



Excerpt from:

Essential Pearls for the Practicing Dermatologist

Sima Jain MD FAAD

ClearSkin Dermatology
Orlando, FL

inject base of wart until blanching or diffuse infiltration

- May need repeat q2 -4 weeks

- Reference: Yazdanfar A, Farshchian M, Fereydoonnejad M, Farshchian M. Treatment of common warts with an intralesional mixture of 5-fluorouracil, lidocaine, and epinephrine: a prospective placebo-controlled, double-blind randomized trial. *Dermatol Surg.* 2008 May;34(5):656
- Reference: Sepaskhah M, Sarani MB, Bagheri Z. Comparison of the efficacy of intralesional 5-fluorouracil/lidocaine/epinephrine injection with cryotherapy to treat common and palmoplantar warts: A randomized, controlled trial. *Dermatol Ther.* 2022 Sep;35(9).



Overview

10 Pearls

- Intralesional 5-fluorouracil** as an adjunct treatment for warts
- Intralesional 5-fluorouracil mixed with Kenalog** as a more efficient treatment option for hypertrophic scars
- Intralesional 5-fluorouracil** as nonsurgical option for SCCs in older patients who are not great candidates for excision
- Intralesional **saline** for atrophy (bacteriostatic sodium chloride)
- Hy-Bio** (OTC supplement) for pigmented purpuric dermatosis
- Woods lamp flashlight** from Amazon (much cheaper and more portable than the regular Woods lamp)
- Gloves in a Bottle Shielding Lotion** to create an invisible shield for patients with hand eczema or contact dermatitis
- Mesoram needles** (3 needle injector) to save time when treating a large area (intralesional platelet-rich plasma, kenalog or lidocaine for numbingcccc)
- Use **pipette** instead of wooden-tipped applicator when treating **multiple molluscum lesions**

Intralesional Saline

- Intralesional bacteriostatic sodium chloride for **atrophy**
- Inject into different planes with the intent to **overfill**
 - Plane of injection depends on where atrophy is
 - If involving all layers, inject subcutaneous, dermal and superficial plane until peau d'orange appearance **every 2 weeks**
- Helpful for many types of atrophy
 - Corticosteroid-induced atrophy**
 - Can also help with **atrophic acne scarring**
 - Can help with even old scars



Disclosure Statement

- I do not have any relevant relationships with industry

IL 5-FLUOROURACIL (5-FU): Keloids

- SCCs
 - Combination of **1% lidocaine with epinephrine** and **IL 5FU**
 - 1: 4-5 ratio**
 - 1 part 1% lido with epi and 5 (or 4) parts 5FU
 - Approximately 0.1-0.5cc (depending on size) and may need to repeat
 - Nonsurgical option for select older patients who are not good candidates for surgical removal



- <https://doi.org/10.1016/j.jaad.2020.12.049>
- Danda EE, Lim GFS, Lim SIM, Kim C, Pugliese-Mauri M. Intralesional 5-Fluorouracil for the Nonsurgical Management of Low-Risk, Invasive Squamous Cell Carcinoma. *Dermatol Surg.* 2020 Jan;46(1):126-130. doi: 10.1097/DSS.0000000000001740. PMID: 3060299

IL 5-FLUOROURACIL (5-FU): Keloids

- Have patients fill out a **hair loss questionnaire** BEFORE you see them to increase efficiency of the visit (my questionnaire attached)
- Intralesional (IL) 5FU – comes in 50ml bottle of **50mg/ml**

- Helpful in **keloids, hypertrophic scars, warts and SCCs** (latter only in the right type of patient)

- Mechanism of action
 - Keloid/hypertrophic scar:** 5FU inhibits growth of new blood vessels, halts rapidly proliferating fibroblasts, promotes scar degradation
 - Warts:** inhibits new blood vessels, increases immune system's ability to attack foreign material (i.e. HPV)
 - SCC:** Inhibits synthesis of thymidine via binding of major anabolic enzyme (thymidylate synthetase) → disruption in DNA synthesis



- Side effects: pain, burning, ulceration and hyperpigmentation

Pigmented Purpuric Dermatitis (PPD)

- Treatment for PPD:
 - Compression socks
 - Vitamin C 500mg bid**
 - Rutoside (rutin) 50mg bid**
- If patients want to take ONE supplement (instead of two different ones): **HY-BIO by Solgar**
 - Correct dose in 1 tablet, take bid
 - Amazon, \$30** dollars for 250 pills (which is a **4 month supply** if taking 1 pill bid)

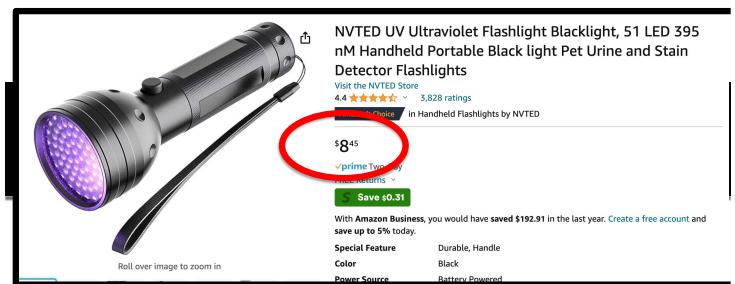


Wood's Lamp – Handheld Flashlight

- Instead of using a cumbersome Wood's lamp, get a **\$10 Amazon 395nm flashlight**
 - Keep one in each room
 - Battery-operated
 - Very portable

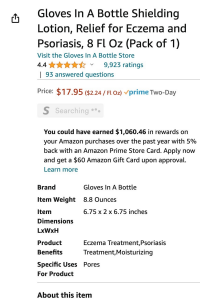


UV light – Much Cheaper!



Gloves in a Bottle (Shielding Lotion)

- Very helpful for patients with hand eczema
- Lasts for ~6 hours, so bid application works great



MESORAM needles

- Save time** as using 3 needles instead of 1
 - Three 30 gauge needles, 4mm length
- Can use for many procedures, including:
 - IL Kenalog (scarring alopecia or alopecia areata if large area involved)
 - IL platelet-rich plasma
 - Local anesthesia for large areas (i.e. procedures like Profound radiofrequency microneedling)

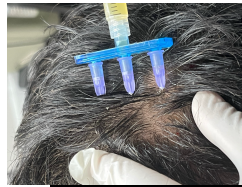


MESORAM needles

- Inject at a 30 degree angle (depending on the type of procedure)
- Pros
 - Saves time
 - Even distribution as already 3 equidistant needles
- Downside:



- Order for Germany and can several



Molluscum - Pipette

- Pipette for molluscum instead of wooden tipped applicator so you can use on **multiple lesions**

- Expensive: approximately \$5 each



weeks to obtain

Hair Loss Questionnaire

ClearSkin | Dermatology
general • pediatric • cosmetic

Name: _____ Date: _____

Hair Loss Questionnaire

- How long have you had hair loss?
- How rapid was the hair loss (circle one)? Sudden or Gradual
- How has your hair loss been since it started (circle one)? Better Worse Same
- Which part of your head has hair loss? All over / front / hairline / crown / back / lower / other _____
- Shedding is defined as having excessive numbers of hairs falling out daily. Thinning is defined as having less hair to cover the scalp, with or without excessive hairs lost each day. Do you feel that you have been **shedding** excessive numbers of hairs (in the shower, on your hair brush, etc)? Yes or No
- Do you feel that your scalp hair is **thinning** out over the top without losing excessive numbers of hairs daily? Yes or No
- Are your hairs (circle one) breaking off or coming out from the roots
- Within 6 months PRIOR to the onset of hair loss, have you started any **new medications**? Yes or No
If yes, please list medications: _____
- Have you had any hormone pills or birth control pills started or stopped? Yes or No
If yes, explain: _____
- Do you still have periods? Yes or No If yes, are they (circle one) Regular or Irregular
- Have you noticed any increased hair growth in your face, thighs, chest or abdomen? Yes or No
- Have you been experiencing any significant **medical issues** in your life, such as the birth of a child, surgery, illness, or hospitalization?
- Have you been experiencing any **significant stress** such as, divorce, family illness, cancer, or work issues?
- Have you had any recent **weight loss or change** in your diet?
_____. (1. Any history of **anemia** or **low iron**? Yes or No; if so, on any treatment? _____)
- Any history of **thyroid disorder**? Yes or No; Are you on any treatment?
- Are you actively **dieting**? Yes or No; If so, what type of diet?
- Are you a **vegetarian or vegan**? Yes or No
- Have you had any recent **lab work** done to diagnose the hair loss? Yes or No (Please include copies of lab results)

10/14

10/14

10/14

- Does your scalp **itch, burn, or hurt** sometimes? Yes or No
- Do you have any **rashes or flaking** in your scalp? Yes or No
- List any **family members** with hair loss or thinning of the hair: _____

23. Please list all the **prescription medications**, supplements, and shampoos/lotions that you have used for your hair loss:

Treatment	When was it tried?	For how long?	Did it help?

24. Please list the names and dosages of all **medications**, over-the-counter pills, and hormone pills that you are currently taking and circle the ones that you were taking when your hair began to fall out.

25. Please list the names and dosages of all **vitamins and natural supplements** that you are taking and circle the ones that you were taking when your hair began to fall out.

26. How often is your hair colored, chemically processed, or straightened?

_____. Never Every _____ weeks Every _____ months

27. For women:

Have you had difficulty becoming pregnant? Yes or No

Are you postmenopausal? Yes or No At what age?

_____. Have you had a hysterectomy? Yes or No; When?

Have your ovaries been removed? Yes or No; When?

28. What do you think is the cause of your hair loss? Or any possible contributing factors?

10/14

10/14

10/14

