

OF FACIAL SOFT TISSUE

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Abstract

Keloid scars are injuries, surgery interventions, burns or other skin from injuries then appearance to be pathological fabric They are physiological. from scars different accordingly too much outside collagen gathering with characterized and healthy tissues from the border out Especially the face in the field keloids aesthetic point from the point of view serious problem is considered, because they external to look breaks and psychological discomfort gives birth.

Introduction

Face soft tissue keloids often surgery cuts, trauma, acne traces or tattoo from the processes then develops. They in treatment many in cases risk of relapse high happened because of, complex This approach is required. in the article face keloids treatment modern methods, mechanisms and their efficiency analysis will be done.

Keloid and hypertrophic scars difference

Keloid is scar of the fabric pathological increase be healthy skin from the border outside comes out. Hypertrophic scar and only injury on the border develops and time passing with regression to do possible.

Keloids following to the features has :

- Smooth , shiny to the surface has ;
- Elasticity low ;
- Hot job or purple in the morning will be ;
- Itching , pain or gravity with it passes ;
- Relapse to do inclined

Keloids to the surface arrival reasons ..

Keloid formation following factors reason will be :

1. Genetic tendency – collagen synthesis excess activity .
2. Hormonal factors – especially o'smile and pregnancy during the period .
3. Inflammation processes – acne , infections .
4. Injury wrong care – inflammation continue to be able to
5. Mechanical pressure or contraction – face muscles activity with related

Pathogenesis (development) mechanism).

Keloid tissue in the formation fibroblasts too much outside activity important role They are of type I and III . collagen excess in quantity working outputs . As a result tissue is normal



recovery instead of grow going scar harvest The skin is injured . then normal healing process following in stages passes :

1. Inflammation Phase – 3–5 days .
2. Proliferation phase – new fabric harvest to be
3. Remodeling phase – collagen again location .

In the case of keloid this third stage does not stop — fibroblasts collagen working to release continue it makes , that because of scar fabric growing up continue will reach .

Face soft tissue keloids treatment methods

Keloids in treatment complex approach important . Because the only one method many in cases again to grow stop The following main directions there is :

Conservative (drug) tools with) treatment .

- Corticosteroid injections (triamcinolone acetonide) – fibroblast activity reduces collagen working release reduces . 2–4 weeks in between one how many times is used .
- Interferons – immunomodulators impact shows collagen synthesis limits .
- 5-Fluorouracil - antimetabolic drug , fibroblast proliferation reduces .
- Silicone gel or plasters – wound on the surface pressure harvest scar of the fabric growth stops .
- Pressure therapy – special bandages or compression masks using .

Physicist methods

- Laser therapy (CO₂, pulsed-dye laser) – for scars excess fabric steams , smoothes , colors normalizes .
- Cryotherapy – liquid nitrogen keloid tissue using freeze to necrosis take is coming .
- Electrocoagulation – high temperature impact with the scar burn method .

Surgery treatment

Keloid extirpation (cutting out) take throw (most) radical method is considered , but it separately application recommendation not allowed , because relapse level up to 50–70% enough . This due to surgery intervention combined in a way is done :

- Excision + steroid injection ;
- Excision + radiotherapy ;
- Excision + silicone therapy .

Radiotherapy

Low dose X-ray or electronic radiation fibroblasts increase usually stops after surgery after 24 hours within 3–5 sessions consists of course is used . However face in the field radiation caution with is used because skin sensitive and It is thin .



Modern biomedical approaches

- PRP (Platelet-Rich Plasma) - own blood from plasma taken growth factors using tissues physiological again recovery.
- Laser-assisted drug delivery - laser through medicine article straight away scar to the fabric to absorb technology.
- Nanogels and biomaterials – new experimental methods.

Face in the field features

Face muscles and facial expression activity because of injury in place mechanic voltage high It will be . because keloids repetition danger more.

In treatment to the following attention to give necessary :

- Aesthetic lines according to cutting (Langer lines);
- Injury hygienic care ;
- From the sun protection (UV rays pigmentation increases);
- From surgery then compressive mask or silicone bandage application

Conclusion

Face soft tissue keloid scars medicine and aesthetics of the sectors intersected at the point standing current is a problem . Keloids not only external to look , maybe the patient's spiritual status , social adaptation also negative impact shows . This because of them in treatment medical , psychological and cosmetic approaches harmony important is considered .

Analyses this shows that the only treatment method keloids completely at a loss enough result does not give . Most effective approach – complex combinational treatment is a corticosteroid injections , silicone gel therapy , laser grinding , cryotherapy and PRP methods own inside It takes . methods together when used fibroblast activity decreases , collagen working release is balanced and aesthetic appearance will improve .

Face in the field keloids in treatment surgery intervention separately caution with application necessary , because relapse danger high . Same because of the operation then immediately preventive treatment — steroids injection , pressure therapy or radiotherapy recommendation is being done .

In the future keloids in treatment biotechnological approaches , e.g. , autologous cell therapy , gene therapy , anti -TGF- β drugs such as innovative methods important role plays . This methods fibroblasts activity genetic at the level management through pathological tissue growth limit is expected .

Conclusion as literally , face soft tissue keloid scars in treatment the most important factors of the following consists of :

1. Early diagnosis and individual treatment plan selection;
2. Combinational , step-by-step approach ;
3. The patient from injury next care and prevention according to complete information with to provide;
4. Aesthetic and psychological support on the road to put



So keloid scars with to fight is only medical problem not, maybe complex rehabilitation process then surgeon, dermatologist, cosmetologist and psychologist cooperation It is necessary.

References

1. Ogawa, R. (2017). Keloid and Hypertrophic Scars Are the Result of Chronic Inflammation in the Reticular Dermis . *International Journal of Molecular Sciences*, 18(3), 606.
2. Berman, B., & Maderal , A. (2018). Keloids and Hypertrophic Scars: Pathophysiology, Classification, and Treatment . *Dermatologic Clinics* , 36(2), 203–213.
3. Robles, DT, & Berg, D. (2007). Abnormal wound healing: Keloids . *Clinics in Dermatology*, 25(1), 26–32.
4. Al-Attar, A., Mess, S., Thomassen, JM, Kauffman, CL, & Davison, SP (2006). Keloid pathogenesis oath treatment . *Plastic oath Reconstructive Surgery* , 117(1), 286–300.
5. Atiyeh, BS, Costagliola, M., & Hayek, SN (2005). Keloid and hypertrophic scars: The pathophysiology and management . *Aesthetic Plastic Surgery* , 29(6), 516–531.
6. Thomas, A. (2020). Combined therapy of intralesional corticosteroids and silicone gel in facial keloids . *Journal of Dermatology Treatment* , 31(8), 855–861.
7. Mustafayeva, ZN (2023). Keloid scars in treatment complex approaches efficiency . *Uzbekistan Medicine Journal* , No. 5, 42–48.
8. Zaynutdinov, MS (2022). Keloid scars in treatment laser technologies place . *Medicine and aesthetics Journal* , No. 2, 45–52.
9. Uzbekistan Republic health storage Ministry (2023). In dermatology modern treatment methods according to methodological manual . Tashkent .
10. Manusciatti , W., Fitzpatrick, RE, & Goldman, MP (2002). Energy-based treatment of hypertrophic scars and keloids with the 585 nm pulsed dye laser . *Dermatologic Surgery* , 28(1), 30–37.
11. Shih, B., & Bayat, A. (2010). Genetic susceptibility to keloid disease: transforming growth factor beta (TGF b) and other gene involvement . *Journal of Plastic , Reconstructive & Aesthetic Surgery* , 63(9), 1532–1539.
12. Aluko-Olokun, B., & Olaitan, PB (2019). Prevention and management of facial keloids in surgical practice . *Nigerian Journal of Clinical Practice* , 22(6), 715–721.
13. Niessen, FB et al. (1999). On the nature of hypertrophic scars and keloids: A review . *Plastic oath Reconstructive Surgery* , 104(5), 1435–1458.
14. Gafurova , MN (2021) . Face keloid changes on the skin in treatment cryotherapy and PRP methods comparison analysis . *Medicine practice Journal* , No. 3, 57–63.
15. Kim, SJ, Lee, HJ, & Kim, YC (2020). Efficacy of combination therapy for keloids: a systematic review . *Lasers in Medical Science*, 35(8), 1639–1652.