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INCISION AND SUTURE LINE CARE

Incisions and suture lines are a necessary part of surgery. These lines take many months to fully heal. Part of the healing process requires proper cleansing and care. In addition, there are treatments that can help resulting scars to be flatter, finer and less noticeable. There is no guarantee to what a scar will look like once it has fully healed, however the following instructions are important to good outcomes.

<u>Do not smoke and avoid second hand smoke</u>. This can reduce the oxygen in your blood and blood supply to the wound, greatly reducing your healing.

Following surgery

In the days immediately following surgery, your incision should be handled with care. Showering and getting the surgical site wet is allowed after 24 -36 hours. They should not be submerged under water however, i.e. bathing/swimming/jacuzzi. Bathing and swimming can typically be resumed after 10 days but Dr. Park can clarify in unusual circumstances.

STERISTRIPS - white adhesive tapes not meant to be changed

If you have steristrips on, minimal care is necessary. The steristrips should be maintained. They can get wet after 24 - 36 hours, but should be patted dry. These strips may begin to lift off at the edges, as long as they are still adherent, they should continue to function. It is okay for them to become blood stained as long as it is dry blood and the adhesion remains. If they come off, call the office, because Dr. Park often uses an absorbable suture that is held in place by the steristrips.

OPEN INCISIONS

Other incisions are left open and dressed with antibiotic ointment (over the counter - bacitracin, polysporin, neosporin, triple antibiotic ointment). The sutures may be blue, black, or another color. These incisions may ooze for a day or two after your procedure, and maybe longer if you are on blood thinners. As long as the area is not collecting blood under the skin, this should not cause alarm. Holding slight pressure on the area can help the bleeding stop. If bleeding is persistent, there is unusual drainage, malodor, fever, or swelling, call the office. These open incisions should be cleaned 2-3 times per day with peroxide and redressed with antibiotic ointment each time until all blood and scabs have come off, typically for a week. Then continue antibiotic ointment 3 times per day until fully healed.

Initial healing

Once your incision lines have sealed, I recommend Vitamin E oil, lotion, or ointment with massaging of the surgical area with your lubricated finger 3-4 times per day. The Vitamin E minimizes scar formation and the massage helps resolve the swelling. This also aids in softening the scar and may alleviate any itching in the surgically treated area. Alternatively, a skin moisturizer or petroleum jelly is a second line choice, but choose something fragrance-free and free of glycolic, retinoid or other possibly irritating ingredients. I have not seen tremendous advantages with more expensive scar care products such as Mederma, so I do not routinely recommend, but it is safe to use such items if you choose. Direct trauma and physical stress may result in a separation of the suture edges or a wider scar.

The first year

In the 12 months following surgery, you must wear a water-proof sunscreen active against UVA and UVB rays with at least an SPF 30, at all times in the surgically treated area including the suture line. I recommend a product with a zinc oxide base. This is imperative at least 30 minutes before any prolonged sun exposure is expected. Protective clothing and a wide-brimmed hat for facial incision lines is highly recommended. New scars are very sensitive to sunlight and, if, unprotected, may result in permanent changes in scar color to either a darker, lighter or discolored shade. Rarely, a scar will take on a nodular, bumpy, raised or thickened appearance; the scar formation may be hypertrophic or keloid. If this should happen, please contact our office and we will evaluate if additional treatments may be effective to flatten and improve the scar as it is forming.