ABSTRACT BOOK
ABSTRACTS

24TH WORLD CONGRESS
OF DERMATOLOGY
MILAN 2019

A new ERA for global Dermatology
10 – 15 JUNE 2019
MILAN, ITALY

DERMATOLOGICAL SURGERY

EFFICACY AND SAFETY OF A NOVEL METHOD OF INSULATED INTRALESIONAL RADIOFREQUENCY ABLATION FOR DEEP DERMAL AND SUBCUTANEOUS LESIONS: A 3-YEAR INSTITUTIONAL EXPERIENCE

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Background: Although insulated intralesional radiofrequency ablation (IL-RFA) is being increasingly used in other specialties, not much information on its safety and efficacy in dermatology is available. Therefore this review of patients describes our experience with insulated IL-RFA for various dermatological conditions.

Materials and methods: This is a retrospective review of the patients who underwent IL-RFA in the past 3 years. Our technique involved creating a small window in the proximal end of plastic sheath of an intravenous cannula using a surgical blade, and then touching the RF probe to the cannula through the window to deliver the electric current. Information regarding diagnosis, number of sessions, adverse effects, and follow-up was recorded. Clinical improvement was assessed on a visual analog scale by the patient and 2 independent observers.

Results : Data on 19 patients with lymphangioma circumscriptum (n = 9), venous or capillary-venous malformation (n = 4), angiolymphoid hyperplasia with eosinophilia (n = 3), arteriovenous malformation, hidradenitis suppurativa, and hypertrophic scar (n = 1 each) was available. The mean number of IL-RFA sessions was 2.26 , 1.61. The mean patient and physician global assessment scores were 7.6 , 2.22 and 7.3 , 2.42, respectively. Adverse effects were seen in 9 (47.4%) patients. All patients, except 1, had sustained improvement in the mean follow-up period of 11.4 , 11.6 months.

Conclusion: Insulated IL-RFA seems to be safe and effective in selectively targeting deep-seated cutaneous lesions.

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