

Thank you very much Shirley, Maxine and Kathie and good afternoon ladies and gentlemen. Thank you also for listening to our various “potted” histories – it really is fascinating to discover exactly what brings so many people from such diverse backgrounds together, to contribute their wisdom and experience to the Cochrane Collaboration.

Kathie Godfrey, who many of you will have already met at various Colloquia and other Cochrane events, has told you today of her journey to Cochrane, which started with the malignant melanoma and was indeed a tough and troublesome one, strewn with unknown dangers and unexpected pitfalls. For me, Kathie is so much more than a fellow Cochrane consumer – she’s my Mum! What nobody can prepare you for when initially diagnosed with malignant melanoma is the feeling of terror that something like this can bring into your life. I know this because for several years I watched my mother slide from a positive, gregarious and happy-go-lucky woman into someone who was truly frightened that her life was going to be snatched away from her by a stealthy, sneaky disease that nobody outside the medical profession knew much about. Fortunately for us all, she survived all that the mole had to throw at her and we can all enjoy her enthusiasm and exuberance to the full once more!

My own interest in the skin began as a little girl with my fascination for cosmetics, creams and potions of all types and which eventually lead me to study Beauty Therapy at college in the North East of Scotland. Contrary to popular opinion, Beauty Therapy is so much more than learning how to apply lipstick and nail polish! The science of Beauty Therapy covers organic chemistry – I know the difference between hydrocarbons and carbohydrates and have even made soap and moisturisers in the laboratory (eat your heart out Estee Lauder). It also involves the study of anatomy and physiology, in-depth study of the skin and learning how to recognise it’s diseases and disorders with even a hefty helping of physics and electric current thrown in for good measure! As a result of this learning I became more and more interested in the actual ingredients that went into the various lotions and creams and the more I learned, the more I became convinced that we, the consumers, were being fobbed off with inferior ingredients whose only saving grace was the expensive and attractive packaging in which they were sold!

So, how did I go from there to Cochrane? Well, as mother’s often do, mine kept on suggesting that I should volunteer to be a consumer for the Skin Group but I wasn’t sure that I would have anything valid to offer such an erudite organisation. However, Mum got her way in the end (as mothers often do) and I was signed up to act as consumer referee for a protocol on the subject of “Topical application of Vitamin A cream for Nappy Rash”. Since then I have become a member of several Cochrane groups and have found myself commenting on reviews ranging from “Chinese Medicinal Herbs for Influenza” to “Propofol for procedural sedation in adults by emergency physicians”. Needless to say, I am not an expert on any of these subjects, but I see my job as a consumer as being able to read the content and advise as to whether it is easy to understand for the non-medical reader and eliminate, as far as is possible, any jargon and overuse of technical terminology, especially in the abstracts and synopses.

In reality, my work with Cochrane has made a huge difference to the way I view my own health and the rationale behind the use of many interventions that are prescribed and on offer. Recently, this has led me to question a number of the more radical and invasive “beauty treatments” which are available to us today – some only available through delivery by a qualified medical practitioner. Botox, for example, one of the most poisonous substances known to man, is injected into the muscle to render it temporarily unable to contract. It was originally used for treating crossed eyes and uncontrollable blinking and can also be effective in treating dystonia and excessive axillary sweating but has more recently become extremely popular within the beauty industry for its effectiveness in eliminating facial lines such as crow's feet and frown lines. The effects of Botox are temporary and repeated injections are necessary to maintain the effect. But what are the long term effects of Botox injections? There have been some dreadful cases reported where Botox in its most harmful form has been sold over the internet for “home use”. People have become extremely ill with paralysis and breathing disorders which have led to long term health disorders and possibly even death.

Skin fillers come in two forms – temporary fillers most often made from bovine collagen and permanent fillers, which are made from non-absorbable materials. For example, one of the newer permanent injectable skin fillers is **polymethylmethacrylate**, made from a mixture of micronized plastic spheres and bovine collagen. When polymethylmethacrylate is injected into the skin, the collagen works by holding the synthetic spheres in place until it dissipates after injection - leaving the spheres behind to prop up the wrinkles. These spheres stimulate the body's own production of collagen, which then forms around the spheres. Sounds OK but imagine the problems if a) an adverse reaction was to occur or b) if the filler was not injected accurately! From what I have read, FDA approval has been granted for such substances but NOT for use over a prolonged period and yet repeat treatments are being offered to the consumer on an unlimited basis.

Other treatments such as glycolic acid peels, microdermabrasion etc. all promise more youthful skin but the price of this is severe skin damage en route! I would advise anyone to be very wary of undertaking any such treatment because I do not believe that enough research has been done on the **long term** effects of these interventions. I realise that these interventions are not directly related to skin diseases and disorders but prolonged use of them has not been rigorously investigated nor have clinical trials been undertaken. Today's quest for eternal youth and beauty could well be tomorrow's health problem.

Once again, thank you for listening and we bid you a fond “hasta luego”.