

Transcript Details

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Making Skin Procedures Less Scary for Kids

Announcer:

This is *On the Frontlines of Pediatric Skin Health* on ReachMD. Here's your host, Dr. Steve Jackson.

Dr. Jackson:

You're listening to *On the Frontlines of Pediatric Skin Health* on ReachMD, and I'm Dr. Steve Jackson. Today, I'm joined by Dr. Cheryl Bayart to talk about skin surgeries and laser treatments in pediatric patients, particularly how we can make them safer, gentler, and less intimidating. Dr. Bayart is an Associate Professor in the Departments of Pediatrics and Dermatology at the University of Cincinnati.

Dr. Bayart, welcome to the program.

Dr. Bayart:

Thanks so much for having me.

Dr. Jackson:

So let's start with some background, Dr. Bayart. How do dermatologic procedures in children differ from those in adults?

Dr. Bayart:

I am really glad that you asked. This is actually something that I am really passionate about. I do a lot of procedures in my clinics, and doing procedures on children just takes another whole step of going out of your way to make sure that the child feels comfortable: keeping them as comfortable as possible during the procedure and helping the procedure go safely, even if it's something that the child is not necessarily excited about doing.

With adults, we can just tell them, please sit still. I am going to inject you with this medication. For kids we have a child's life specialist showing them a video, and we're using a little vibration tool to decrease sensation at the site of the injection, and we're putting some numbing cream on before we actually do the injection, and we are cheering them on and telling them how brave they are.

So there's a lot that goes into it, but I think when done right, it can often be a non-traumatic experience, and even a positive experience for children.

Dr. Jackson:

With that context in mind, what are the most common reasons children may need skin surgery or laser treatment?

Dr. Bayart:

A lot of the laser treatments I do are for vascular birthmarks, particularly port wine birthmarks, which are red capillary malformations that can be present anywhere on the body. But typically the ones we're most aggressive about treating early in life are the ones on the face, because over time, they can darken and thicken, and you can get significant functional impairment. For example, if your lip and your upper gums thicken, you can have a lot of dental problems. You can have problems controlling your saliva, speaking, and eating. So these are really important to treat early in life, even during infancy, ideally.

So that's probably one of the most common procedures I do. I also treat some other vascular malformations, like venous malformations, which can cause pain, or infantile hemangiomas that haven't resolved completely and have some residual symptoms like discomfort or leave changes on the skin.

I do a fair amount of excisional surgeries: growths on the skin or birthmarks that appear concerning, and we're not entirely sure if they're benign. Often, they're things that are painful. There's a type of cyst called pilomatricomas that are really common in children, and

sometimes they can get quite large and can get calcium deposits in them. And if they get traumatized, they get really inflamed and painful.

So it's both symptomatic things and also prevention of complications later in life.

Dr. Jackson:

For those just tuning in, you are listening to *On the Frontlines of Pediatric Skin Health* on ReachMD. I'm Dr. Steve Jackson, and I'm speaking with Dr. Cheryl Bayart about navigating skin surgeries and laser treatments in pediatric care.

We've talked about why these treatments are needed, so let's now focus on how they're performed in a child-friendly way. How do you prepare kids and families for these procedures to reduce the fear and the anxiety?

Dr. Bayart:

So my first step is, I always like to have a preoperative consultation with the family and the patient prior to the procedure. I don't like to have the day of the procedure being the first time that they're hearing about the procedure that they're going to have. I want them to know what their options are, to be able to choose those options, to choose the timing of the procedure, and to ask any questions that they have before the procedure actually happens.

I have an awesome physician assistant that does some of these for me, but I like to have all of my patients talk to one of us to know what exactly the options are and to know the postoperative restrictions. You know, can the kid play sports after the treatment? Can they go in the sun? Can they swim? These are really important parts of their life.

And I explain to them what they're going to experience during the procedure. I think the unknown is often very anxiety provoking. And so, if kids and parents are not given the opportunity to ask all of their questions and they don't know what's going to happen to them on the day of the procedure, I think that can be extremely anxiety provoking. We also talk in advance about strategies to mitigate any discomfort during the procedure, and I let them tell me what they think will work for them.

Dr. Jackson:

Finally, Dr. Bayart, if we look ahead for a moment, how do you see advances in laser and procedural treatments improving care for pediatric patients?

Dr. Bayart:

I think to look ahead, we have to look back a little bit at where we are today, where we were before, and the improvements that have happened since then.

Improvements in technology are definitely helpful in a number of ways. Previously, lasers didn't have good cooling mechanisms, and they were very, very painful because of that. We have an ablative laser that actually uses a fiber technology instead of heat; that's a lot less painful for the patients. That's really helpful. Improved cooling is also very helpful in decreasing pain.

On the other side of technological improvements, the lasers that we have today are also more effective in treating conditions with fewer side effects than lasers of the past. So I think as lasers get more and more effective, maybe instead of needing 10 treatments for a condition, a child may need just two or three treatments, which has a significant impact on their life in terms of number of procedures they have to go through, but also time out of other activities that they could be doing during that time, and having less downtime post-procedurally.

I think as physicians and as a medical community, we've become a lot more aware of the impact of procedures in childhood on development, long-term perception of the healthcare system, and willingness to get healthcare in the future. A lot of adults have needle phobia, and that stems back to procedures they had as a child. And many adults have reluctance to seek medical care when they need it, for a variety of reasons, but certainly things like needle phobia, and fear of procedures and fear of interactions with the medical community play into that.

I think as we're realizing that, we're being a lot more creative about finding solutions to really create positive experiences for patients. Most children's hospitals now have child life specialists whose job it is to make kids feel comfortable and families feel supported during procedures. And I think that's huge. Technological advancements have certainly helped with that as well—things like buffering lidocaine so that it's not acidic and it doesn't burn.

I think we've stepped up our distraction techniques. It used to be blowing bubbles, and now we have iPads and virtual reality glasses, which are really, really good distractions for kids who are having procedures. So I'm excited for the future.

Dr. Jackson:

Those are great insights for us to think on as we come to the end of today's program. A big thank you to my guest, Dr. Cheryl Bayart, for

joining me to discuss how we can make skin procedures a better experience for kids and their families.

Dr. Bayart, thanks so much for being here today.

Dr. Bayart:

Thank you so much for having me. It was really my pleasure.

Announcer:

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