Botox Can Soften Defects in Lower Face

BY NORRA MACREADY

NEWPORT BEACH, CALIF. — Peri-orbital injections of Botox may be a remedy when patients have lines radiating from the lips, a hollow appearance around the mouth, or an elongated upper lip associated with aging, Joel Cohen, M.D., said at the annual meeting of the Pacific Dermatologic Association.

Injecting a total of 6-10 U of botulinum toxin type A into the orbicularis oris muscle can soften the lines and give the patient a more animated expression. The treatment also augments the upper lip in some patients, giving them a fuller lip without having to use fillers, said Dr. Cohen, a clinical assistant professor of dermatology at the University of Colorado, Denver.

Identify the injection sites by having the patient purse her lips. Inject the Botox superficially, into the peaks of the muscle. Treat the lower lip as well as the upper lip, “or it will look funny, and may accentuate any hyperfunctional musculature of the lower lip,” he said.

Proper placement of the injections is important. Go too lateral, and you may weaken the lip elevators, which could result in a drooping lip and a risk of drooling. Injecting too medially or right at the midline could flatten the Cupid’s bow.

Even under the best of circumstances, Botox treatments around the mouth may impair the patient’s ability to purse her lips for an expression, Dr. Cohen said. For those reasons, Dr. Cohen does not recommend this procedure to actors, singers, broadcast journalists, woodwind musicians, or scuba divers.

Moving farther down the face, Dr. Cohen said he has achieved good results injecting Botox into people with a dimpled, “golf-ball chin” that becomes especially prominent when they talk or chew. Feel along the chin for the bony margin, and inject 3-5 U into the belly of the mentalis for 4 months as a result of an anesthetic injection into the ulcer nare.

The exact method of action of botulinum toxin in these areas is unknown. Botulinum toxin is an enzyme that is similar to cholecystokinin, a hormone that is associated with gallbladderEmpty Bladder

DESCRIPTION: Brevroxyl-4 Creamy Wash and Brevroxyl-8 Creamy Wash are topical preparations containing benzoyl peroxide 4% and 8%, respectively, in a soothing vehicle that is to be applied as needed to the affected areas. The vehicle contains: lauryl sulfate, titanium dioxide, glycerin, dimethyl isosorbide, glycolic acid, hydrogenated castor oil, carnauba wax, glyceryl monostearate, glyceryl stearate, glycine, hydroxypropyl cellulose, sodium lauryl sulfate, and sucrose palmitate.

Brevroxyl-4 and Brevroxyl-8 Cleansing Lotions are topical formulations containing benzoyl peroxide 4% and 8%, respectively, in a soothing vehicle containing purified water, sodium hydroxide, glycerin, hydrogenated castor oil, lauryl sulfate, titanium dioxide, dimethyl isosorbide, and sucrose palmitate.

Brevroxyl-4 and Brevroxyl-8 Creamy Washes are topical preparations containing benzoyl peroxide 4% and 8%, respectively, in a soothing vehicle containing purified water, hydroxypropyl cellulose, sodium lauryl sulfate, and sucrose palmitate.

The vehicle contains: lauryl sulfate, titanium dioxide, lauryl sulfate, titanium dioxide, glycerin, dimethyl isosorbide, glycolic acid, hydrogenated castor oil, carnauba wax, glyceryl monostearate, glyceryl stearate, glycine, hydroxypropyl cellulose, sodium lauryl sulfate, and sucrose palmitate.

The structural formula of benzoyl peroxide is: %E2%80%9C

CLINICAL PHARMACOLOGY: Benzoyl peroxide is the active ingredient of Brevroxyl-4 and Brevroxyl-8 Creamy Washes. Benzoyl peroxide is a potent keratolytic (exfoliating) agent that can cause drying and irritation. Benzoyl peroxide is bactericidal to Propionibacterium acne, the bacteria that cause acne. Benzoyl peroxide has been shown to increase keratinization of the stratum corneum and reduce sebum production.

Benzoyl peroxide is metabolized in the liver and primarily excreted in the urine. Benzoyl peroxide has been demonstrated to have a tumor promoter effect in vitro in cell culture systems. Benzoyl peroxide is highly susceptible to cancer suggest that benzoyl peroxide acts as a tumor promoter.

Benzoyl peroxide, when ingested, is minimally associated with liver damage. The clinical significance of these findings is not known.

Carcinogenesis, Mutagenesis, Impairment of Fertility — Benzoyl peroxide is not known to be carcinogenic, mutagenic, or teratogenic in animals. Human data is sparse but does not suggest a teratogenic effect. Benzoyl peroxide is not known to be carcinogenic, mutagenic, or teratogenic in humans.

FABRICS OR CARPETING AS BENZOYL PEROXIDE WILL CAUSE PERMANENT DAMAGE. DO NOT USE ON ANY MATERIALS OR SURFACES.

Benzoyl peroxide has been reported to cause discoloration of teeth and nails. Benzoyl peroxide is an ingredient in certain tooth pastes and mouthwashes.

Pregnancy: Category C — Benzoyl peroxide is not known to be teratogenic in animals. There are no adequate and well-controlled studies in pregnant women. Use of this medication during pregnancy should be avoided. Benzoyl peroxide is not known to be teratogenic in pregnant women.

Lactation: There is no information about the effects of peroxide 8% to a nursing woman. It is not known whether benzoyl peroxide is excreted in human milk.

Children: Benzoyl peroxide is not known to be less toxic to children than to adults.

CONTRAINDICATIONS: Benzoyl peroxide is contraindicated in patients with a known hypersensitivity to benzoyl peroxide, its ingredients, or benzoyl peroxide products.

PRECAUTIONS: Use only for external use. Benzoyl peroxide is highly irritating to the eyes and mucous membranes.

FOAM PADS MAY SPARE SURGERY

NEWPORT BEACH, CALIF. — A foam rubber pad with a hole in it helps many patients avoid surgery for chondrodermatitis nodularis chronica helicis (CHNCH), Dr. Ely said at the annual meeting of the Pacific Dermatologic Association.

Chondrodermatitis nodularis chronica helicis (CHNCH) is a painful pressure sore on the ear that occurs on actinically damaged skin. It is usually seen in middle-aged men, although rare cases have been reported in children who were paralysed and always slept on the same side.

Everyone with CHNCH is removed by making a small slit in the skin with a scalpel and using curved scissors or a scalpel to snip out the damaged cartilage. The wound is then closed with sutures or with a drop of cyanoacrylate glue.

This approach is associated with a cure rate of about 80%, but there is also a recurrence rate of 10%-30%, said Dr. Ely, a dermatologist in private practice in Grass Valley, Calif.

He has had longer-term results with 1-inch-thick foam pads that he buys at a local surplus store in 8-foot sheets for about $10 a sheet. He cuts the sheets into smaller pieces approximately the size of a standard pillow, and then cuts a hole where a patient’s ear will go. He instructs the patient to slip the foam between the pillowcase and the pillow, and to sleep with the ear resting in the pocket created by the foam.

If the CHNCH does not resolve within 1 month, Dr. Ely has the patient come in for surgical excision. So far, virtually none of his patients have returned for surgery.

“I’ve actually ruined my surgical practice for chondrodermatitis because this almost always works,” Dr. Ely said.

—Norra MacReady