What must be known about cosmetic dermatology procedures nowadays? We are witnessing an increase in the number of persons who visit beauticians, dermatologists, and plastic surgeons, hoping to improve their appearance. Considering surgery procedures for wrinkling, there are pros and cons. Beauty becomes a standard for human quality of life and professional attention is focused not only on "real" medical problems but also on physical appearance and cosmetic dimension. The dermatologic point of view in the field of specialized physician who favors the immediate care of patient in cosmetic dermatology is advocated. Photodermatoses require sunscreens, ichthyosis demands moisturizers, psoriasis patients need keratolytics and moisturizers, and vitiligo requires make-up, which should be made available by health insurers.

Appropriate consideration of the cosmetic part of all dermatologic treatments reminds us of the social rejection that dermatologic patients have faced in the past and today alike, as a significant part of the burden posed by skin diseases.

In contrast, the people who want to be rejuvenated and believe that cosmetic procedures can change their life undergo cosmetic procedures. In this category, especially in show business, women and men alike, including movie stars, with over-puffed lips, their skin unnaturally stretched across their cheeks, and weird vacant stare, there are real disasters of cosmetic procedures.

As clinical dermatologists, we daily encounter complications from injections of fillers (tissue necrosis, granulomas persisting for several months, purpura, etc.), patients with hypersensitivity reactions, hyperpigmentations after laser therapy and chemical peels, damage to the surrounding tissue such as scarring, burning, skin discoloration, redness and swelling after lasers. Botulinum toxin type A injections may cause severe headache and nausea (sometimes for 2 months).

Cosmetic procedures carry risks. Patients must be informed and advised to think carefully before choosing to undergo a treatment. Cosmetic dermatology procedures must be in the hands of a specially trained dermatologist, not a cosmetician. For example, alopecia can occur consequentially to some internal diseases and may require not only topical therapy (topical drugs, active cosmeceuticals) from a dermatologist who will manage the problem properly. Dermatologist will resolve dry and oily skin, eczema and sensitive skin, and a dermatologist specialized in the field of cosmetic dermatology is consulted to consider the cosmetic part of all dermatologic treatments.

In Croatia, cosmetic procedures are sometimes performed under disastrous conditions. The beauticians carry out some cosmetic procedures that should not be allowed (UV phototherapy, laser therapy, chemical peeling, e.g., with 40%-70% glycolic acids, Botox injections, dermoabrasion, etc.). Also, dermatologists should have proper education and valid certificates issued by authorities in the field (not only from companies) to perform any cosmetic procedure. What is our duty? Through continuing education medical courses we must organize education for our colleagues, whereas legality for non-academic persons to do the procedures in cosmetic dermatology should be banned by law. Although it may seem to be difficult to achieve in Croatia today, we should work hard on resolving this serious problem at all levels.

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