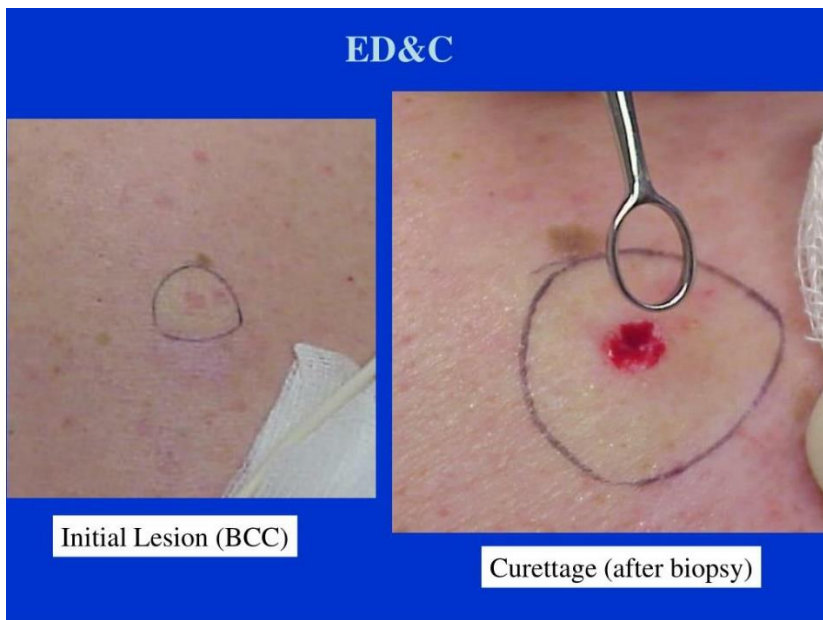
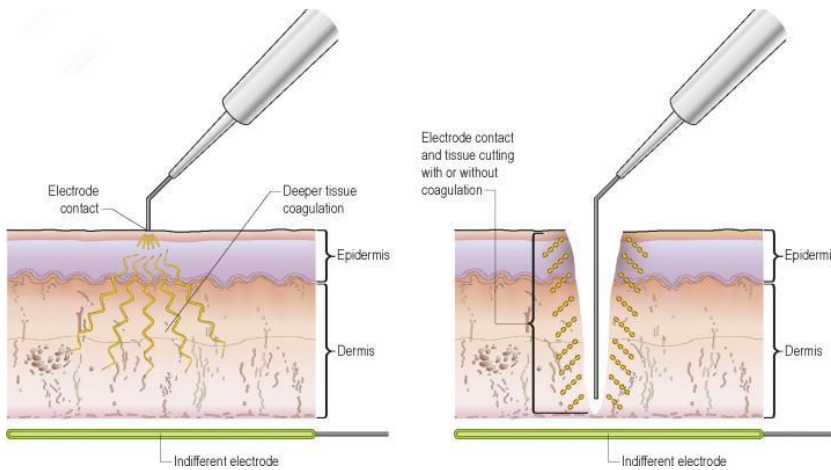


Electrodessication & Curettage

What is Electrodessication & Curettage (ED&C)?

Electrodessication & Curettage (ED&C) is a common in-office procedure used to treat certain **superficial, low-risk skin cancers**. Your dermatologist **scrapes** away the lesion with a specialized instrument (a *curette*) and then uses a controlled electrical current to **dry/cauterize** the base to help destroy remaining abnormal cells and control bleeding. The scrape-and-treat cycle is often repeated during the same visit.

Key point: ED&C typically **does not require stitches** and heals naturally over several weeks.



What conditions is ED&C used for?

ED&C is commonly used for **small, superficial basal cell carcinoma (BCC)** and **superficial squamous cell carcinoma (SCC)** in appropriate locations. It may also be used for some **precancerous lesions** in select situations.

Your dermatologist will recommend ED&C only if it's a good match for the **type, depth, location, and risk level** of your lesion.

What to expect during the procedure

Most ED&C treatments are done in the office with local numbing:


1. **Clean & numb the area** (brief pinch/burn with numbing medicine)
 2. **Curettage:** the lesion is gently scraped away
 3. **Electrodesiccation:** the base is treated to control bleeding and treat remaining cells
 4. Steps 2–3 may be repeated during the visit
 5. A **bandage** is applied, and you'll receive wound care instructions
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Pre-Op Instructions (Before ED&C)

Before your appointment

Please tell us if you:

- Take **blood thinners** (including aspirin, warfarin, clopidogrel, apixaban, rivaroxaban, etc.)
- Have a bleeding disorder or bruise easily
- Have allergies to **lidocaine**, antiseptics, or adhesives
- Have a pacemaker/defibrillator (rarely relevant, but important to note)

 **Do not stop prescribed blood thinners** unless your prescribing clinician instructs you.

One week before

- Stop drinking **alcohol** (due to blood thinning effect of alcohol)
- Stop smoking
- stop fish oil supplement
- avoid optional aspirin and NSAIDS: **Ibuprofen** (Advil®, Motrin®), **Naproxen** (Aleve®), **Aspirin** (Bayer®), etc...

Day of procedure

- **Eat normally** (no fasting needed unless we specifically instruct you)
 - Take your regular medications unless told otherwise
 - Wear comfortable clothing that allows easy access to the area
 - Avoid lotion/makeup directly over the site (especially face/scalp)
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Post-Op Instructions (After ED&C)

ED&C heals by “**secondary intention**,” meaning the site heals from the bottom up and edges inward. Expect a scab and gradual healing over the next few weeks.

First 24 hours

- Keep the bandage on and **keep the area dry** (unless instructed otherwise)

Starting after 24 hours (daily wound care)

1. Wash hands
2. Gently clean with mild soap and water
3. Pat dry
4. Apply a thin layer of ointment **as instructed**
5. Cover with a clean bandage

Continue daily until the site is healed.

What’s normal during healing

- Mild redness around the area
- Tenderness/soreness for a few days
- A scab or yellowish film (often part of normal healing)

Bleeding

If bleeding occurs:

1. Apply firm pressure for **15 minutes** without checking
2. Repeat once if needed
3. If bleeding continues after 30 minutes, contact the office

Avoid until cleared

- Swimming, hot tubs, baths (soaking)
- Picking the scab (can slow healing and increase scarring)
- Heavy friction over the site

Call us if you notice

- Increasing redness, warmth, swelling, pus, fever
 - Worsening pain after the first day
 - Bleeding that won't stop with pressure
 - Red streaking from the wound
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Will there be a scar?

ED&C usually leaves a **flat, round or oval scar** that may look lighter or slightly different in texture than surrounding skin. Over time, many scars fade and become less noticeable.

Where ED&C fits in our services

Category: 📍 **Skin Cancer & Precancerous Conditions** and **Mohs & Dermatologic Surgery**

ED&C is typically used for **select low-risk lesions**—your dermatologist will recommend the best option for complete removal and cosmetic outcome.

ED&C FAQ

Does ED&C hurt?

The area is numbed with local anesthetic. You may feel pressure or scraping, but you should not feel sharp pain during the procedure.

How long does ED&C take?

Often **10–20 minutes**, depending on the size and location, plus time for numbing and instructions.

Will I need stitches?

Usually **no**—ED&C typically heals without stitches.

How long does it take to heal?

Healing varies by location and size, but many sites heal over **several weeks**.

When is ED&C NOT a good option?

ED&C may not be recommended for deeper, higher-risk tumors, or for certain locations where margin control or cosmetic outcome is especially important. Your dermatologist will guide you based on your diagnosis.

What if the cancer comes back?

If a lesion recurs, additional treatment (often surgical excision or Mohs surgery) may be recommended depending on the site and pathology.

Can I exercise after ED&C?

Light activity is usually okay, but avoid strenuous exercise or stretching the area for the timeframe your clinician recommends—especially if the site is on the back, shoulders, or legs.

Is ED&C covered by insurance?

Often yes when performed for medically necessary treatment (such as skin cancer). Coverage varies by plan—our office can help you check benefits.