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A New Concept in Scar Management

By Douglas McGeorge

lastic surgery is, perhaps, the ultimate expression of art and science, which, in the hands of technically gifted individuals, can produce results that have a profoundly positive impact on the appearance and psyche of individuals.

It is a specialty where much of the surgery is by choice, rather than need, but it is a specialty at the cutting edge of science, where surgeons are striving to improve techniques and results. For the patient, however, the perception of treatments and results is different. They want to enhance their appearance, but they want to minimise scars. For them, the difference between a good result and a poor result can be down to the quality of scars produced; something often outside the influence of even the most gifted of surgeons.

Wound healing after any form of dermal injury inevitably leads to scar formation as the skin re-establishes its integrity. It is an imperfect process; an evolutionary compromise, made to restore tissue integrity quickly,

preventing infection at the expense of appearance. Healed scars have different characteristics to normal skin; varying from fine line asymptomatic scars to problematic raised dermal scars, including hypertrophic and keloid scars. Scars appear as a different colour to the surrounding skin and can be flat, stretched, depressed or raised. Scars of all types manifest a range of symptoms, including inflammation, erythema, dryness and itching. Some result in significant psychosocial impact on patients and their quality of life.

Since the quality of scarring is so important, it seems strange that there are so few scientifically proven treatments available to improve their appearance. Many over the counter treatments are available but there is limited clinical evidence to support the efficacy of most of them. Once a wound is closed, the body naturally enters into an inflammatory phase. The skin can become dry, itchy and uncomfortable. Whilst these current treatments may offer temporary relief from this phase, they tend

to be inert formulations that sit on the upper layer of the skin, acting as a barrier. Often, they contain no active ingredients and instead work by trapping moisture.

To alter wound healing, any topical treatment requires active ingredients that are absorbed through the skin and which can modify the healing process at a cellular level.

Over the last four years, I have been involved, with one of the leading scientists on wound healing at the University of Manchester, in researching active treatments for scars. The culmination of that research is an understanding of a number of compounds that alter the bodies response to scarring. In particular there are a number of naturally active green tea extracts. These have been combined with other naturally active ingredients, (anti-oxidants and anti-inflammatories, such as magnolia bark, as well as free radical fighting vitamin E) to produce a new way of treating scars, "Solution for Scars™". This is the first commercially available topiDouglas McGeorge

Plastic, reconstructive and cosmetic surgery.

cal treatment' designed to cross the skin barrier and modify the inflammatory response that leads to abnormal scarring. The skin is allowed to heal without interruption from constant itching and inflammation, resulting in a smoother, less visible scar.

Solution for Scars[™] is used for all wounds ranging from post-surgery to common day-to-day accidental cuts. It is applied as soon as the wound is closed and is absorbed through the skin, enhancing the skin's cellular function, in both the upper and deeper dermis, acting on keratinocytes as well as fibroblasts, the cells that play an important role in tissue repair. Importantly, it alters mast cells, the cells that are responsible for releasing histamine, responsible for many of the symptoms of inflammation. This promotion of early intervention has been proven to change the course of the healing process, an exciting new concept that has not been contemplated previously.

The research has broken the mould

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