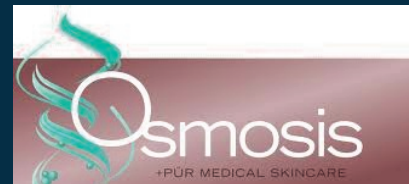


## this issue

Let us answer some questions you may have..

- What is a small cell tumour?
- Medical uses for Botox
- Osmosis Skincare



**Robert Toma**  
Warrnambool Plastic & Reconstructive Surgery

### What is a small cell tumour?

A middle aged lady presents to your clinic with a pink/purple nodule on her forearm. You excise the lesion and the pathologist reports it to be a small cell tumour. What does this mean?

Small cell tumours of the skin are rare but when diagnosed they are very important. They consist of a group of highly malignant tumours which, without appropriate treatment, has significant consequences for the patient.

The differential diagnoses for a small cell tumour are:

- Merkel Cell tumour
- Cutaneous lymphoma
- Small cell variant of melanoma
- Metastatic small cell lung tumour

Of these lesions, the most common is a Merkel Cell tumour. These often present in middle-aged/elderly people and have the appearance of a pink/purple nodule. They are highly malignant tumours which metastasize early and widely.

Merkel cell tumours require a wide excision margin with a sentinel node biopsy. Radiotherapy is essential post-operatively if the patient is to have a chance of avoiding recurrence.

Of all skin tumours, Merkel cell tumours are the most aggressive and fatal. They require early referral.

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### Medical uses for Botox®

The use of Botox (botulinum toxin A) has become very common in the Community. Most people associate its use with the treatment of facial ageing and wrinkles. However, Botox was first developed for the treatment of blepharospasm and strabismus in the 1970's. Since then, the medical uses for Botox have expanded to include a wide range of conditions.

Botox works by irreversibly inhibiting the release of acetylcholine at the neuromuscular junction (NMJ). Return of muscular contraction occurs by the growth of new nerve endings at the NMJ. This process is gradual and return of function is expected to occur over around 2-4 months depending on the muscle and dosage requirement. This is due to sustained atrophy of the muscle.

The medical uses for Botox offered at WPRS are in the treatment of:

1. Bruxism (teeth grinding). Bruxism often disrupts sleep and contributes to Temporomandibular joint dysfunction and migraines. Injections of Botox into the masseter muscle can dramatically improve these conditions, often more effectively than the expensive dental splints fitted for bruxism.
2. Axillary and palmar hyperhidrosis (sweating). Severe sweating is very effectively reduced with the injection of Botox into multiple axillary or palmar points. This has now become the gold standard in the treatment of hyperhidrosis. Due to the number of injections and Botox volume used, this treatment is generally performed under anaesthesia.
3. Migraines. Botox is becoming an increasingly useful adjunct in the management of Migraines. The masseters may be injected where bruxism is a contributor. Injection of trigger points (temporal and cervical) has also been shown to be effective.
4. Spasticity. Cerebral palsy and stroke patients may achieve dramatic improvement in upper limb function and cosmesis with Botox injection.
5. Facial asymmetry secondary to facial nerve palsy. Injection of the contralateral muscle aids in balancing facial symmetry.

**WPRS will be hosting another education event later in the year on**

**Facial Rejuvenation with Botox®.**

**Be sure to register early for this session.**



**DNA Repair + Growth Factor Technology**  
**Dermal Focus + Barrier Repair**

At WPRS, we offer medical grade skin products (Osmosis range) for the treatment of acne, rosacea/sensitive skin, hyperpigmentation and ageing effects/sun damage. Active ingredients include retinaldehyde (Vitamin A) and niacinamide (Vitamin B3), in an optimal vehicle to maximise absorption and thereby minimising dose (improving tolerability & affordability). The net effect of these products is to enhance the skin's natural remodelling effects.

