

 #WCD2019

# AEDV

## HIGHLIGHTS

24<sup>th</sup> World Congress of Dermatology (WCD)

10-15  
JUNIO  
2019

*Milán*



Patrocina:

janssen  Immunology  
PHARMACEUTICAL COMPANIES OF 

Organiza:



# AEDV

## HIGHLIGHTS

24<sup>th</sup> World Congress of Dermatology (WCD)

10-15  
JUNIO  
2019

*Milán*



# Estética y láser

Dra. Paloma Borregón Nofuentes

Patrocina:



Organiza:



## Cosmetic Dermatology

- Cosmeceutical Update 2019 (Dra. Zoe Draelos)
  - Agua micelar
  - Healthy microbioma
    - Prebiotics
    - Probiotics
    - Postbiotics
  - Phone apps



**SPOTSCAN**  
ANÁLISIS PARA PIELS ACNEICAS  
DE LA ROCHE-POSAY

**LA PRIMERA APP  
QUE ANALIZA TU ACNÉ**

An advertisement for the SpotScan app. It features a woman's face with a smartphone overlaying her skin, displaying a grid of analysis points. The background is a solid blue color.

Milán



## Combined treatments

- There are no guidelines
- But there is no doubt that combining therapies multiplies the effect of the treatment
  - Lasers and EBD can be combined, even at the same visit
  - Laser + fillers/ BoNTA during the same session, same day is ok
  - EBDs + fillers/ BoNTA better not the same day



## Combined treatments

- Combined therapies
  - Possibilities In multiple sessions separeted within some days-weeks
  - Same day
- Therapeutical options
  - Laser
  - EBDs : RF, US...
  - Injectables: fillers, BoNTA...

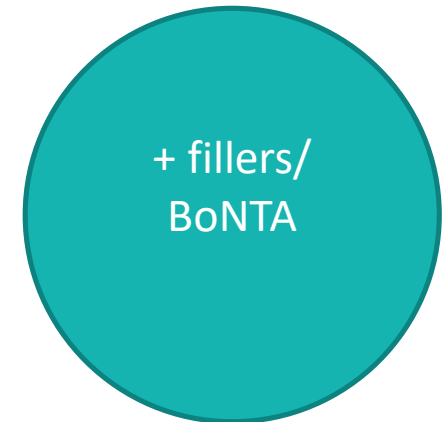
Different lasers, EBDs and different injectables can be used

- on different targets (haemoglobin, melanin, water)
- and at different depth (epithelium, superficial dermis, mid dermis, deep dermis, subQ and fibrous septa, muscle and muscular fascia)

## Combined treatments

"preferred same day procedures" (Dr. Matteo Tretti Clementoni)

- IPL + non-ablative fractional laser
- IPL + microneedling RF
- Microneedling RF + thulium laser



# Laser: scar management

- PDL

- Same global result compared to carbon dioxide laser
  - PDL better color
  - CDL better thickness
- Combined 1st PDL

- Keloids and hypertrophic scars

- PDL
- Carbon dioxide laser
- Fractional lasers
  - Ablative better results
- Nd:YAG (as good as PDL)
- IPL
  - Better than silicone gel sheets
  - As good as cryotherapy
- Combination laser treatment +/- triamcinolone acetonide injection

## Updated International Clinical Recommendations on Scar Management: Part 1—Evaluating the Evidence

MICHAEL H. GOLD, MD,<sup>\*</sup> BRIAN BERMAN, MD, PhD,<sup>†</sup> MATTEO TRETTE CLEMENTONI, MD,<sup>‡</sup> GERD G. GAUGLITZ, MD,<sup>§</sup> FOAD NAHAL, MD,<sup>¶</sup> AND CRYSTAL MURCIA, PhD<sup>¶</sup>

*Dermatol Surg* 2014;40:817–824

## Updated International Clinical Recommendations on Scar Management: Part 2—Algorithms for Scar Prevention and Treatment

MICHAEL H. GOLD, MD,<sup>\*</sup> MICHAEL MCGUIRE, MD,<sup>††</sup> THOMAS A. MUSTOE, MD,<sup>§</sup> ANDREA PUSIC, MD,<sup>§</sup> MUKTA SACHDEV, MD,<sup>§</sup> JILL WAIBEL, MD,<sup>§</sup> AND CRYSTAL MURCIA, PhD<sup>¶\*</sup>

*Dermatol Surg* 2014;40:825–831

## Combination Laser Treatment

Fractional Carbon Dioxide, Long Pulse Nd:YAG and Pulsed Dye Laser in the Management of Keloids

Andrea Nambudiri, C. Sharmista Sethi, and CR Sharma

*J Cutan Aesthet Surg*. 2017; 10(2): 76–80

Combination treatment of CO<sub>2</sub> fractional laser, pulsed dye laser, and triamcinolone acetonide injection for refractory keloid scars on the upper back

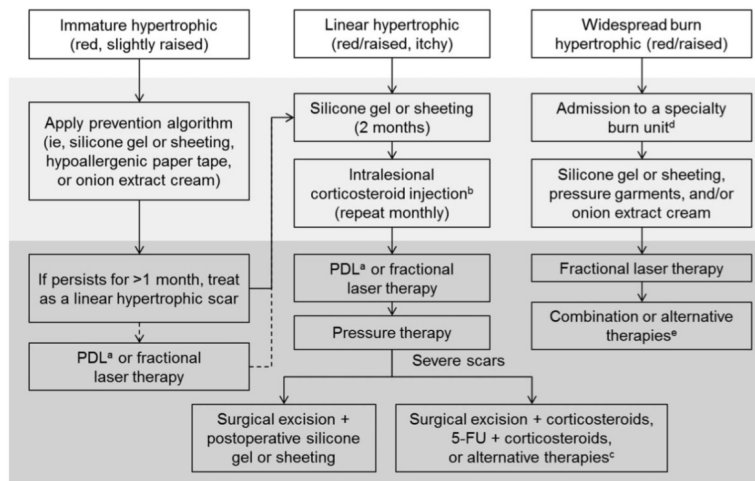
Morgan S. Martin & Sherry S. Collawn

*Journal of Cosmetic and Laser Therapy*, 15:3, 166-170

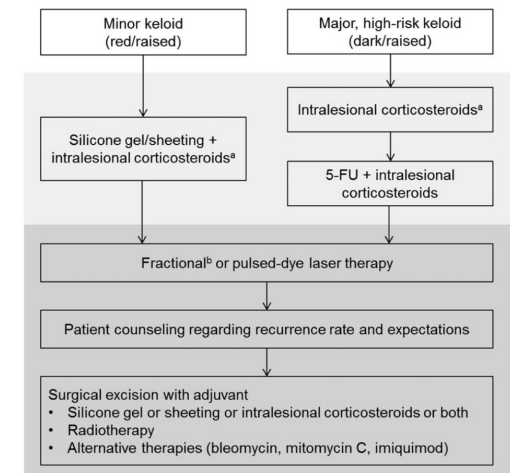


## Updated International Clinical Recommendations on Scar Management: Part 2—Algorithms for Scar Prevention and Treatment

MICHAEL H. GOLD, MD,\* MICHAEL MCGUIRE, MD,<sup>††</sup> THOMAS A. MUSTOE, MD,<sup>§</sup>  
 ANDREA PUSIC, MD,<sup>||</sup> MUKTA SACHDEV, MD,<sup>¶</sup> JILL WAIBEL, MD,<sup>#</sup>  
 AND CRYSTAL MURCIA, PhD\*<sup>\*\*</sup>



**Figure 2.** Management algorithm for hypertrophic scars. Light gray indicates initial management strategies; dark gray indicates secondary management options. PDL, pulsed-dye laser. <sup>a</sup>Preferred initial option. <sup>b</sup>2.5 to 20 mg/mL (face); 20 to 40 mg/mL (body). <sup>c</sup>Alternative therapy options for severe lesions include bleomycin, mitomycin C, laser therapy, and cryotherapy. <sup>d</sup>Scar prevention and treatment should not begin before epithelium and wound stabilization. <sup>e</sup>Combination and alternative therapies include massage, physical therapy, corticosteroids, tension-relieving surgical intervention, excision, grafting or flap coverage, hydrocolloid dressings, antihistamines, and laser therapy.



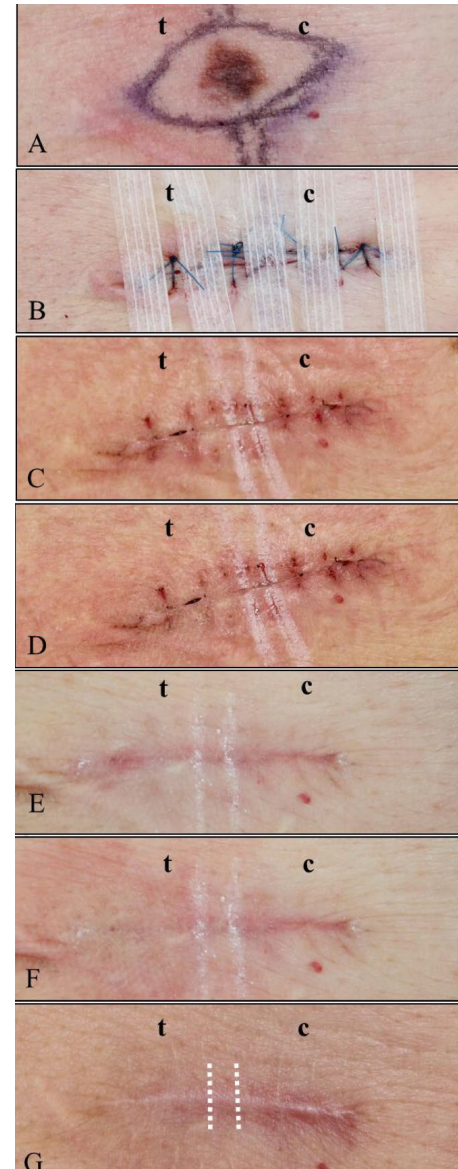
**Figure 3.** Management algorithm for keloids. Light gray indicates initial management strategies; dark gray indicates secondary management options. <sup>a</sup>Cryotherapy may be used in conjunction with intralesional corticosteroids, depending on physician experience and comfort with its application. <sup>b</sup>Ablative fractional lasers are the preferred initial laser therapy option for patients with minor keloids.





## Laser: scar management

- Prevention
- Early laser intervention to improve scar appearance
- Wound healing phases
  - Inflammation (1-3 days)
  - Proliferation (4-21 days)
  - Remodeling ( >21 days)



Plain Language Summary

### Laser treatments in early wound healing to improve scar formation

K.E. Karmisholt, C.A. Banzhaf, M. Glud, K. Yeung, U. Paasch, A. Nast, M. Haedersdal

First published: 03 December 2018 | <https://doi.org/10.1111/bjd.17286>

This summary relates to <https://doi.org/10.1111/bjd.17076>  
*British Journal of Dermatology*, **179**, 1307–1314, December 2018

