17 <sup>th</sup> International Conference on	Hybrid Event
Dermatology and Cosmetic Medicine	
3 <sup>rd</sup> Global Summit on Heart Congress	August 08, 2022
6 <sup>th</sup> International Conference on	Zürich, Switzerland
Plastic Surgery and Aesthetic Practices	

Rita Vora, J Dermatol Dis 2022, Volume 09

## <u>Comparison between different modalities of treatment in the patients of mild and</u> <u>moderate post acne scar</u>

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**Aims**: To compare the efficacy of various therapeutic modalities in treatment of mild and moderate <u>acne scar</u> according to the global acne scarring grading system.

**Methods**: It was an interventional, non randomised control study. Total 90 patients were randomly divided into 6 groups of 15 patients each into the category of Grade 2 and 3 scars according to Goodman and Baron scale distributed into 3 modalities of Cross, Dermaroller and Co2 fractional. Profile of patients was recorded and objective & subjective evaluation along with assessment of patient satisfaction was done at the end of 1 year.

**Background**: Acne, the most common <u>skin malady</u>, is a disorder of pilosebaceous units that peaks between the ages of 14 and the beginning of the third decade, but may persist into or develop de novo in adulthood (20% men and 35% women), affecting almost all ethnicities and races. If more extensive deep dermal damage occurs, broad scars can develop like, rolling scars or boxcar scars. There lies paucity in the data for treatment of Acne scars which significantly hampers the quality of life. The treatment modality of acne scars depends on different factors like early treatment, types of scars, infrastructure and financial status of the patient.

**Results**: A total of 90 patients were enrolled in the study. Patients of age 18-35 years were enrolled in the study among which males were 44 and females were 46. Greater part of the patients belonged to icepick+rolling group which was 42% and all three types of scars were present in only 8% of patients. Icepick + boxcar were observed least only in 2%. In grade 2 and 3 scars, statistically significant improvement was observed in all modalities. However, in grade 2 scars, the improvement was similar across groups with respect to Quantitative (p=0.05) and qualitative grading (p=0.22). While in grade 3, the improvement was significantly different with respect to Quantitative (p<0.001) and qualitative grading (p<0.001). Post-hoc comparisons with Scheffe's correction revealed that Cross had inferior efficacy with respect to Quantitative as well as qualitative grading as compared to dermaroller and CO2 laser.

**Conclusion**: Cross can be a cheaper and feasible alternative to <u>dermaroller</u> and CO2 in grade 2 scars. However, dermaroller and/or CO2 should be considered for grade 3 scars depending on infrastructural limitations and patient's choice.

## Biography

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Received: May 17, 2022; Accepted: May 19, 2022; Published: August 08, 2022