Using an Antibacterial Gel Treatment for Hair Growth during Scalp Surgery

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Introduction

The hair must be organized and arranged. In most cases, the hair is still there, which makes applying and maintaining the drape challenging. Additionally, improperly sanitized hair might increase the risk of infection. In light of this, the authors of the current study evaluated a technique for hair management in the operating room utilizing a sterile gel. Using a sterile medical gel as a hair styling tool, the hair surrounding the lesion can be arranged and reshaped to the appropriate shape prior to surgery. It is customary to leave the hair in place after surgery on a mass or scar on the scalp unless it is impossible to avoid doing so for safety concerns. The danger of an infection at the surgical site may rise, however, if the hair is not completely sanitized, and any remaining hair makes draping more challenging and time-consuming. Additionally, hair could fall into the surgical area while the patient is having surgery, necessitating a modification in the drape's location. Different approaches have been developed and are being used to address these concerns. A technique for minimizing surgical site infections by utilizing chlorhexidine-isopropyl alcohol as an antiseptic agent. This technique is remarkable because it made it simple to regulate hair in the surgical area, potentially reducing the risk of postoperative infections. A person can hold their hair in a particular style for several hours by using hairstyling products like mousse, gel, and wax. Similar property to hairstyling products, the viscosity of medical gel materials enables them to hold and style hair in a particular shape. This can be achieved by using any gel product with a specific viscosity level. Nevertheless, using sterile materials is essential in surgical settings in order to lower the risk of surgical site infections. There are several multi-purpose sterile gel products on the market, and lubricating gels are among the most user-friendly of these. A sterile lubricating gel was applied to the adjacent hair, much to how hairstyling products would be done, to generate the appropriate form after establishing a preoperative design for skin incision on the mass or scar.

After cleaning the surgical site and surrounding skin with chlorhexidine-isopropyl alcohol for skin preparation, the region that would be operated on was covered with a suitably sized cover or drape. Scars on the scalp can develop for a number of reasons, such as surgery, burns, infections, and direct trauma to the scalp. Scars are frequently unattractive and unpleasant to patients, which can have a variety of psychological and social repercussions. The majority of individuals with this issue who visit a hair restoration specialist's clinic have had hair restoration surgery (flaps, scalp reduction, donor site excision) performed incorrectly or utilising antiquated or obsolete techniques.

The larger, longer intermediate hair follicles are less noticeable than the smaller, shorter terminal hair follicles and their paler hairs (photographed under a dissecting microscope). Comparing human value, intermediate, and terminal follicles Different kinds of follicles were separated from human skin by microdissection, and they were then photographed under a dissecting microscope to highlight the variations in their diameter and pigmentation. Patients were instructed to clean the implant site twice or three times per week with keratolytic lotions (low concentrations of salicylic acid) and daily with antiseptic lotions (diluted quaternary salt-based). They were also instructed to report any symptoms or signs that they believed to be concerning right away. Use of irritants and extensive sun exposure were discouraged. When necessary, hair was cleaned with a neutral shampoo and dried by being blown with lukewarm air. Products to regulate sebum were applied as necessary. While autologous hair transplantation can be beneficial in rare occasions, it can also result in patchy growth and leave the second scar in the donor area of the occipital region. As an additional therapy, micro pigmentation may be helpful. If excellent results are to be obtained, it is difficult and takes a great deal of skill from the surgeon.

The sterile medical gel components that could be employed in this technique include medical lubricant gel, ultrasonic transmission gel, and electrical transmission gel. Despite being created for a variety of uses, medical gels are primarily composed of water, glycerin, propylene glycol, carbomer, hypromellose, and a minor amount of preservatives. These substances can be used to style and retain the hair in the right form since they have a particular degree of viscosity. Sterilized single-dose products have already entered the market; they are inexpensive and easily accessible in operating rooms. After regulating the hair, draping can be done quickly, safely, and easily by employing the technique explained in this article. In addition to lowering the risk of surgical site infections, this technique can assist in preventing hair from falling into the surgical field. The medical gels that can be utilized in this manner are also easily accessible and reasonably priced. The reason the authors of the current paper are offering this strategy is that it is practical and offers a variety of benefits.

When the patient has short hair, using this approach is challenging since it takes a lot of preparation time. Using gauze and a skin stapler to hold the hair in place during surgery may cause the hair to fall into the surgical area, necessitating further measures. However, the technique utilized by the authors of the present article makes it simple and quick to regulate the hair. In addition, this technique is simple to use regardless of the length of the hair, and it enables the hair to be controlled once more even while the procedure is being performed by simply reapplying the sterilized gel.