

## INTRODUCTION

Keloids and hypertrophic scars are characterized by excessive deposition of dermal collagen with resultant scar tissue. A keloid scar is benign, non-contagious and sometimes accompanied by severe itching, sharp pains and changes in texture. In severe cases, it can affect movement of skin and may ulcerate. The probability of recurrence of keloids after surgical removal is high, usually greater than 50% (**Harunari et al., 2008**).

Five-Fluorouracil (5-FU) is a pyrimidine analogue, which is used in treatment of cancer. It is also used in ophthalmic surgery, specifically to augment trabeculectomy in patients deemed to be at high risk for failure. 5-FU acts as an anti-scarring agent in this regard, since excessive scarring at the trabeculectomy site is the main cause for failure of the surgery (**Rothman et al., 2000**). Some trials have used 5-FU topically for treating hypertrophic scars and some types of basal cell carcinomas of the skin (**Steinkraus & Boer, 2006**). Other studies had used 5-FU intralesionally in treatment of keloids and hypertrophic scars alone or mixed with triamcinolone acetonide. The latter is thought to decrease pain and inflammation (**Davison et al., 2009**).

Bleomycin is a glycopeptide antibiotic that is widely used as an anti-cancer agent. The drug is used in the treatment of Hodgkin lymphoma, squamous cell carcinomas and testicular cancer, as well as in the treatment of plantar warts (**Lewis & Nydorf , 2006**). Also, bleomycin has been tried intralesionally to treat keloids and hypertrophic scars. The commonest complication of bleomycin injection was hyperpigmentation, which was seen in 75% of patients (**Saray & Güleç, 2005**).