

Scar Revision

There are various modalities to use for scar revision, most commonly **Fraxel (Fractionated Co2 Laser)**, **Dermabrasion** and **Sciton's TRL (Tunable Resurfacing Laser – Erbium Yag)**. Through thorough assessment and consultation, your clinician chooses the best treatment for each individual's scarring. Each modality comes with their own set of risks, downtime, and results. Patient response can vary after a Laser Resurfacing treatment. The depth of the treatment is customized according to each unique skin condition, desired outcome, and expectation of downtime. The degree of redness and length of healing time will increase with the depth of the peel. Laser treatments may not completely improve or prevent future conditions or aging. There are many variables which influence the long-term result. Additional procedures may be necessary to further enhance results or treat unforeseen complications. There is no guarantee on the results that may be obtained.

- Redness, mild burning or sensitivity, and edema (swelling) is expected post procedure. Skin redness is dependent upon the depth and settings of the treatment, but usually lasts 1-2 weeks (sometimes up to 2-3 months).
- Oozing or seeping of serous fluid (light pink or clear) may occur with moderate-deep depth treatments. This is part of the healing process and can last for 24-72 hours depending on the depth.
- Peeling and flaking generally occur 24 hours post treatment and should be allowed to come off naturally. **DO NOT PICK, RUB, OR FORCE OFF ANY SKIN DURING THE HEALING PROCESS. THIS COULD RESULT IN SCARRING AND INFECTION!** Gently washing the skin more frequently will help to promote the peeling process.
- There is a possibility of rare side effects such as burns, scarring, delayed healing times and permanent discoloration. Hyperpigmentation and hypopigmentation usually resolve within 2-6 months. Safe precautions with sun exposure are recommended. Herpes simplex virus infections can occur, with or without a known history of cold sores. Should any kind of infection occur, please contact your clinician immediately.
- There may be some degree of swelling and oozing immediately post treatment; however, contact the office immediately if you have excessive swelling or signs of infection (green or yellow drainage, increase warmth at/around treated area, or fever greater than 100.4).

Tips & Tricks

- Post treatment discomfort may be relieved by oral pain relievers (Tylenol or Ibuprofen). A cold compress can be used to provide comfort and decrease swelling, typically only needed within the first 12-24 hours after the treatment. To avoid further swelling, you may choose to sleep with an elevated pillow on your back.
- Itching or irritation may be relieved by oral antihistamines (Zyrtec, Allegra, Pepcid, or Benadryl). Do not scratch the area as scarring and pigmentation complications can occur.
- The treated area should be cared for delicately. Until sensitivity has subsided (about 2-3 weeks), avoid the following:
 - Heavily scented lotions/soaps, exfoliant creams (Retin-A, Glycolic, alpha-hydroxy acids), acne creams
 - Loofa sponges, shaving, and aggressive scrubbing
 - Swimming pools and spas with multiple chemicals/chlorine
 - Strenuous exercise and sweating until after the skin has healed
 - Exposure to the sun or tanning in the treatment areas

Site Care:

- Apply Aquaphor/Vaseline to the site morning, night, and before showering.
- Cleanse the area twice daily with lukewarm water or a very gentle cleanser. Gently pat dry with a soft towel.
- Do not scrub or submerge the treated area. Before showering, apply Vaseline to the site. The area may be spritzed but not soaked while showering. Avoid getting shampoo directly on the treated area or directly hitting your face with the full force stream of the water.
- Once the site has completely healed (usually 7-10 days), apply sunscreen to the treated area daily. Avoid direct sunlight during the healing phase.

If you have any questions or experience possible signs of infection or extreme discomfort, please contact:

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