

# les nouvelles *esthétiques*

AMERICAN EDITION

LNE—the magazine for skin care and spa professionals November 2006 \$7.50



## medical dermatology update

### Questions and Answers

#### Gentle cleansers

**Q:** What cleansers do you recommend for patients with rosacea and sensitive skin?

**A:** Lipid-free cleansers such as Cerave, Cetaphil and Aquanil are ideal cleansers for individuals with sensitive skin or rosacea. They leave a thin moisturizing film on the skin and do not cause stinging or burning.

You can apply a low-potency corticosteroid like hydrocortisone to a pimple to reduce inflammation.

Cerave is the newest of such cleansers. Unlike other lipid-free cleansers, it incorporates ceramides in a time-release vesicle. These vesicles gradually release ceramides to moisturize the skin's surface and restore the skin barrier while cleansing.

#### Lightening agents

**Q:** What ingredients other than hydroquinone can be used to lighten melasma and age spots?

**A:** There are many cosmeceutical lightening agents including aloesin, arbutin, kojic acid, retinol and glabridin. These cosmeceutical lightening ingredients can be combined with prescription products containing hydroquinone, retinoic acid, azelaic acid and mequinol to enhance efficacy. Of course treatment of hyperpigmentation

should also always include the daily use of a broad-spectrum sunscreen.

#### Cancer treatment options

**Q:** Are there any new methods of treating skin cancer that are less invasive than traditional methods?

**A:** Aldara is a topical medical treatment option for patients with superficial basal cell carcinoma and

squamous cell carcinoma *in situ* (in position). Patients must be willing to undergo treatment for two to four months and be monitored closely following treatment to ensure there is no recurrence of skin cancer. Aldara is also a novel therapeutic option for patients with more invasive skin cancers who are not surgical candidates. Some patients are also treated with Aldara prior to surgery to shrink their skin cancers in an attempt to lessen scarring.

#### New cosmetic therapies

**Q:** What, in your opinion, will be the next big cosmetic therapy?

**A:** The introduction of a wide range of new filler products will be the most significant cosmetic therapy advance in the near future. Juvederm is a hyaluronic gel filler that was recently FDA



approved and will likely be launched by the end of the year. It is touted to last somewhat longer than Restylane, but there have been no direct comparison studies performed to date. Juvederm's approval includes a full range of fillers to treat superficial, medium and deeper wrinkles.

Perlane is another hyaluronic acid filler that is pending FDA approval. It is widely used in Europe to treat deeper depressions, volume loss secondary to aging, scars and deeper wrinkles. Sculptura is currently FDA approved for treatment of facial lipoatrophy in HIV-positive patients, but it is anticipated that its manufacturers will seek FDA approval for routine cosmetic use in healthy patients soon.

#### Potent pout plumpers

**Q:** In your opinion, which are the best lip fillers?

**A:** Hyaluronic acid fillers are the most versatile lip fillers. Many dermatologists use a combination of a collagen filler, such as Cosmoderm or Cosmoplast, with a hyaluronic acid filler, such as Restylane or Captique for lip enhancement. The former are used to define the lip border and provide support, while the latter are used to enhance lip volume. Ultimately, the esthetic sensibility and technical expertise of the practitioner who administers the injection is as important as the product used.

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portant as the filler in achieving a beautiful and natural lip enhancement.

**AAD's take on iPledge**

**Q:** The American Academy of Dermatology has been very vocal against iPledge, the program that registers patients who are prescribed Accutane. In your experience, how is this system working?

**A:** The iPledge system has been difficult and tedious for patients and physicians alike. Since the program began, the number of Accutane prescriptions written has significantly decreased. The academy is continuing to work with the program to implement changes that will make the program more user-friendly and efficient. Dermatologists share the program's goal of preventing pregnancy in patients taking Accutane, but, in my opinion, for the program to be successful, it must be accessible, flexible, reasonable and time-efficient. Accutane is a wonderful drug for patients with severe acne unresponsive to other therapy. Hopefully, changes will be implemented to improve the program in the future.

**Hydrocortisone to reduce inflammation**

**Q:** Can you put hydrocortisone on a pimple after it's been extracted to reduce inflammation?

**A:** You can apply a low-potency corticosteroid like hydrocortisone to a pimple to reduce inflammation. Other topical, nonprescription anti-inflammatory agents such as Cutanix or prescription topical drugs such as Nicomide can also decrease inflammation.

**Cancer risk in transplant patients**

**Q:** My uncle recently had a kidney transplant. His doctors have told him that a dermatologist must closely monitor him because he has an increased risk of skin cancer. How significant is this risk?

**A:** The risk of skin cancer in transplant patients is significantly increased and begins on average 10 years earlier than in other individuals. Skin cancers tend to be more aggressive, so it is important that transplant patients are monitored closely by a dermatologist. The risk of squamous cell carcinoma is 60 times that of the general population and the risk of basal cell carcinoma is 10 times that of the general population. **LNE**

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