

Preface  
The clinical use of botulinum toxin



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*Guest Editor*

The interest in botulinum toxin and its many uses has increased exponentially in recent years; especially since the approval of Botox Cosmetic for the treatment of glabellar lines. In fact, Botox, which was virtually unheard of to many just 5 years ago, has become a household name. This increased popularity has been a truly amazing process to behold. Facial wrinkles are frequently caused by repeated muscle contraction. Botulinum A exotoxin can produce weakness or paralysis of these muscles and offers a novel approach for the treatment of certain facial rhytides. The disappearance of wrinkles through the paralysis of these muscles, although temporary, is extremely popular with both patients and physicians. There is a very low incidence of side effects and it is a relatively easy technique to acquire. For these reasons, botulinum toxin A has gained rapid and enthusiastic acceptance.

Experience since the worldwide approval of the first therapeutic botulinum-neurotoxin based product in 1989, Botox, has shown that this therapeutic agent is safe and effective for numerous indications, including movement disorders. Subsequently, another botulinum toxin type A complex, Dysport, was approved in the United Kingdom in 1991, but is not currently available in the United States. There is also a type B complex preparation, Myobloc, which is approved by the Food and Drug Administration for cervical dystonia patients.

In addition to its previously noted off-label cosmetic indication, Botox in all likelihood will be shown to be safe and effective in placebo-controlled studies for a wide range of medical conditions including achalasia, dysphonia, cervical dystonia, cerebral palsy, chronic anal fissures, migraines, and hyperhidrosis.

There are numerous reasons for this phenomenal explosion of interest. The rapid thrust of Botox into the limelight has brought with it an influx of novice injectors, increasing the possibility of unwanted complications. It has also brought a plethora of new uses, which are being discovered everyday. I believe it is important to bring together many of the most experienced and knowledgeable people in the field to share their experience and knowledge with those who are just beginning to get involved with this material. This issue of *Dermatologic Clinics* comprises a comprehensive look at the subject. All of us, the novice user and the highly experienced, can increase our knowledge from reading these articles.

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