

*Editorial*

In this issue, an interesting paper published by Dr Dziki and coworkers showed the effects of natural components on acne treatment and some possible anti-inflammatory activities related to different flowers and leaves. What is interesting in this paper is that there is an evident differentiation of leaves and flowers; in particular, the association with aloe barbadense leaf and arnica flowers is interesting. This paper is clearly taking the reader to understand the value of well-known flowers, seeds, and leaves in treating chronic, inflammatory skin disorders.

The paper by Dr Kage and coworkers has described a novel treatment with a vibratory device for acne. It is interesting to note how physical treatments are interested in treating acne instead of chemical treatments; this is quite a new adventure compared to the past approach. In this case, the treatment is a vibration treatment with a unique device, and the results look of great interest to clinical practice.

A Letter to the editor, written by Dr Tammaro and coworkers, focuses on the paraneoplastic bullous pemphigoid issue. Clinicians already explore this well-known disorder in different places. What makes this case interesting is the question: of whether bullous pemphigoid was related to internal cancer or if it was related to monoclonal antibody therapy against cancer which affected the patient; this is a fascinating question which opens new horizons to bullous pemphigoid induced by drugs and paraneoplastic bullous pemphigoid.

Prof. Amori and coworkers describe an interesting new approach for treating localized adiposis. It is a physical treatment which is safe and effective. This letter to the editor opens a new window for treating localized adiposity.

Urinary incontinence may become a major problem for the patient's quality of life and possible infective and inflammatory disorders of the area related to the incontinence of urine. In this paper, Dr Cattaneo and coworkers show how natural cotton material may represent an old and new approach for minimizing this problem safely and effectively.

Dr Martinez Grau and coworkers bring an interesting comparative study with topical treatments for coping with bruises after blepharoplasty; this is quite an interesting paper which opens new chances for patients who sometimes cannot show up in society and have to limit their own private life because of bruises which can last up to 4 weeks. According to this paper, different ingredients can solve the problem in terms of minimizing the time of bruising after blepharoplasty.

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