POTENTIAL PATIENT ISSUES/CONTRAINDICATIONS

Patient Safety Issues/Concerns

- Patients with or with a history of Herpes simplex or Herpes labialis, that is, coldsores. You should only perform treatment if the patient undergoes a prophylactic course of oral Acyclovir 200mg 5 times a day at 4 hourly intervals for 5 days starting on the day of treatment to reduce the risk of reactivation. If there is an active coldsore in treatment area treat as a contraindication and do not treat.
- Patients taking anti-coagulant therapy have an increased potential for bruising, petechiae and redness post-treatment. Medications and supplements that can cause this include Warfarin, Aspirin and Omega-3.
    - Patients on Warfarin should have their coagulation status checked to confirm a normal clotting and bleeding profile. If this is abnormal treat as a contraindication and do not treat.
    - Patients on Aspirin or similar medication have increased potential for and severity of bruising and petechiae so should be made aware of this.
    - Patients taking other medication or dietary supplements which alter platelet function and bleeding times, for example Omega-3, have an increased potential for and severity of bruising and petechiae so should be made aware of this.
- Patients taking antibiotics or other medication which may cause UV sensitivity, for example Tetracycline, have an increased hyperpigmentation risk post-treatment so should be advised of this and given the UV-protection guidelines.
- Patients with a history of keloid scars. Inactive keloid scar outside the treatment area: Treatment decision made based on medical practitioner's risk assessment. Active keloid scar outside the treatment area OR inactive or active keloid scar in treatment area treat as contraindication and do not treat.
- Lidocaine, often used to numb the skin, should be used in caution in patients receiving Class I anti-arrythmic drugs as these may also contain lidocaine.
- Patients using topical prescription retinoids should have no skin sensitivity such as redness, dryness or irritation before the procedure. Patients should stop using the product 3 days before treatment and re-commence after the post-procedure erythema has subsided. Ensure that the UV-protection guidelines are followed.
- Patients using other potential skin-irritating or potent actives, for example Salicylic or Glycolic, should have no skin sensitivity such as redness, dryness or irritation before the procedure. Patients should stop using the product 3 days before treatment and re-commence after the post-procedure erythema has subsided.

Contraindications

- Patients with active acne or papules and pustules in the treatment area. Do not treat over active acne. A few spots can be avoided but for patients with severe acne, it is advisable to delay the treatment until control has been achieved.
- Patients with active Herpes infection, solar keratoses, other active cutaneous inflammation or infection, psoriasis or eczema in the treatment area.
- Patients with an active keloid scar outside the treatment area OR inactive or active keloid scar in treatment area.
- Patients taking anticoagulant therapy for example Warfarin with unstable blood levels and an abnormal clotting profile.
- Patients with or with a history of skin cancer. If it is or was in treatment area, whether it is active or inactive, treat as a contraindication and do not treat. For patients with a previous incidence of skin cancer or active skin cancer in an area outside the treatment area, the treatment decision should be made based on the medical practitioner's risk assessment.
- Patients with or with a history of other forms of cancer. If it is active, treat as a contraindication and do not treat. For patients with a previous incidence of cancer the treatment decision should be made based on the medical practitioner's risk assessment.
- Patients with an impaired immune system due to immunosuppressive disease or medication such chemotherapy, radiotherapy or high doses of corticosteroids, and uncontrolled diabetes mellitus.
- Patients taking oral prescription retinoids such as Roaccutane should not have the treatment until 6 months after stopping the medication.
- Patients who are pregnant or breast-feeding are also contraindicated for this treatment.