elevated
scars with a pulsed dye or $V$ beam laser can hasten resolution. Intralesional steroid injections can flatten elevated scars.

## Breast cancer

There was an e-mail being passed around that I was forwarded about how if you have a rash on your nipples you should get checked for breast cancer, is this true? If so what does the rash look like?

Pagets disease of the nipple is associated with intraductal breast cancer. It occurs in less than 3 percent of breast cancers and appears as a marginated, scaling or crusting of the nipple and areola. However, not all rashes in this area are associated with breast cancer. Dermatitis of the nipples can also occur in individuals with a propensity to eczema. Nonetheless, all individuals with a rash on the nipples should seek evaluation by a dermatologist.

## Zinc

Is it true that zinc supplements may be helpful in treating acne?

Oral zinc supplementation may be helpful in treating inflammatory acne. The usual dose is 30 mg of elemental zinc per day. That dosage can be attained by taking either zinc gluconate 200 mg or zinc sulfate 220 mg . Since the latter is associated with gastrointestinal side effects, zinc gluconate is the preferred source.
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## Tanning salons

What is your opinion about tanning salons as alternatives to sun exposure for clients who want a bronzed look?

It is disappointing that approximately 28 million people every year frequent tanning salons without regard for the damaging effects of this UV exposure. Ultraviolet light emitted in tanning salons is associated with an increased incidence of skin cancer, including basal cell carcinoma, squamous cell carcinoma and melanoma. Indoor tanning is dangerous and should be avoided. Individuals who must have a tanned look should consider using self-tanning lotions instead of exposing themselves to the certain future risk of skin cancer and photoaging.

Debra Price, M.D., graduated from New York University School of Medicine and interned at New York University Medical Center. She is a diplomate of the American Board of Dermatology and is an assistant professor at University of Miami's department of dermatology and cutaneous surgery. An author of several scientific papers, Dr. Price is an awardwinning dermatologist and past president of the Miami Dermatologic Society, in Florida. She has a private practice in Kendall, FL. To reach Debra Price, M.D., call (305) 670-1111.

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