

Skin Health



FROM THE KIMBERLY AND ERIC J. WALDMAN DEPARTMENT OF DERMATOLOGY

SPRING/SUMMER 2018

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Cosmetic Procedures With Zero Downtime

By **Cerrene Giordano, MD**, Instructor of Dermatology and Mohs Surgeon,
Mount Sinai Doctors Faculty Practice

Aging is a normal and inevitable process of life, but wouldn't it be nice to slow the clock? Cosmetic procedures are gaining popularity across the world, with the continual development of injectable treatments and medical devices, but our patients often have concerns about the amount of time it takes to recover. Two examples of popular procedures with minimal to no downtime are botulinum toxin injections and soft tissue augmentation.

Botulinum toxin (BOTOX® Cosmetic, Dysport®, and Xeomin®) is a purified product derived from a strain of bacteria called *Clostridium botulinum*. It is injected in small, targeted doses to relax the facial muscles that contribute to wrinkle formation.



CERRENE GIORDANO, MD

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Tick Tactics

By **David S. Orentreich, MD**, Assistant Clinical Professor of Dermatology and Voluntary Attending



Ticks can transmit serious infectious diseases. In the northeastern United States, the pathogens carried by ticks are responsible for Lyme disease (rash, arthritis, and neurological symptoms), anaplasmosis and erlichiosis (severe flu-like disease), babesiosis (flu-like symptoms and anemia), Powassan disease (inflammation of the brain), and tularemia (skin ulcers and swollen lymph nodes). Here are the tactics I recommend to avoid and manage tick bites.

◀ Lyme disease is carried by black-legged ticks, shown here in their growth stages (left to right): larva, nymph, male adult, and female adult. Photo courtesy of the California Department of Public Health

1 Know the tick habitat

Ticks are most active during the spring, summer, and fall, but they can also survive during the winter when the temperature is above freezing. The ideal tick habitats are high brush, tall grasses, densely wooded areas, and thick leaf litter. Keep your lawn trimmed short and free of dead leaves. When hiking, always try to walk in the center of trails.

2 Wear protective garments

Your clothing should cover as much of your skin as possible. Wear long sleeves, ankle-length pants, tall socks, and a hat to prevent ticks from attaching to your skin and scalp. Tuck your pants into your socks if possible. Light-colored clothing is recommended for spotting ticks, which are dark brown or black.

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Sun Protection in a Pill?

An Interview with Norman Goldstein, MD
Clinical Professor of Dermatology
Mount Sinai Doctors Faculty Practice

By Brian J. Abittan, MD
Dermatopharmacology Fellow



DR. ABITTAN: What is oral dietary supplementation for sun protection?

DR. GOLDSTEIN: This is a capsule marketed by the name Heliocare®, which is taken by mouth once daily to help protect against ultraviolet (UV) radiation. The active ingredient is a plant extract from a tropical fern called *Polypodium leucotomos* found in Central America and South America.

DR. ABITTAN: Who should take the supplement — is it for everyone?

DR. GOLDSTEIN: I recommend it for almost everyone — children, adults, and senior citizens — but not for pregnant and nursing women. I have taken one capsule a day for 12 years and wrote about it in the *International Journal of Dermatology* in 2014.

DR. ABITTAN: Is the supplement safe?

DR. GOLDSTEIN: Yes, it has been available for more than 25 years and is approved as a dietary supplement in 20 countries including the United States. It is vegan friendly, gluten free, and has no artificial dyes.

DR. ABITTAN: If I take the supplement, do I still need to apply sunscreen?

DR. GOLDSTEIN: The answer is yes — the pill is an adjunct to daily sunscreen use, not a substitute.



NORMAN GOLDSTEIN, MD

DR. ABITTAN: Does the supplement really work?

DR. GOLDSTEIN: There is good scientific evidence for its effectiveness, including a clinical study by researchers at Henry Ford Hospital that was presented at the World Congress of Dermatology in 2015 and published in the *Journal of the American Academy of Dermatology* in March 2017.

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Our nameplate shows a normal skin surface under the microscope. Photo courtesy of Mark R. Wick, MD

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- Acne in women
- Actinic keratoses
- Alopecia areata
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- Inherited ichthyosis
- Pemphigus vulgaris
- Psoriasis (all forms)
- Vitiligo (loss of pigment)

For More Information

Please contact us at **212-241-3288**.

Cosmetic Procedures with Zero Downtime *continued from page 1*

The most commonly treated areas are the forehead, glabella (frown region), and lateral canthal lines (crow's feet). Injections are fast and relatively painless after pretreatment with cream anesthesia. A small amount of swelling, redness, or bruising may occur. Botulinum toxin starts taking effect after one to five days and typically lasts about three or four months.

Soft tissue augmentation is the term we use for volume restoration by injecting filler substances. The procedure can enhance facial contours, fill hollows, reduce shadows, create symmetry, and improve deep wrinkles. There are many brand names and formulations of injectable fillers. The most popular ones consist of hyaluronic acid, calcium hydroxylapatite, or poly-L-lactic acid. Your dermatologist will usually recommend a specific product based on the depth and anatomy of the area being treated. The most common treatment areas are the temples, cheeks, nasolabial folds (smile creases), jawline, marionette lines (lower facial lines), and lips. Most fillers take effect immediately, with the exception of poly-L-lactic acid, which can take months and a series of injections. Although downtime after filler injections is minimal, there can be mild swelling and bruising for a few days.

A consultation with your Mount Sinai dermatologist will provide more information about the procedures that would best suit your specific needs.



A patient's lateral canthal lines (crow's feet) show improvement one week after botulinum toxin injections. Photos courtesy of Allergan plc

Tick Tactics *continued from page 1*

3 Use insect repellents

Skin protection is achieved by applying picaridin (Sawyer[®] Insect Repellent Lotion) to exposed areas. Picaridin is safer and more effective than DEET. Treat all of your clothing, from your hat to your shoes, as well as backpacks, tents, and sleeping bags, with permethrin spray (Repel[®] or Sawyer[®] Clothing and Gear). Items so treated will remain effective through five or six washes. Alternatively, commercially available garments pretreated with permethrin remain effective through about 70 washings.

4 Always examine for ticks

Check yourself, your children, and your pets immediately after every outdoor excursion. Conduct a full-body tick check using a hand-held or full-length mirror. Remember to check your children in all their skin creases, around their waists, in and around their ears, and especially beneath their hair. Remember that ticks can ride into your home on clothing, gear, and pets, and examine these carefully. Bathe or shower as soon as possible after coming indoors. Wash your clothing in hot water if needed. Clothing that is dry

can be placed in a hot dryer for 10 minutes to kill ticks, but more time is needed for damp clothing.

5 Remove ticks quickly

If you find a tick attached to your skin, grasp it with fine-tipped tweezers as close to the skin as possible. Pull off the tick with steady, even pressure. Tweezers work better than any of the marketed tick removers. After removing the tick, thoroughly clean the bite area and your hands with rubbing alcohol, an iodine scrub, or soap and water.

6 Be cautious but don't panic

Not all ticks carry disease, and not all tick bites result in infections. A tick that is removed from clothing or found crawling on your skin before attaching is unlikely to cause a problem. If a tick has attached and is removed quickly, you will usually be safe. In case you cannot fully remove a tick, or if you have a fever, headache, joint pain, or a skin rash after a tick bite, please see your doctor right away. An excellent source of more information can be found at www.cdc.gov/ticks/index.html.

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Skin Health
SPRING/SUMMER 2018



Leading the Field to Repair Sun Damage

By **Mohammad-Ali Yazdani, MD**
 Dermatology Resident, Icahn School of Medicine at Mount Sinai



A patient with numerous actinic keratoses is a good candidate for field treatment with topical medication.

A common skin problem in fair-skinned adults with a long history of sun exposure is the development of actinic keratoses (AKs). These are rough pink spots on the face, arms, and other unprotected areas. If left untreated, AKs may eventually turn into skin cancer. Office treatments like cryotherapy (freezing) or curettage (scraping) are effective when only a few AKs are present, but the preferred method for patients with many AKs is field treatment, meaning clearance of a large area with a topical product.

Investigators in our department conducted some of the initial landmark studies that led to field treatment of AKs with imiquimod cream (Aldara®) and ingenol mebutate gel (Picato®). These work by triggering the immune system to target precancerous cells. The Dermatology Clinical Research Program at Mount Sinai is now studying a topical tyrosine kinase inhibitor that we hope will be an effective and easily tolerated new form of field treatment for AKs. We will soon be enrolling patients in two clinical trials of promising new treatments. *(Please see page 2 for more information.)*

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