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Maximizing the Efficacy of Using Ablation and Resurfacing of the Skin to Treat C-section Scars

Caesarean section (C-section) is a common procedure; approximately one third of all births in the United States are done using C-sections, and every year the rate of this procedure is increasing. C-sections leave an abdominal surgical scar that may be accompanied with pain, tenderness, rigidity, and itching. Furthermore, the existence of an abdominal scar can potentially have a negative effect on long-term quality of life. Patients looking to treat this type of scar are generally concerned with the overall level of discomfort the treatment presents (especially as the focus of treatment resides on a vulnerable area of the body), the potential downtime post-treatment, and any possible side effects. An effective option to treat abdominal scarring is the Venus Viva[™] MD NanoFractional Radio Frequency (RF) device. The device can be used in all skin types, as the radiofrequency energy is produced by an electric current rather than a light source. It is not scattered by tissue or absorbed by melanin, making it possible for patients with Fitzpatrick skin types V and VI to benefit from treatment. I choose the Venus Viva[™] MD NanoFractional RF[™] device in my clinic due to the combined ease of use compared to lasers and the safety efficacy profile of the treatment. I can deliver exactly the amount of energy needed for a given scar by selecting voltage and pulse-width independently to adjust the treatment per scar with the desired combination of ablation and coagulation. Treatment time ranges from 10-15 minutes and I typically use topical numbing cream to manage any discomfort during treatment. Another advantage of the system includes the ergonomic, quiet, and compact design, as well as a straightforward treatment pattern.

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As these types of scars are often thick and with strong adhesions to the underlying fascia, my goal is to have an increased depth of energy delivered into the tissue to maximize ablation. To treat these C-section scars, I generally work with a setpoint of parameters at 260-280 V and a pulse width at 25-28 ms. The higher voltages maximize ablation, while the longer pulse duration maximizes coagulation. During the initial treatment I start with parameters at the lower end of the device output and assess skin reaction 48 hours after treatment. If skin type, post-treatment reaction and patient feedback regarding discomfort allow, I then raise power with each subsequent treatment. I inform my patients during the first assessment that depending on scar initial status and response, as well as skin type, 3-6 treatments are typically necessary to achieve the desired change in the C-section appearance.



We tested the effectiveness and safety of the treatment of post C-section surgical scars with the Venus Viva[™] MD device in a large clinical trial for the last 2 years in our clinic, with the results soon to be published in a peer-reviewed journal. All physicians involved in the study were pleased with the results. Feedback from our patients has been so positive that we nowadays include the Venus Viva[™] MD scar treatment regime as a standard postoperative treatment for many of our surgical procedures. Aesthetic practitioners are in a unique position to help women regain their self-confidence following childbirth. Non-invasive treatments, such as the Venus Viva[™] MD, effectively addresses these difficult to treat areas. The Venus Viva[™] MD allows for fast treatment time, flexible parameter ranges, and optimal treatment results.