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### *Short Communication*

## **Removal of post-acne scars and spots by dermabrasion and chemical peelings**

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### **Abstract**

**Subject** - acne is rather common problem of fatty gland, inflammation, caused by the pathological process, based on numerous factors; whereby different type rash develops on the skin, such as comedone, papula- pustules, and / or nodular-cystic type. Such forms of acne often leave scars and spots on the skin (atrophic or hypertrophic). There are different cosmetic methods (ultrasonic, microwave, IPL- methods, etc.) to solve these problems, but they cannot be fully cleared. Through dermabrasion and chemical peeling methods the problem of spots and scars is solved.

**Goal**- By small -invasive methods (By microdermabrasion methods and various chemical acids) to get the effect on solution of the above existing problems.

**Material and Methods**- I divided patients into 2 groups. Group 1 included 32 patients with post-acne scars (Hypotrophic form), out of which 16 female and 7 male of 24 to 36 years of age. Scars were 1-8 years old. Group 2 consisted of patients with post-acne spots. Their number was 7 (15 female, 2male), all the spots were relatively new, 4-12 months old. In the 1 Group the superficial anesthesia with the ointment was done, the skin was cleaned by chlorhexidine solution and each scar was treated by microcrystalline surface mounts (mount sizes ranging from 75 microns (In case of old and rough edges, if any) up to 125-150-170-microns (compared to new-soft scars). The procedure was repeated 4-6 times with 10 day intervals. The procedure can be repeated 6-12 months later. The skin exfoliation was done by the device and blood circulation was improved and tissues were enriched by oxygen, the restructuring of the damaged part was done.

In the Group 2 the skin was treated with combined chemical acids (14% salicylic acid, 15% glycolic acid, 14% lactic acid, azelaic acid 2%, 8% citric acid.) The trichloroacetic acid 15-25-35 %, salicylic acid 30%, glycolic acid 50-70% may be used for evaluation of the spot condition. The procedure included 4 procedures with 12-14 day intervals. The procedure may be repeated 6-12 months later. The follow-up period included up to 3-14 months. Efficiency is based on long-term results.

**Results**-After the procedure skin condition changed dramatically, its structure improved, the skin color became pale pink, porosity of the skin reduced, the collagen-elastin synthesis, skin layer regeneration, restructuring occurred through improvement of blood circulation and exfoliation.

**Outcome**-The obtained results showed that the procedures, done by apparatus microdermabrasion and chemical peeling are very effective for further resolution of post-acne scars and spots

### **Biography**

Graduated Tbilisi Classic and Traditional Medicine Academy, Faculty of Medicine, diploma of doctor of general practice. She passed the complete the whole course of aesthetic cosmetology, acupuncture (Moscow), passed the complete course of plastic and aesthetic dermato-cosmetology, and also the complete residency courses in dermato-venerology. She attends seminars and master classes in dermatology, dermato-pathology, dermato-oncology and dermato-surgery.

She is the member of Georgian Association of Dermatology and Venereology, Georgian Society of Aesthetic Medicine, Georgian Association of Photodermatology and Skin Cancer.

## References

1. Ghodsi SZ, Orawa H, Zouboulis CC. Prevalence, severity, and severity risk factors of acne in high school pupils: a community-based study. *Journal of Investigative Dermatology*. 2009;129(9):2136–2141. [[Abstract](#)] [[Google Scholar](#)]
2. Williams C, Layton AM. Persistent acne in women: implications for the patient and for therapy. *American Journal of Clinical Dermatology*. 2006;7(5):281–290. [[Abstract](#)] [[Google Scholar](#)]
3. Capitanio B, Sinagra JL, Bordinon V, Fei PC, Picardo M, Zouboulis CC. Underestimated clinical features of postadolescent acne. *Journal of the American Academy of Dermatology*. 2010;63(5):782–788. [[Abstract](#)] [[Google Scholar](#)]
4. Layton AM, Henderson CA, Cunliffe WJ. A clinical evaluation of acne scarring and its incidence. *Clinical and Experimental Dermatology*. 1994;19(4):303–308. [[Abstract](#)] [[Google Scholar](#)]

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