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173 A Patient with Chronic Inflammatory Demyelinating Polyneuropathy Associated with an Intracranial Plasmacytoma Yong Seo Koo, MD, Byung-Jo Kim, MD, PhD

On the Front Cover: A large and painful anterior chest wall keloid extends over the sternum and under the breasts bilaterally. The hypertrophic and hyperpigmented scar area had a midline (presternal) portion 12 cm long branching from the midline scar. There were extensions under the breasts 12 to 14 cm on both sides. The scarring was from a breast reduction surgery and an aortic aneurysm repair. The patient reported that previous treatments, including multiple injections into the scar with bupivacaine and triamcinolone, provided no pain relief. The patient was informed of various treatment alternatives and chose injection of Botulinum Toxin Type A. Upon follow-up 5 weeks after injection, the patient reported significant improvement. See case report by Uyesugi et al. in this issue.