Amelioration of Body Odor After Intracutaneous Axillary Injection of Botulinum Toxin A

Body odor is a common phenomenon, most often noted in the axillary region where it is associated with axillary sweat secretion. Botulinum toxin A has previously been shown effective for treatment of axillary hyperhidrosis through chemodenervation of the eccrine sweat glands. Heckmann et al demonstrate that it may also ameliorate axillary odor, possibly through chemodenervation of the apocrine sweat glands.

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Low-Dose Thalidomide Therapy for Refractory Cutaneous Lesions of Lupus Erythematosus

The cutaneous lesions of lupus erythematosus may be chronic and quite disfiguring. Conventional first-line therapies include antimalarial agents and aggressive photoprotection. Thalidomide, an anti-inflammatory immunomodulator, represents a promising therapeutic option for those patients with refractory, antimalarial-resistant cutaneous lupus erythematosus. In this retrospective chart review, Housman et al confirm the efficacy of low-dose thalidomide in this clinical setting and further address the question of the optimal dosing regimen.

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Ultraviolet Radiation in Alpine Skiing Magnitude of Exposure and Importance of Regular Protection

As participation in outdoor alpine sports increases, the potential for exposure to damaging UV-A and UV-B radiation increases among the sporting population. Rigel et al used digital dosimetry at typical skiing elevations to demonstrate that alpine skiers are regularly exposed to measurable erythemogenic and suberythemogenic doses of UV radiation at levels that may increase their lifetime risk of cutaneous malignancies.

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Treatment of Toxic Epidermal Necrolysis With High-Dose Intravenous Immunoglobulins Multicenter Retrospective Analysis of 48 Consecutive Cases

Toxic epidermal necrolysis (TEN) is a rare, life-threatening disease manifested by rapid onset of sheetlike epidermal detachment. The primary event in TEN may be extensive Fas-mediated keratinocyte apoptosis. The low prevalence of TEN precludes randomized clinical trials, and no proven and widely accepted treatment exists. The observation that antibodies present in pooled purified human immunoglobulin block Fas-mediated apoptosis has led to the introduction of high-dose intravenous immunoglobulin treatment into the therapy for TEN. Prins et al offer further evidence that early infusion of high-dose intravenous immunoglobulin is safe, well tolerated, and likely to be of benefit in improving the survival of patients with TEN.

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The Actinic (Solar) Keratosis A 21st-Century Perspective

In this review, Fu and Cockerell reinforce the widening acceptance of actinic keratosis as an early cutaneous malignant process. Actinic keratosis is described as a clinical manifestation of UV radiation–induced neoplastic transformation of keratinocytes that is on a continuum that may extend to full-blown squamous cell carcinoma with the attendant morbidity and even mortality. A naming system is proposed that more accurately reflects the early malignant nature of this lesion.

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