Tattoos

Marked for life

Tattooing appears to be achieving social respectability, particularly among young women. Various international celebrities are publicly displaying tattoos, even Eddie Grundy has been exhibiting his new design in *The Archers* on national radio. The appeal of these personalities is predominately to young adults, who have come to regard tattoos as fashionable.

Tattoos have been practiced for centuries. Madonna has tattooed her forearms. The scar may give a poor cosmetic result, the patient may be able to pass it off as the result of previous injury. Tattoo artists offer a removal service using either overtattoowing or another design or tattooing tannic acid or "Milton" (hypochlorite) into the area to induce a partial thickness burn. They will treat only small areas.

Plastic surgeons and dermatologists use two techniques. They either produce a controlled partial thickness burn (usually healing within three weeks) by salt abrasion, applying trichloracetic, formic, tannic, or nitric acids, or with liquid nitrogen. Or they surgically remove the pigment by dermabrasion, by tangential excision with or without split skin graft, or through full thickness excision with tissue expansion, direct closure, or split skin grafting. Carbon dioxide, argon, ruby, and dye tunable lasers and infrared coagulation have all been used. For blue-black tattoos the ruby laser gives the best combination of pigment removal and residual scarring, but at present machines and—more importantly—expertise are not widespread in either the public or private sectors.

Whether the removal of tattoos is a procedure that should be provided by a severely cash limited health service is open to debate. Careful analysis of the costs and benefits is needed. We may all come to regret past indiscretions. Those who request tattoo removal are generally well motivated and, if the service is not available on the NHS, they may become victims of unscrupulous private practitioners in the private sector.

While a person has a right to be tattooed, the risks of the procedure and its permanence should be highlighted by health education campaigns aimed particularly at young adults. Improved policing of the law, tighter restrictions on the sale of tattooing equipment, and closer monitoring of advertising standards and clinics involved in tattoo removal are all required. If customers wish to be marked for life the risks involved both in being tattooed and having a tattoo removed should be minimised.

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3 Tattoo marks on minors [editorial]. BMJ 1969;ii:44.