Botulinum toxin injection for masseter muscle hypertrophy

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The masseter muscle is a quadrangular muscle that covers the mandibular Ramus and coronoid process. It has both superficial and deep heads. The reduction of the superficial head of the masseter muscle improves the contour of the lower face while having a minimal effect on the mastication or temporomandibular joint function. Injection of Botulinum toxin into the masseter muscle results in a chemical denervation at the neuromuscular junction. The ensuing muscle atrophy reduces the bulkiness of the lower lateral face and gives a soft round contour to the lower face.

Experience with ivermectin in treatment of scabies and Pediculosis capitis

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Many medications are available for treatment of scabies and Pediculosis capitis including ivermectin. We compared the efficacy and safety of topical versus oral ivermectin in treatment of scabies and Pediculosis capitis. A total of 62 patients with uncomplicated scabies and 62 patients with head lice infestation were included. Each group was further subdivided into: Group I received single topical application of 1% ivermectin and Group II received single dose of oral ivermectin. Treatment was repeated after one week for non responders and patients were evaluated weekly for 4 weeks. The clinical responses as well as side effects were reported weekly. The results of this study show that both topical and oral ivermectin demonstrate high efficacy and tolerability in treatment of scabies and Pediculosis capitis. However, a single treatment of Pediculosis capitis with topical ivermectin provides significantly higher cure of infestation and faster relief of pruritus than oral ivermectin. In addition, whether topical or oral ivermectin is used to treat scabies or head lice, a second dose is required in some cases to ensure complete eradication.