



DERMATOLOGICAL SURGERY

SAFETY OF PROCEDURES IN PATIENTS ON AESTHETIC DERMATOLOGY

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BACKGROUND: Currently, the standard protocol regarding the performance of procedures in patients receiving or recently received isotretinoin (13-cis-retinoic acid) states that the procedures should not be performed. The recommendations in standard books and drug insert require discontinuation of isotretinoin for 6 months before performing cosmetic procedures, including waxing, dermabrasion, chemical peels, laser procedures, or incisional and excisional cold-steel surgery. This recommendation has been followed for over two decades despite little evidence for the stated increased risk of scarring.

OBJECTIVE: The presentation reviews the evidence and recommend consensus guidelines in the light of recent evidence, regarding the safety of skin procedures, including resurfacing, energy device treatments, and dermatosurgical procedures, in patients with concurrent or recent isotretinoin administration.

MATERIALS AND METHODS: Data were extracted from the literature through a pubmed search using key words isotretinoin, safety, scarring, keloids, hypertrophic scarring, pigmentation. The evidence was then labelled

RESULTS: Performing procedures such as laser hair removal, fractional lasers for ageing and acne scarring, lasers for pigmented skin lesions, fractional radiofrequency microneedling, superficial and medium depth peels, microdermabrasion, dermaroller, biopsies, radiofrequency ablation, superficial excisions is safe in patients with concurrent or recent isotretinoin administration. There is insufficient evidence to support the current protocol for avoiding and delaying these treatments in the patient group under consideration and recommends that the current practice be discontinued.

