



UConn  
Health  
Center

# Skin Deep



Winter 2012 – News and information from the Department of Dermatology

## CALENDAR

### HARTFORD PSORIASIS NETWORK MEETINGS

**March 9, April 13 & May 11 at 7pm**  
**First Church of Christ,**  
**12 S. Main St. West Hartford**  
**Hartford Psoriasis Network**  
**1-877-546-5558 x209**  
**hartford@support.psoriasis.org**

### UConn DERMATOLOGY GRAND ROUNDS, 8 AM, WEDNESDAYS

**March 7, April 4 & May 2**  
**Dermatology Waiting Room**  
**21 South Rd., 2nd Floor,**  
**Farmington**

### UConn DERMATOLOGY JOURNAL CLUB, 12:15 PM, WEDNESDAYS

**February 15 & 22, March 21 & 28,**  
**April 18 & 25**  
**Dermatology Conference Room**  
**21 South Rd., 2nd Floor,**  
**Farmington**

WE UPDATE OUR CALENDAR AND EVENTS ON A REGULAR BASIS. TO SUBMIT AN EVENT OR FOR MORE INFORMATION, FEEL FREE TO CONTACT OUR MAIN LINE AT 860-679-4600.

## Letter from our Chairman

**We are family** - 'Tis the season of long nights, cold, short days, and post holiday blues. Luckily, what keeps most of us warm and happy during this time of year, and in fact all year round, is not dependent on things we cannot control like the outside temperature. It is our family, friends and good colleagues. In that regard, I am one of the most fortunate people I know. My colleagues in the Dermatology Department are also my friends. That does not mean we all "party" together but rather it reflects the fact that we all sincerely care about each other. We share the same values to deliver the best care to our patients, to support each other in academic endeavors and to teach the next generation of physicians. In addition we try to be there for each other when times are tough at home because of a sick parent, child, or partner. As we begin 2012, I want to wish all of you a healthy, happy new year and introduce you to my extended family!

- Jane Grant-Kels, MD



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## Winter Skin

by: *Julia Anderson, MD - PGY 3*



As the weather gets colder and indoor heating dries out the air, our skin can become drier too. Skin can become scallier, very itchy, or can crack open and become very painful. There are several steps that we can take to prevent dry skin. Washing skin can actually dry it out. Some ways to minimize the loss of moisture from washing are:

- 1) Take a shorter shower.
- 2) Keep the water temperature down.
- 3) Use a moisturizing soap and limit soap use only to areas of the body that are noticeably dirty. Hot soapy water can deplete the naturally occurring oils on the skin, which are meant to protect the skin from overdrying.
- 4) After showers or hand washing, pat skin with a towel to remove excess moisture and then apply a moisturizer to partially wet skin.

Moisturizers come in different “strengths”. The lowest strength moisturizers are lotions.

- Lotions are the least greasy, but often have a high water content and may end up drawing out more moisture from the skin than they add back into it. Lotions are not ideal for dry skin.
- Creams are more moisturizing than lotions. They are thicker and generally the best to use

on dry winter skin.

- Ointments are the strongest moisturizers. White petroleum is probably the best and least expensive moisturizer available, but some people do not like the feel of ointments on their skin. However, right after a shower on damp skin, ointments can feel similar to applying creams or lotions. Give it a try!

- Moisturizers should be applied at least after every shower. For dry skin, additional applications will likely be needed. You may need to apply extra moisturizer 1-2 more times during the day or before bed.

If you try all these tricks and you still have dry, scaling, red or itchy skin, you may want to mention this to your dermatologist. You may have another condition, such as eczema, that may be causing your dry skin. You may need an additional work up or stronger medicine to control these symptoms.

## Research

### Clinical Research at UConn Dermatology

Clinical research is the systematic study of human disease and its treatments, and plays an important role in the advancement of medical treatments. Results of clinical research are used by the Food and Drug Administration (FDA), a government agency in Department of Health and Human Services, to regulate the release of new drugs or treatments. The FDA’s role in the clinical research process is to determine if a new drug’s or treatment’s benefits outweigh potential side effects. Obtaining FDA approval is a rigorous process that involves research on human volunteers.

New drug development goes through four phases, each phase has a different purpose:

Phase I trials- test a new drug in subjects (research volunteers) for the first time. The number of subjects who participate in a phase I trial is usually small (20 to 80 subjects) and the goal is to determine the safe dose of a new drug and to identify potential side effects.

Phase II trials- the new drug is given to a larger group of subjects (100 to 300 subjects) and the goal is to further evaluate the drug’s safety and effectiveness.

Phase III trials- the new drug is given to large numbers of subjects (from several hundred to several thousand) to compare it to commonly used treatments, to confirm the drug’s safety and effectiveness, and to collect information that will allow the drug to be best used.

Phase IV trials - done after the drug has received FDA approval and designed to monitor the drug’s effectiveness and to identify any side effects that may be associated with widespread use in the general population.

At UConn Dermatology, our faculty participates in clinical research to further develop the medical science of skin disease.

*Dr. Omar Ibrahimi* is currently collaborating at the Wellman Center for Photomedicine in Boston, investigating novel treatments using light technology to treat acne. He is also working to develop treatments to restore hair color that goes gray with age, and investigating the development of new lasers to treat a variety of medical and cosmetic skin conditions. *Dr. Bruce Strober* is our Director of Clinical Trials. He is an internationally recognized leader in psoriasis research, and has been involved with many clinical trials for the development of therapies to treat psoriasis and psoriatic arthritis.



## Laser Hair Removal



### Who is a good candidate for laser hair removal (LHR)?

People of all colors and skin types with dark, coarse hairs are potential candidates for LHR. Blond, red, grey, and white hairs are not effective targets for current LHR

technology. The best candidates are fair skinned and using a sunscreen with SPF 30 or more for several months before a LHR procedure.

### How does LHR work?

Light emitted in short bursts is absorbed by the dark pigment in hair follicles, disrupting hair growth. The number of treatments required is highly variable and depends on factors such as skin color, hair color and texture, and density of hair distribution. Multiple treatments 4 to 6 weeks apart are usually required to achieve permanent hair reduction. Clinical trials show that most people treated appropriately experience a 10 to 50% permanent hair reduction after each LHR treatment.

### Does it hurt?

There is mild discomfort similar to slight sunburn associated with LHR treatments. Most people tolerate the procedure very well, although we may be able to offer you a topical anesthetic if you find the procedure uncomfortable. After LHR, an ice pack can be applied to provide comfort.

### What are the side effects?

Some swelling around the hair follicles is normal after treatment. The skin may be red or pink for a few hours. Until the redness resolves, we ask you avoid make-up, shaving, swimming or strenuous exercise. Rarely, blisters, sores or changes in the color of the skin can occur. To minimize the risk, we usually ask that you have a test site done prior to starting treatment and that you practice strict sun avoidance between treatments.

### How much does it cost?

Cosmetic consults, test sites, and LHR are not covered by insurance. Cost varies and depends on the area being treated. We would be happy to develop a customized treatment plan for you. To find out more, please call our office to schedule a cosmetic consult at 860-679-4600

## Cosmetics



### Cosmetics for Men

Photo-aging is a term used to describe damage to the skin caused by cumulative exposure to ultraviolet light over a person's lifetime. Examples of facial photo-aging include the development of dark or red spots, broken blood vessels, wrinkles, changes to the skin's texture and skin cancer. Men are at high risk for developing these skin changes, and are reported to be less likely to use sun protection measures. We recommend everyone practice basic sun protection, including daily sunblock with a sun protective factor (SPF) of 30 or more applied every 2 or 3 hours to sun exposed areas. Sun avoidance during peak hours (10 am to 4 pm) and sun-protective clothing complete prevention measures.

For treatment of the signs of photoaging, many options are available. Consult with your dermatologist for evaluation and specific recommendations to treat your skin problems.

**Anti-aging creams** can limit the appearance of fine lines and wrinkles and help lighten dark spots caused by sun exposure. Products for sale at UConn dermatology are not available in pharmacies or at cosmetic counters. In addition prescription retinoids can be provided to you by your dermatologist if appropriate.

**Chemical peels** are used to improve skin texture and can fade dark spots

to bring about a more youthful appearance.

**Microdermabrasion** is a gentle procedure that can help restore skin texture and appearance without significant recovery time.

**Laser and IPL treatments** can treat dilated blood vessels, dark or red spots, rejuvenate skin tone and texture, and even permanently reduce hair growth in the areas that are targeted. Treatment courses and recovery times vary.

**Injectable muscle relaxers** like botulinum toxins are used to temporarily eliminate facial expression lines such as frown lines or worry lines, resulting in a smoother, younger look.

**Injectable dermal fillers** are products that temporarily support areas of volume loss and restore facial tone, limiting facial wrinkles and skin folds that can occur from chronic ultraviolet light exposure. Results vary and can last from 4 to 18 months, depending on the product used.

If you are interested in learning more about our range of cosmetic services and the physicians, nurse practitioners and physician assistants who perform them, please call 860-679-4600 and schedule a cosmetic consult with one of our cosmetic services providers.



## Awards and recent news within UConn Dermatology

### *Congratulations...*

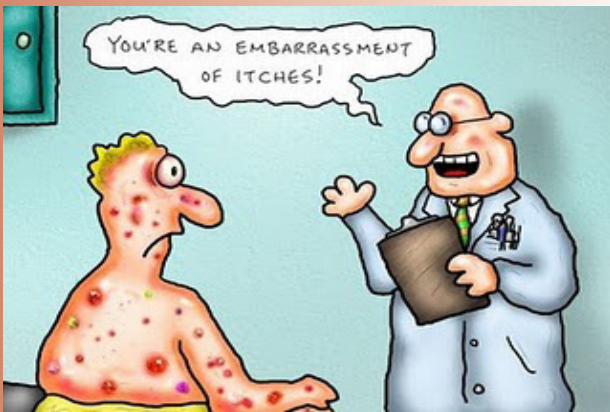
to Dr. Julia Anderson - PGY3 who received a Resident International Grant from the American Academy of Dermatology to participate in a six week elective in Africa where the Education and Volunteers Abroad Committee (EVAC) is establishing dermatology support programs and teledermatology consulting services. She is the third resident within our program to receive this competitive and prestigious grant. Kudos to Dr. Anderson!

### *A Big Welcome!*

Deborah Bugryn, RN has joined our department as our Nurse Manager. She comes to us with over 30 years of nursing experience with 25 of those as management. Welcome Deb!

### *New Year, New You!*

Give yourself a gift that keeps giving; schedule a full skin exam with one of our providers. Dermatologists know that early detection of skin cancer during routine skin exams is crucial to skin cancer detection and successful treatment. Come to your appointment with clean skin (no make-up!) and a list of your current medications. We'll do the rest!



**For more information or to schedule an appointment, please contact:**

**UConn Dermatology Associates  
21 South Road, Second Floor  
Farmington, CT 06030-6231**

**Main Line: 860-679-4600**

**Web: [dermatology.uchc.edu](http://dermatology.uchc.edu)**

## Omar Ibrahim, MD, PhD

Dr. Omar Ibrahim is an Assistant Professor here at UConn and the Director of Cutaneous Laser and Cosmetic Surgery. He has a joint faculty appointment at Harvard Medical School and Massachusetts General Hospital, where he is a Visiting Scientist and part of a team of scientists at the Wellman Center for Photomedicine doing cutting edge research in lasers.



Dr. Ibrahim graduated from the M.D./Ph.D. program at New York University and completed his dermatology training at the Harvard Medical School program. He also completed an advanced fellowship training in Mohs and reconstructive surgery, laser and cosmetic surgery at the University of California Davis. He is currently accepting new patients for Mohs surgery and laser/cosmetic dermatology.

## Logan D'Souza, MD - PGY 2

Dr. Logan D'Souza is our first year dermatology resident from Oklahoma. He obtained his BA in Microbiology as well as his medical degree from The University of Oklahoma. His internal year of residency was completed here at UConn in Internal Medicine. Dr. D'Souza's interests in dermatology are procedural dermatology and genodermatoses. His personal interests are Oklahoma football and family time.



## Lee Ann Maximowicz, MBA, CMPE Academic Administrator

Lee Ann joined the Department in 1998 and is our Academic Administrator for the School of Medicine. Lee Ann works closely with our Chair, Dr. Grant-Kels, on a broad range of non-clinical administrative and financial matters related to faculty, academic staff/programs, and research activities. Lee Ann also performs this same role in two additional departments - Obstetrics & Gynecology and Diagnostic Imaging & Therapeutics.

