

Regional(Perioral or Periorbital) Deep Phenol/Croton oil Peeling

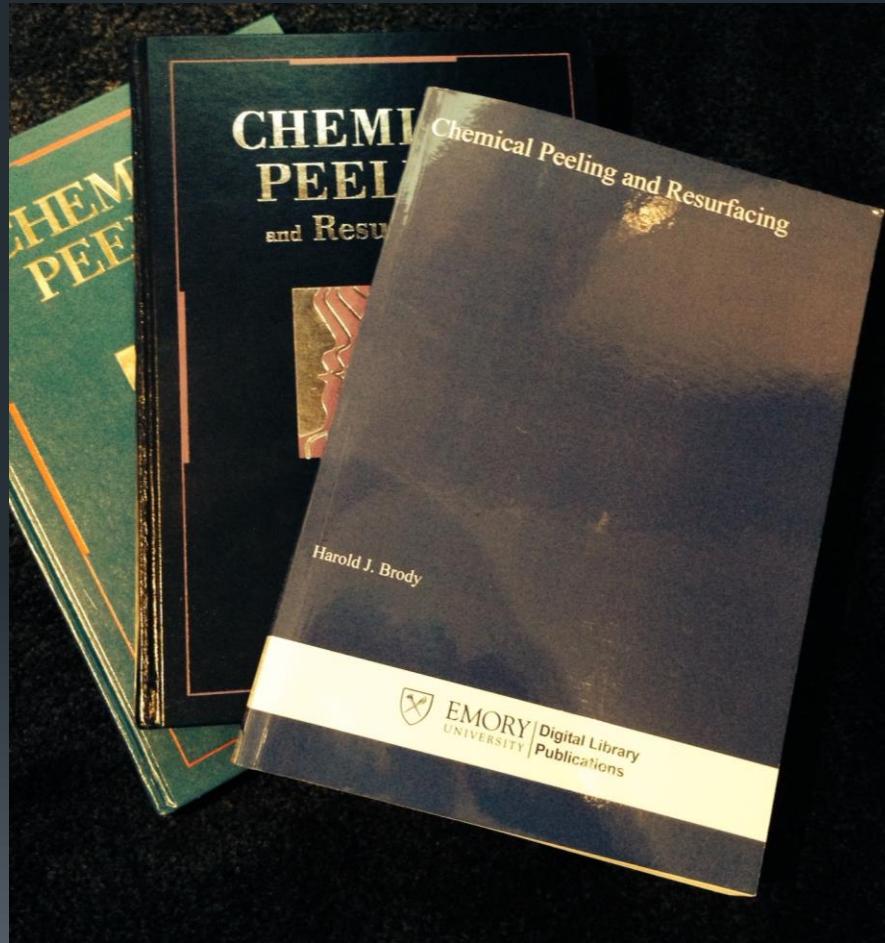
How and Why to Do and Teach it

Association of Professors of Dermatology
Procedural Dermatology-2014

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Conflicts

Textbook:
Chemical Peeling and
Resurfacing, 3rd edition,
Emory University Press,
Amazon.com



2012-2013 Combination Chemical Peels

- ASPS: 444,268
- ASDS: 413,000
- Within Top 5 or 6 procedures for both associations

Why do it??

- Superb method to remove Glogau III or IV wrinkles in one treatment
- No Laser cost, maintenance or payments necessary





Why do it??

- Substantial generation of funds for your department
- Cost of procedure is negligible
- 24 procedures yearly(2 monthly for 6 winter months or 1 monthly) with phenol combination would yield \$1,000 or \$2,000 per peel or \$24,000 to \$50,000+ more per year

- 14 years ago at ASDS, survey showed 1/3 of Program Directors teaching phenol based peels.
- ASDS Visiting Professor: 6 programs in 2013. Programs not getting didactic peel instruction as per RRC. Faculty and resident intense interest. Phenol/Croton oil Demonstrations successful



Unlike Dermabrasion, which
is rarely performed for
wrinkles today, no blood-
borne pathogens in peeling
for wrinkles

- There has never been a death from a properly performed full-face phenol peel
- Pause 10 minutes between perioral and periorbital application if doing 2 cosmetic units

- No worry of phenol cardiotoxicity as periorbital or perioral involves less phenol than a phenol matrixectomy





Oral Hydration for Phenol peels

- Drink 4 cups of water(1000cc or 32 oz)
- (Most patients peeling in the morning aren't hydrated)

Baker-Gordon Formula HALVED for ease of use

- Phenol, USP, 88% 1cc
- Tap water 1cc
- Septisol liquid soap 3 drops
- Croton oil 1 drop

As per Hetter's work, Croton oil is the active ingredient



Application

- Application causes burning for 20 seconds, then anesthesia for 20 minutes, then throbbing pain for 6 hours.
- Perform in the morning
- Infraorbital and mental blocks: marcaine

Optional occlusion Glogau IV skin
with microfoam tape



Frosting: Light White, White, Gray

- Glogau III go to White Frost
- Glogau IV go to Gray frost

- No Alabaster Skin or depigmentation if properly performed on proper degree of sun damage
- Hypopigmentation



Post op care



- In shower, dove soap and povidone iodine or chlorhexidine lathering skin cleanser followed by Aquaphor or Vaseline if sensitive twice daily



A great way to start





Glogau III



Brody H



Complications of Resurfacing

- Pigmentation
- Scarring: Less than 1% in 3 studies(Baker, Brody,Glogau)
- Persistent Erythema
- Infection
- Regional peels imply less chance of complications since less surface area performed



Why do it??

- Substantial generation of funds for your department
- 24 procedures(2 monthly for 6 winter months or 1 monthly) with phenol combination would yield \$24,000 to \$50,000 more per year
- **NO RESURFACING LASER COST OR MAINTENANCE**