

ST LEONARDS DERMATOLOGY AND LASER

SCITON BROADBAND LIGHT (BBL) FOR NON-ABLATIVE PIGMENTED LESION/SKIN TREATMENT

You have now read the information on the broadband light therapy and you have decided to have the phototherapy treatment for sun damage, age spots, and redness and or photo-rejuvenation or tightening of your skin.

Pigmented lesions can be treated with the selective absorption of light in melanin. This process has been used since 1968 using ruby (694nm) and Nd Yag (1064) lasers. The absorption converts light into heat energy, which raises the temperature of the target. With appropriate selection of fluence and pulse width, the temperature will be high enough to alter and damage the target, resulting in its elimination.

Pigmented lesions are treated by selective destruction of melanin or melanocytes with short high intensity light pulses. The Profile BBL can deliver enough energy or fluence to effectively target melanin and surface vessels, and has variable pulse widths for treating a range of target sizes. When the BBL is used to treat pigmented lesions there is heat build-up in tissue from the absorption of light energy in melanin and surrounding melanocytes. The heat dissipates into surrounding tissue. Absorption of the BBL light in melanin can be substantial, and a longer pulse width and lower fluence are recommended for darker skin. Lighter skin types require less cooling than darker skin types. The BBL contact cooling plate insures that the epidermis is adequately protected from overheating regardless of skin type.

It is important that a skin evaluation by your dermatologist is given prior to treatment to avoid masking any serious skin condition.

Treatment of areas with artificial make-up or tattoos should be avoided.

You will be given a skin type analysis prior to treatment using the Fitzpatrick Scale.

For better results patients should avoid sun exposure, tanning beds and tanning creams for 2-3 weeks prior to treatment and throughout the course of their BBL treatment. Sunless tanning lotions must also be avoided for 2-3 weeks prior to treatment. It is important to tell the clinician if you have had sun exposure or using the tanning bed or lotions. It may be necessary to cancel the treatment.

However if sun exposure is not avoidable treatment sessions need to be increased since treatments on sun-exposed skin will require lower fluence settings to protect the epidermis from burning.

The immediate goal is darkening of lesions and light erythema (pinkness) in the area treated. The patient may experience a mild sunburn sensation for up to two -24 hours after treatment. There should not be any significant discomfort after treatment.

It is important to adhere to the post skin care instructions given at time of treatment and to notify the surgery on ph 99669667 immediately if any problems such as blistering /scabbing arises. The clinician will contact you.