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Microbiological assessment of hyaluronic acid fillers after expiration in properly stored conditions

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The injection of soft tissue augmentation products or fillers is now a common place aesthetic procedure. When the American Society for Aesthetic Plastic Surgery (ASAPS) conducted a survey in 2014 of the most common non-surgical procedures in the United States, it found the injection of hyaluronic acid (HA) fillers was the second only to botulinum toxin injections. Hyaluronic acids have a superior safety profile when compared with other soft tissue augmentation products because they exhibit minimal tissue reactivity while being reversible with commercially available hyaluronidase preparations. As such, the storage of HA fillers has come under scrutiny in recent years and the use of these products past their expiration date has come to light. While not uncommon, reuse of HA fillers after opening or past their expiration date is not recommended by manufacturers and has led to controversy since the science behind these practices is infrequently studied. In our study, we cultured 17 used and unused HA fillers from syringes that were stored in recommended conditions but had passed their expiration dates (range of 9 months to 3 years). Analysis did not reveal a single case of bacterial growth in any of our samples. However, more studies are needed before conclusive statements can be drawn from these data. In addition, samples were not analyzed for physical degradation that may reduce the filler's *in vivo* effectiveness.

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Lucky Luke sign: Clothing dermatitis in an adult

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The "Lucky Luke" sign describes a bilateral holster shaped eczematous rash on the posterolateral hips and upper buttocks in infants secondary to an allergic contact dermatitis to rubber or dyes commonly found in diapers. However, the characteristic "Lucky Luke" distribution has never been previously described in adults. Here we present the first reported adult case of the "Lucky Luke" sign resulting from a contact dermatitis secondary to a clothing label. As this case highlights, the distribution of an eruption plays an important role in identifying the possible etiology at initial consultation. Predominant involvement of convex skin surfaces in combination with sparing of the concave surfaces provides clinical evidence suggestive of clothing contact dermatitis as is demonstrated in this patient. Furthermore, as this report demonstrates, an initial negative patch test should not divert a practitioner away from diagnosing contact dermatitis, but instead should lead a clinician to consider further patch testing if the overall clinical picture is still strongly suggestive of this diagnosis.

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