



LASERS

LASER TREATMENT OF RHINOPHYMA

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Introduction: Rhinophyma is the end stage of acne rosacea, which results in a large nose due to a proliferation of sebaceous glands and fibrous tissue. The primary reason for excision of rhinophyma is cosmetic deformity. Treatment of rhinophyma is challenging; a wide range of surgical approaches has been described such as dermoabrasion, scalpel shave, cryosurgery, electrocautery, near total excision with skin grafting, and laser excision. Management of rhinophyma has been totally renewed by lasertherapy.

Objective: We report our technique using ablative CO2 laser in combination with Dye laser 595 nm for treatment of rhinophyma. Ablative CO2 laser was used to vaporize hypertrophic tissue and Dye laser 595 nm was applied to minimized vascular component of rhinophyma.

Materials and Methods: Twenty-four patients who presented with rhinophyma of early and moderate degrees were treated with a 3 series of ablative CO2 laser treatments (UltraPulse CO2 : Deep FX, Energy: 30~50 mJ, Frequency: 300 Hz, Density 5%, Scan Shape, and Spot Size were decided by shape and area) ; subsequently we treated patients with Dye laser 595 nm at a fluence of 7-15J/cm2 and pulse widths of 1.5-3 ms, 7 mm spot size. All subjects received HSV prophylaxis. Patients were rendered anesthetic with lidocaine.

Results: All of the patients tolerated the procedure well with reepithelialization at days 4-7 and self-limited edema and erythema. Patients with relatively early to moderate signs of rhinophyma proved optimal candidates for this treatment. There were no adverse events. Patients and physicians noted significant improvement and reduction in the rhinophyma without the typical scarring noted with most other treatments.

Conclusion: Rhinophyma treated with a combination of ablative CO2 laser and DYE laser 595 nm achieved good cosmetic outcomes in this group of early to moderate cases of rhinophyma.

