Keloid scar

This leaflet explains what a keloid scar is and what causes it, and provides information on the available treatments. If you have any further questions, please speak to a doctor or nurse caring for you.

Patients with keloid scars can be treated in either the dermatology department or the plastic surgery department.

What is a keloid scar?
Keloids are a common problem. They are an overgrowth of scar tissue that can develop after skin trauma, for example ear piercing, acne, chicken pox, surgery or immunisation. Even a small cut while shaving can be enough to cause a keloid in people who are prone to it.

What does a keloid look like?
Keloids look like exaggerated scars which grow beyond the limits of the original skin damage. They can be raised, lumpy or domed. They usually feel hard and rubbery to the touch, and appear shiny and hairless. Most people with keloids have only one or two, but some people may have many due to acne or chickenpox.

Why did I get a keloid scar?
We do not know why some people develop this type of scarring and others do not. Keloids are not infectious and are more common in people with darker skin, although all skin types can be affected. They affect men and women equally, and usually appear between the ages 10 and 30. Keloids may also run in some families.

Keloid scars tend to occur in places that are under tension, such as the back, shoulders and chest, or after trauma that has become inflamed or infected, for example spots or tattoos. Very rarely, keloids spontaneously occur without a history of trauma.

What treatments are available?
The standard treatment is usually an injection of a corticosteroid called triamcinolone acetonide (TAC) into the keloid which may help it to flatten. You can find more information about the TAC in our leaflet, Triamcinolone acetonide (TAC) for keloid scars. Please ask a member of staff for a copy if you have not received one.

Other treatments, such as freezing with liquid nitrogen, may also stop early keloids from growing. Using a silicone gel sheet or long-term pressure with compression bandages can also be useful.

Treatment with a pulsed dye laser can reduce the redness of some keloids, but it does not make them smaller.
Keloids can also be removed surgically or with CO2 laser. However, there is a risk that they may come back, and may end up larger than they were before. This risk is reduced slightly if the area is treated after the operation with pressure dressings and TAC steroid injections.

Some of these treatments are only available in specific departments. Please ask your consultant or nurse if you require more information on any of the available treatments.

**What happens if I do not get treatment?**

Some keloids stay as they are and do not get any bigger, whereas other keloids continue to grow and become more irritating. Unfortunately, it is difficult to predict what a keloid is going to do over time.

**Is there anything I can do to help myself?**

You have an extra risk of getting a keloid if you have had a keloid before, other members of your family have had them, or you have dark skin.

With keloids, prevention is better than cure. If you are at risk, you should avoid tattoos or body piercing. If you have acne, see your doctor to make sure it is treated to limit the risk of scarring. You should avoid having skin surgery for cosmetic purposes.

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**Contact us**

If you have any questions or concerns about your treatment with TAC injections, please ring 020 7188 6284 (Monday to Friday, 9am to 5pm). Please leave a short message, including your name and telephone number, on the answerphone and someone will get back to you as soon as possible.

This is not an emergency service. In an emergency, please contact your GP or go to your local A&E department.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.guysandstthomas.nhs.uk/leaflets](http://www.guysandstthomas.nhs.uk/leaflets)

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**Pharmacy Medicines Helpline**

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

**t:** 020 7188 8748 9am to 5pm, Monday to Friday

**Patient Advice and Liaison Service (PALS)**

To make comments or raise concerns about the Trust’s services, please contact PALS. Ask a member of staff to direct you to the PALS office or:

**e:** 020 7188 8801 at St Thomas’      **t:** 020 7188 8803 at Guy’s      **e:** pals@gstt.nhs.uk

**Language Support Services**

If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.

**t:** 020 7188 8815      **fax:** 020 7188 5953

**NHS Choices**

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

**w:** [www.nhs.uk](http://www.nhs.uk)