Combination Therapy of Subcision and Dermal Filler with Hyaluronic Acid

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Abstract

Background: Subcision is e f cacious treatment method for acne scaring. This treatment entail to insert a small/ little needle into you skin to treat acne scars. This allows your skin to diminish the acne scar appearance and give rise to depressed area. Aim: To improve the efciency of subcision, a new supportive treatment of continuous repeated sessions of hyaluronic acid HA was added to subcise the post acne scars.

Methodology: This is a randomized clinical trial study conducted on different groups of patients in different dermatologic clinics.

Result: subcision with dermal fllers show more efective result than single subcision therapy.

Conclusion: Use of combination subcision therapy in treatment of post acne scars was accompanied with appropriate results.

K Subcision, H aluronic acid HA, Post acne scars, subcision lling, Subcision with dermal llers.

e cosmetic dis gurement of face is post acne and is the most common problem. e dis gurement is associated with man_problems for people such as social embarrassment and ps_chological disorders. Social isolation and self-consciousness is the most common [1].

Acne vulgaris is the composite disease of pilosebaceous unit. e people of all age can be a ected b, it. Surger, burns, vaccination and skin disease such as acne and varicella induce facial scaring. Local cellular and hormonal responses are the main cause for color, sike and shape of acne scars. Facial scaring arises from deep in ammator reaction. Acne scaring treatment depends on the t_pe of scars. ere are three basic t pes of scars. ese are rolling scars, ice-picks scars and bo er scars. [2] e skin appears way and uneven and have var ing depth in rolling scars while the Bo er scars have bo Like depression and broad and it may be caused by virus, chickenpo, varicella and Acne. And the most common t pe of scar is ice-picks scars, common on cheek's and occur a fier the consequences of healing of acne.[3] Among adolescent, the prevalence of acne is 90% .75% of patients a ect with facial scarring.[4]

Numerous curative methods have been evolved to set out acne scaring. Which include chemical peeling, punch techniques, dermabrasion, laser resurfacing dermal llers and most recentl used subcision. [2] In order to treat acne scars subcision is e ective treatment method. is treatment entail to insert a small needle into ou skin to treat acne scars. is allows our skin to diminish the acne scar appearance and give rise to depressed area. [5]

In 1957, Spangler reported that Bowmen's iris needle is used to slit brous strand underneath enormousl, depressed facial scars. In 1995, the name subcision and subcutaneous incision less surger, was given b David Orentreich and Nor Man Orentreich. [6]

When the brous bands are break, the snapping sound with the Creative Commons Attribution License, which permits unrestricted with the control of the Creative Commons Attribution License, which permits unrestricted use. distribution, and reproduction in any medium, provided the original author and heard. A small bruise formation, this actuall, assisting with the tissue are credited. remodeling. Pressure and ice application can be given to maintain homeostasis. Swelling and Bruising ma be e pected which ma be

last up to two weeks. One should must also think a treatment course preferabl than a single therap. Darker skinned patient should be more attentive with regard to sun e posure because of higher risk of post in ammator h perpigmentation. Disordering of sebaceous follicle structure may an outcome in acneiform c stic lesions or subcutaneous sinus tract-this may be treated with antibiotics and very low dose of intralegional triam lineary includes in a collicion of the treatment. intralesional triamcinolone injection. e onl conditions to treatment are active infection and bleeding tendenc $_{\downarrow}$.

Earl result e amination in f patients with rolling scars was restore. Following in Itration with a result a solution of 1% lidocaine with 1:100,000 epinephrine.

In a standard method, An 18-G nokor needle was used to subcise. Investigator rating an average 50-60% improvement in treatment site within 1 to 6 months in post-procedure. ere is no complication are

In another series, 24G needle is used to subcise followed b_ 15 patients in 3 three sessions. 40 to 60% improvements were seen in between 2 months and 6 months. Persistent hematomas were developed in two patients. [7]

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treatment option for acne scars and can be used with h aluronic acid HA reduces the total number of sitting. [2]

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A stud was carried out in which there were fort patients involving both men and women with acne scars. All the patients were e pose to subcision for at least one month in three sessions. At the last of the session the patients were classified into two groups. First group with the patient receiving subcision in combination with high aluronic acid on one side of face leaving other side that undergo subcision. During the procedure there was clinical assessment. Skin biopsies and photographs were taken for 6 months in order to check the improvement.

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94.1% and 82.4% sign cant improvement in subcision with h aluronic acid HA as llers were seen in rst group of patients while there is 67.3% of improvement were seen in subcision alone procedure, respectivel .

At the end the results were amaking in patients having subcision combined with h aluronic acid as compared to the group of patients having subcision alone. [8]

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H aluronic acid is a stick /gooe and oil substance. H aluronic acid present throughout the bod particularl in joints, e es and skin. HA makes our skin e ible, also help the skin to straighten and e and reduces ne lines and skin wrinkles. HA also prove to be faster wound healer and reduce scaring. [9] When performed accuratel, subcision show slow result a permanent and significantly remember of post acne scars. Subcision mage be advised to repeat the procedure. Skin heals very slowly a per subcision procedure and scars continue to form a per one ear. Due to tathers and atroph (loss of fat, volume and collagen). Scars are depressed. In these cases, subcision mage to get together lers under every scars. [10]

e materials used for subcision is Nokor needle or structured / regular needle (can be used some needle size depend the e perience and quality of scar). e procedure could be replicate in some session depend on the deepness and development of scar and can be connect with some other scar treatment such as dermal llers with h aluronic acid HA.

H pe s ringes and scalpels are the instruments that used in subcision we needle is placed about the scar at an acute angle close to the scar and use in back and forth manner underneath the site of scar to slack the brotic adhesion that enervated the scar. A break sound is heard as brous bands are broken. e swelling and hemorrhage produce a potential space for more collagen overthrow. [10]

Journal of cosmetic dermatolog, was published in March 2022 on subcision plus three step HA injection for acne scars and this

treatment is found to be ver_e ective and safe. is treatment included the subcision and h aluronic acid HA injections. 82 patients were divided in two groups. Group 1 treats with subcision Saline injection while another group receive three step h aluronic acid HA with subcision. $e^{\frac{1}{1}}$ rst step in combination of subcision with h aluronic acid HA using 18G nokor needle to release $^{\frac{1}{1}}$ brous band beneath the subcutaneous tissue.2nd step is used in combination therap , h aluronic acid HA 0.1 ml using 29G needle. In third step, used 25G cannula to $^{\frac{1}{1}}$ ll the subcised space with h aluronic acid HA 0.1ml.

Clinical improvement was in both groups. ere were seen ver satisf ing sign cantl improvement in three step h aluronic acid HA combine with subcision. [11]

Data obtained from the stud published in the journal of cosmetic dermatolog, suggests that subcision combined with h aluronic acid is better to reduce acne scars. Patients involved in this stud, were presented to a universit, clinic in Eg. pt from 2019 to 2020. Patients were given 3 sessions for 4 weeks on both sides of face. Clinical improvements were evaluated for 2 months. ere were Total 30 patients out of which 12 were men and 18 were women.

In conclusion Clinical improvement was greater with the addition of HA † llers. Patient satisfaction was higher with the combined treatment. [12]

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