

Case Study: Facial Scars

PCCA PracaSil™-Plus



Summary: A compounded preparation containing pentoxifylline, caffeine and tranilast in PracaSil™-Plus, a proprietary anhydrous silicone base (PCCA Formula #10649) was applied topically twice daily on the facial scars (old), which resulted in an overall improvement of the facial complexion after only 3 weeks. Results from a dermatologist review showed a grade of “much improved” for the (old) facial scars.

Case Description: A 22-year-old female was severely scarred on the face during a car accident in October 2009. After six plastic surgeries and the application of different products, the patient was still unsatisfied with her complexion. In March 2013, PCCA suggested a compounded preparation containing pentoxifylline 1%, caffeine 1% and tranilast 1% in PracaSil-Plus, a proprietary anhydrous silicone base (Figure 1) to be applied twice a day on the (old) facial scars.

Pentoxifylline USP	1 g
Caffeine USP Anhydrous	1 g
Tranilast	1 g
PCCA PracaSil™-Plus	97 g

Figure 1. PCCA Formula #10649

After 3 weeks of treatment, the patient was surprised by the softening of her skin and overall improvement of her complexion (Figures 2 and 3).



Figure 2. Patient facial scars (before PracaSil-Plus)

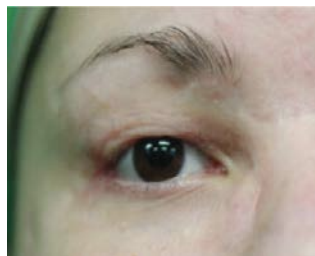


Figure 3. Patient facial scars (after PracaSil-Plus)

Dermatologist Review: In order to assess any clinically relevant improvements in scar attributes, photographs of the scars were taken by the patient or caregiver prior to application of the compounded pentoxifylline, caffeine and tranilast in PracaSil-Plus, at specific time points throughout the application period, and at the completion of the application period. Subject photographs were provided to an independent, blinded dermatologist reviewer. The scars were graded by the reviewer using a photo of the scars before the application of compounded pentoxifylline, caffeine and tranilast in PracaSil-Plus as a baseline. Improvement in scar attributes over time was graded by the reviewer on a scale of “much worse,” “worse,” “neutral,” “improved,” and “much improved” when compared to baseline. The results of the blinded dermatology review were correlated with the results of the self-reported questionnaire.

Dermatologist Results: The (old) facial scars were graded as “much improved” by the dermatologist.

Patient Report: *I have tried many products with little satisfaction. The compounded PracaSil-Plus preparation has shown amazing results in a very short amount of time. PracaSil-Plus reduced the redness of the scars and gave my skin a more uniform look and texture. I am very happy with the compounded PracaSil-Plus preparation and I would recommend it to everyone.*

Acknowledgements: The patient is a PCCA staff member who agreed to share the information included in this case study. Figures 2 and 3 are courtesy of the patient. PCCA Science is grateful for the valuable information and figures shared by the patient. For medical confidentiality purposes, the identity of both the patient and the dermatologist reviewer were kept anonymous.

Introduction: PracaSil-Plus is a proprietary anhydrous silicone base designed to be applied topically in scar therapy treatment (PCCA, 2013a). Silicones have been widely used for their occlusion and hydration properties, which are essential in scar management (Widgerow *et al.*, 2000; Mustoe, 2008). PracaSil-Plus also contains Pracaxi oil, extracted from the oilseed plant *Pentaclethra macroloba*, which has several medicinal applications including skin regeneration and healing (Costa *et al.*, 2013). PracaSil-Plus may be used alone or as a base for the incorporation of active substances in scar therapy treatment (PCCA, 2013a).

Research Studies: The efficacy of PracaSil-Plus in scar therapy treatment was evaluated by visual and instrumental methods in an eight-week, randomized, double-blind, controlled pilot trial conducted on eleven adult Caucasian subject volunteers. PracaSil-Plus showed qualitative and quantitative improvements in the following scar attributes: scar length, scar color/pigment intensity, scar texture/smoothness/roughness, and overall appearance in both old scars and new scars (PCCA, 2013b).

References:

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