

# REFLECTIVE ACCOUNTS FORM

## FORM CPPD2

You must use this form to record *two* written reflective accounts on your CPD and/or practice-related feedback and/or an event or experience in your practice. Please fill in a page for each of your reflective accounts, making sure you do not include any information that might identify a specific patient, service user or colleague. Please refer to our guidance.

Please retain as evidence if requested by JCCP

### Reflective account: Case Review of Late-Onset Inflammatory Response to HA Filler

#### What was the nature of the CPPD activity and/or practice-related feedback and/or event or experience in your practice?

60 year old lady presented with lump 2 years after HA filler injection into glabellar area.

28/12/18 - Phonecall from patient - pt has had a reaction in the glabellar area - woke up with swelling and erythema, puffy eyes above and below just before christmas - swelling lasted about a week and now has reduced and less erythema but now there is a hard lump. Last botox was September 18. Last filler was over 2 years ago. It was teosyal deep lines in the glabellar area. No problems there until now.

31/12/18 - Erythema and swelling has settled a lot but still definite swelling there - no sign of acute infection, not hot, still slightly erythematous. Pt well in herself and afebrile.

Plan: Seek advice from complications expert as it would seem that it must be related in some way to the filler injected 2 years ago as in exactly the same place and no other obvious explanation. But no problems prior to this episode and is not consistent with granuloma. In the meantime, give one week of co-amoxiclav.

7/1/19 - Definite improvement but still lump is evident. Have liaised with Dr [REDACTED] complications expert, and he has suggested 4 days of dexamethasone orally (4mg daily) with antibiotic cover (clarithromycin 250mg bd for 7 days). He has seen this before with [REDACTED] deep lines. Review after this. If no improvement may need intra-lesional steroid.

14/1/19 - FaceTime review - lump almost completely gone - apparently quite rapid effect after starting Dex - redness settled too - v happy - to see as needed

#### What did you learn from the CPPD activity and/or feedback and/or event or experience in your practice?

This was a learning experience for me but overall I feel it was a positive one in the end. The patient was impressed with how I handled it and said she felt she was in safe expert hands for the whole journey. She didn't at any stage feel upset or angry. I think this was due to several factors: Good patient consent and information given beforehand, patient knowing I am a doctor and have plenty of

experience, patient knowing I liaised with an international expert on the matter, good regular follow-up and the patient knew she could contact me at any stage with any concerns.

I had actually already started using less of these more 'old-fashioned' HA fillers anyway since treating her 2 years ago due to the improved newer 'RHA' fillers (teosyal) and I just found them nicer to inject with, although nothing specific had happened until this problem. Dr ●●●● reported to me that this is not the first time he has seen this with the ●●●● deep lines filler and this has made me actually stop using it completely now. I am always very cautious anyway injecting into the gaballar area, and would normally only inject very superficially with a much lighter filler eg RHA 2 but this patient had a very deep groove and I felt at the time that it needed the deep lines. I'm now also looking at trying belotero as a brand but am continuing to use the teosyal RHA fillers currently.

### How did you change or improve your practice as a result?

This was my first proper HA filler complication after practising for 9 years. It has been a very good learning exercise for me and has changed my practice and also given me confidence in dealing with any future complications.

### Please describe how this is relevant to your modality or your scope of practice, and patient safety, care or experience?

e.g. Dermal fillers and patient safety. Consent and patient understanding.

Dermal fillers, recognising and managing complications, even when very delayed.

Patient safety – change of HA filler as a result, knowing what to do if happened again in the future, improved consent information as a result

### Sources of learning

Dr ●●●● – complications expert – I liaised directly with Dr ●●●●

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5889432/>

<https://aestheticsjournal.com/feature/granuloma-management>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5840246/>

<https://www.sciencedirect.com/science/article/pii/S2352241016000050>