

KECORT STUDY: AN INTERNATIONAL E-DELPHI STUDY ON THE TREATMENT OF KELOIDS USING INTRALESIONAL CORTICOSTEROIDS IN CLINICAL PRACTICE

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Running Title

KECORT study: an international e-Delphi study on the treatment of Keloids using intralesional CORTicosteroids in clinical practice

BACKGROUND

Keloid management, specifically intralesional corticosteroid administration (ICA) as a first-line treatment, faces significant variability in global clinical practice. This hinders comparability of treatment results, underscoring the need for universal treatment guidelines to standardize ICA and enhance consistency for clinical practice.

OBJECTIVE

To reach consensus on the different aspects of ICA using hypodermic needles in keloids among an international group of dermatologists and plastic surgeons specialized in keloid treatment.

MATERIALS AND METHODS

The keloid expert panel of twelve dermatologists and eleven plastic surgeons rated 35 statements. Two e-Delphi rounds were held, both with a response rate of 100%. Fifteen (65%) keloid experts participated in the final consensus meetings. Consensus was defined as $\geq 75\%$ of the participants choosing 'agree' or 'strongly agree' on a seven-point Likert scale.

RESULTS

Consensus was reached on 25 statements concerning treatment goals, indication for ICA, triamcinolone acetonide (TAC) 40 mg/mL as the preferred corticosteroid, at a maximum of 80 mg per month to avoid systemic adverse effects, and at suggested intervals of four weeks. Consensus was also reached on minimizing pain during ICA, the general use of 1 mL syringes and 25 or 27 Gauge needles, blanching as endpoint of successful infiltration, caution of not injecting subcutaneously, and the option of creating multiple passes in very firm keloids prior to infiltration allowing better deposition of the corticosteroid within the needle tracts. Consensus could not be reached on TAC dosing per specific area or volume of keloid, adequate methods of prior local anesthesia, and location of injection in the keloid.

Conclusion

This e-Delphi study provides important clinical recommendations on essential aspects of ICA in keloids. By implementing these recommendations, uniformity of ICA in keloid treatment will increase and treatment results will become more comparable. Additionally, better treatment results may be achieved.