

**CASE 40-1**

A 30-year-old man has a 9-month history of an elevated, slightly painful hypertrophic scar. This developed 2 months after a laceration on his arm.



**What is the single best treatment for this patient?**

- (A) Wait for an additional 6 months to see if the scar will resolve without treatment
- (B) Inject triamcinolone intralesionally into the scar and treat early with a fractionated nonablative laser
- (C) Inject dermal fillers into the scar
- (D) Excise the lesion with a 5-mm margin followed by intralesional triamcinolone
- (E) Excise the lesion with a 10-mm margin followed by intralesional triamcinolone

The correct answer is (B), inject triamcinolone intralesionally into the scar and treat early with a fractionated nonablative laser.

Combination treatment with intralesional steroids and the fractionated nonablative laser will modulate this scar, induce a reduction in hyperproliferation of collagen, and induce new normal collagen and elastin. It is best to use high fluence and low density with treatments at 3- to 4-week intervals.

It is unlikely that this scar will improve in 6 months. Dermal fillers would increase the size of the scar. Excision would likely result in a larger scar.