



Plastic Surgery & Dermatology Associates (PSDA) Dr. LOWE'S SCAR CARE INSTRUCTIONS

Days 1-7 All surgery that requires an incision will leave a scar or visible evidence of the surgery. It is very important to avoid a wound infection by keeping the wound clean. No wound should be exposed to the sun or uv radiation for a minimum of 1 month prior and 6 months after surgery.

Clean the wound with soap and water as instructed by Dr. Lowe. Apply Vaseline sparingly to the wound for the first several days because it will heal better with a little moisture. If your wound was sealed with Dermabond or "Superglue" no further care is required other than cleaning. **With permission**, you may shower the second day after surgery. Let tap water gently hit the area, clean with soap and water, and blot dry.

Apply cold compresses to the incision site during the first 48 hours to reduce swelling. Elevate the operated area above the heart if possible for at least one week.

Days 7-14 Removing the permanent sutures from a wound early will help to decrease scarring in some cases. However, if the wound opens up significantly this may increase local scarring. Dr. Lowe will remove your sutures based on his experience and the location of your surgery. Make sure you make your follow-up appointments as instructed.

Each wound is different so make sure that you follow the instruction that Dr. Lowe provides. Ask him if you have any questions or your situation changes. Pressure on a wound may improve the scar so taping the wound or applying silicone sheeting may be helpful after the first week. Continue to keep wounds clean with soap and water, but avoid soaking in the bath until completely healed.

Weeks 2-6 Most of the swelling and discoloration should be gone. At about 2 weeks when no more open wounds are present, topical anti-scar materials may be applied. If Dermabond or "Superglue" was used on the wound the glue debris should be gently removed over time starting at 2 weeks.

If the wound is completely closed, gently massage the area to help break down the scar and decrease pain. In most cases, scar prevention materials such as Mederma, silicone sheeting, and silicone gels should be initiated. Local inflammation will remain in the wound in this period and sometimes suture material will surface as your body breaks down the suture material underneath the skin.

Month 2-8 Your scar will usually begin to fade at about 2 months. At the minimum, you should apply Nivea moisturizer (or over-the-counter lotion or cream) to wound site and massage the area two or three times a day. Anti-scar materials are recommended for up to one year after surgery and sun exposure should be strictly avoided. When in the sun always use sun screen materials even under bathing suites and re-apply frequently. **Remember** that anti-scar materials only work when applied consistently over time. They must be applied every day as instructed over the long haul. Certain products are more beneficial than others.

Mederma is a clinically proven product that can be applied to a scar after it is closed twice a day. It is easy to apply and cheaper than silicone products, but not as efficacious. It can cause itching or allergic reactions in some patients and should then be immediately discontinued. It can be obtained on-line or at most stores at a reasonable price. Other moisturizer may be beneficial but are not necessarily clinically proven at this time.

Silicone sheeting is expensive and the best product on the market currently. It is hard to keep in place and it must be worn around the clock. Apply a sheet over the scar every day, all day, and wash the product at night then re-apply. Once the sheet begins to dissolve, cut new piece to wear over the wound. Most patients apply sheeting to specific areas of concern, and not the entire scar particularly if it is large. Silicone gels are easier to apply and less bulky. They are ideal for smaller areas and on the face. They leave a shiny residue after application. They are not as good as silicone sheeting because they do not apply as much pressure. All silicone products are expensive in the store, and cheaper on-line in most cases.

Raised and red scars may benefit from a steroid injection. If you are concerned about your scar meet with Dr. Lowe to discuss options. Radiation treatments are required in extreme cases. Dark skinned patients and those with history of scarring must be particularly diligent about scar prevention.

Months 8-12 Prominent scars should be re-evaluated at this time. Scar revision usually should not be done until 8-12 months after surgery as long as no complications have occurred. Remember, scars are not always better after scar revision and in some cases can be made worse. Scar prevention or more accurately scar management is the best approach in most cases. Avoiding the sun may be the single most important recommendation. Sunscreens should have an SPF of 15 or better, and SPF of 50 is recommended on the face in most patients. Special recommendations for scar prevention and treatment can be obtained from Dr. Lowe or his staff.

***Call the office you have any questions or problems, or if you have signs of infection (redness, fever, or drainage). (405) 749-4227 JBL**