

## From the Theory of Scar and Keloid Formation to Prevention and Treatment

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### Abstract

Keloids and hypertrophic scars can be defined as fibroproliferative disorders of the skin resulting from various factors that cause sustained or enhanced inflammation of the dermis, namely hypertrophy of the reticular layer of the dermis. After inflammation occurs in the skin and the wound healing mechanism is initiated in the reticular layer of the dermis, it is suggested that "tension on the wound" plays an important role in the enlargement of keloids and hypertrophic scars. Additionally, female hormones, hypertension, and genetic abnormalities are also known risk factors for keloids and hypertrophic scars. In the prevention of keloids and hypertrophic scars after surgery, it is important to suture in a way that does not apply tension to the dermis, and postoperative tape fixation is crucial. If postoperative inflammation is observed, it is recommended to immediately start using deprodone propionate plaster. In treatment, deprodone propionate plaster is the first-choice medication, but surgery and postoperative radiation therapy can also be used, as well as lasers, which are not covered by insurance. Understanding the individual aggravating factors for each patient and starting early prevention and treatment is essential for keloids and hypertrophic scars. Early use of deprodone propionate plaster can improve many cases of keloids and hypertrophic scars. Surgery and postoperative radiation therapy are good options for cases with suppuration or significant thickness.