Chicago — Fractional laser photothermolysis should be considered first-line therapy for cutaneous resurfacing because of the device’s efficacy in treating a wide range of skin types with minimal adverse events.

“Those with complications had significantly darker skin types, and this discrepancy was most evident when comparing the incidence of postinflammatory hyperpigmentation, which appeared an average of 11 days post treatment and lasted an average of 30 days, which was longer than any other complication,” Dr. Graber said.

In addition, 27% (259) of the 961 treatments were on patients with histories of herpes simplex virus (HSV). One-third of those patients responded to prophylaxis, and 6 developed an HSV outbreak despite prophylaxis. Of the remaining two-thirds who did not receive prophylaxis, eight developed an HSV outbreak, she said, adding that of the 702 treatments on patients without histories of HSV, 3 resulted in HSV outbreak.

Because the complication rate in darker-skinned patients was low, pretreatment of all Fraxel patients with hydroquinones or other lighteners is not recommended, said study coauthor Dr. Tina Alster, the institute’s director. “If you see a problem postoperatively, you can try to fade it out then, but in our study we were close to a thousand treatments, the number of complications was surprisingly small,” Dr. Alster said, noting that the treatment should be avoided in tanned skin.

Fraxel 1, now called the Fraxel 750, received Food and Drug Administration approval in November 2003, according to a company spokesperson. The second-generation Fraxel 2, which has an adjustable spot-size feature, was approved last year.

Fresh Scars Respond Well to Fractional Laser Treatment

BY BRUCE K. DIXON
Chicago Bureau

CHICAGO — Acne-prone patients were more likely to experience post-treatment acne in a study conducted by Dr. Graber and colleagues. Use of oral antibiotics (doxycycline 20 mg b.i.d.) during subsequent treatments prevented further outbreaks.

Treatment with fractional lasers has been shown to be effective for the treatment of photodamaged skin and fresh scars. However, there are limited studies evaluating effective for the treatment of photodamaged skin and during subsequent treatments prevented further outbreaks.

Most of those treated were women (91%) and most treatments were performed on the face (74%).

Dr. Rokhsar said that the treatment was safe and well tolerated, he noted. After 3 months, all treated scar portions were well correlated,” Dr. Rokhsar said.

The side effect rate did not differ with regard to gender, age, body location, or diagnosis, Dr. Graber said.

Laser Therapy Found Effective For Dermatosis Papulosa Nigra

BY DAMIAN McNAMARA
Miami Bureau

MIAMI — Laser treatment improved dermatosis papulosa nigra with efficacy comparable to standard electrodesiccation, according to rater assessments in a randomized, split-face pilot study of skin types IV-VI.

Once treatments were performed on the face (74%). Nearly one-fourth of patients were treated on both the face and other parts of the body. The majority of treatments (743) were for photodamage. The remaining treatments were for scars (175) and other diagnoses (43).

All study patients were telephoned by a nurse 1 day after treatment and all had follow-up visits at 1 month. Most patients were followed for at least 1 year after final treatment, Dr. Graber said.

Half of each scar was treated with electrodesiccation Fraxel 2, which has an adjustable spot-size feature, was approved last year.

Clinical and statistical differences were well correlated,” Dr. Rokhsar said.

The side effect rate did not differ with regard to gender, age, body location, or diagnosis, Dr. Graber said.

Those with complications had significantly darker skin types, and this discrepancy was most evident when comparing the incidence of postinflammatory hyperpigmentation, which appeared an average of 11 days post treatment and lasted an average of 30 days, which was longer than any other complication,” Dr. Graber said.

In addition, 27% (259) of the 961 treatments were on patients with histories of herpes simplex virus (HSV). One-third of those patients responded to prophylaxis, and 6 developed an HSV outbreak despite prophylaxis. Of the remaining two-thirds who did not receive prophylaxis, eight developed an HSV outbreak, she said, adding that of the 702 treatments on patients without histories of HSV, 3 resulted in HSV outbreak.

Because the complication rate in darker-skinned patients was low, pretreatment of all Fraxel patients with hydroquinones or other lighteners is not recommended, said study coauthor Dr. Tina Alster, the institute’s director. “If you see a problem postoperatively, you can try to fade it out then, but in our study we were close to a thousand treatments, the number of complications was surprisingly small,” Dr. Alster said, noting that the treatment should be avoided in tanned skin.

Fraxel 1, now called the Fraxel 750, received Food and Drug Administration approval in November 2003, according to a company spokesperson. The second-generation Fraxel 2, which has an adjustable spot-size feature, was approved last year.