ABSTRACT BOOK ABSTRACTS



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WOUND HEALING

## RANDOMIZED, SINGLE-BLINDED, CROSS-OVER STUDY OF A NOVEL WOUND DRESSING VERSUS CURRENT CLINICAL PRACTICE AFTER PERCUTANEOUS COLLAGEN INDUCTION THERAPY

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Introduction: Skin rejuvenation procedures have become common with sophisticated technologies with reduced downtime and related risks1. Recently, microneedling has been paired with radiofrequency to create Fractional Radiofrequency Microneedling (FRFM) to induce neocollagenesis. Frequently, topical products are applied immediately after the needling. This procedure is known as percutaneous collagen induction therapy (PCIT)2. Postoperative topical wound care is critical for prompt rapid and safe healing, with moist wound healing deemed of primary importance for fast and correct scarring process3. An ideal dressing enables a moist environment, reduces post-procedural inflammatory response in the first stages of wound healing.

Objective: To evaluate whether an innovative silicone-based wound dressing is superior than standard of care therapy in decreasing severity and duration of treatment-site acute inflammatory reactions post PCIT.

Materials and Methods: Endymed PRO Intensif Handpiece (Endymed, Israel) was used for the full-face FRFM procedure. Subjects (n=20) applied treatment (Stratacel® – Stratpharma SG, Switzerland) and control (Aquaphor® - Beiersdorf Inc, USA) immediately after the procedure and daily; they were evaluated immediately post-procedure (baseline assessment), at 2, 3 and 7 days post-procedure. Digital and 3D pictures (Antera 3D Camera for Skin Analysis - Miravex, Ireland) were taken at each assessment.

Results: All patients healed properly without reporting adverse reactions to any of the studied products. Erythema at each study visit was significantly reduced with the use of the novel wound dressing (p<0.001). A statistically significant difference in favor of the innovative wound dressing also emerged with respect to the patient-rated product properties (p=0.008), such as feel on skin, drying time and stickiness.

Conclusions: The novel wound dressing reduced signs of acute inflammation following PCIT











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when compared to standard of care, without reporting adverse events and resulting in a more favorable outcome from a patient perspective.



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