

Fillers Changing Cosmetic Approach

BY TIMOTHY F. KIRN
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LAS VEGAS — The new approach in the cosmetic treatment of the aging face is to look beyond simply using fillers for wrinkles and to think about restoring volume in the upper face and cheeks, Dr. W. Philip Werschler said.

"We are moving from using fillers as wrinkle and line fillers, to facial shaping agents," said Dr. Werschler, at the annual meeting of the American Society of Cosmetic Dermatology and Aesthetic Surgery. "And we divide the face into facial treatment zones in which certain facial shaping agents might be more suited."

A young face, from below the eyes, has an inverted triangle shape with the broad base of the triangle extending across from the top of the malar zygomas and the point extending down to the mentalis mentalis of the chin. As the face ages, the volume descends. Jowls form and muscle atrophies, and the face takes on an upright

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triangle shape with the sides framed by the marionette lines and the top at the narrowing of the nasal bone, said Dr. Werschler, who has a private dermatology practice and conducts research in Spokane, Wash.

In a recent study, researchers performed dissections on the faces of 30 cadavers, and found that the subcutaneous fat in the face is divided into distinct compartments. Malar fat, for example, is divided into three compartments. The researchers also suggested that the different compartments of fat in the face probably change differently with age, with the divergent fat pads changing location and proportion (Plast. Reconstr. Surg. 2007;119:2219-27).

A short while ago, there was a limited repertoire of fillers, said Dr. Werschler. One could use a temporary filler (bovine collagen) or a permanent filler (silicone). Now there is a broad palette of fillers, with properties that defy easy classification, such as poly-L-lactic acid (Sculptra) and calcium hydroxylapatite microspheres (Radiesse). Poly-L-lactic acid can be molded and shaped under the skin for a short while after injection, while calcium hydroxylapatite stimulates collagen growth around the implanted material and persists for over a year. Both can be used to build volume and they last much longer than collagen.

A "facial shaping artist" will plan out the rejuvenation procedure by taking into account the different properties of fillers, he said. The plan should be informed by the triangle concept, and by the concept that the face has three zones. The top zone extends roughly from the hairline to the upper eyelids. The middle zone goes roughly from the eyebrows to the upper lip. The bottom zone falls roughly from the base

of the nose to include the anterior neck.

The goal should be to create balance and symmetry within each zone, and balance and proportion between the zones. The treatment concept embracing these ideas is known as RAVE, or regional aesthetic volume enhancement.

Many simply look to reduce nasolabial folds, oftentimes injecting too much and concentrating on just that one area. Patients may have fewer lines, but they can lose balance and proportion between the

zones and can end up looking like "someone who has just stepped off the set of 'Planet of the Apes,'" he said.

"You have to look at facial balance," Dr. Werschler said. "Our approach now has to be more about global balance of the face. Lines and wrinkles do not necessarily define someone's age."

Dr. Werschler has served as a consultant to many companies, including Sanofi Aventis, maker of Sculptra, and BioForm Medical Inc., maker of Radiesse. ■

VERBATIM

'These are very stingy blueberries, typically. You're not looking for big, plump blueberries. They are teeny blueberries, almost more like currants in the skin.'

Dr. Ilona J. Frieden, on the small purpuric lesions seen in 'blueberry muffin' babies, p. 37

Advertisement



Hydrogel: A moisturizing vehicle patients prefer in the treatment of atopic dermatitis

Atopic dermatitis (AD) is a chronic condition that often starts in childhood and may continue throughout adulthood with periods of remission and flare-ups. While topical corticosteroids are the mainstay of treatment for AD exacerbations, not all vehicles meet the needs of AD patients.

The vehicle in which the active ingredient is delivered is an important factor for two reasons: 1) it may affect the clinical action and potency of the active agent, and 2) it may ultimately determine patient compliance, which can impact treatment success.

Traditional Vehicle Options

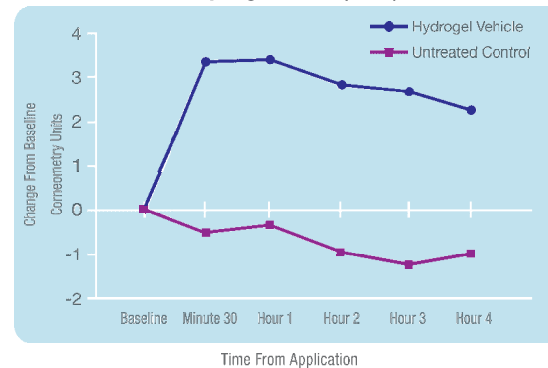
When it comes to treating AD, formulations that lack cosmetic appeal or are not well tolerated may result in noncompliance. Although alcohol-based gels are easy to apply, they have traditionally been associated with dryness and stinging/burning. Ointments are greasy and are difficult to apply to hair-bearing areas. Creams are not as easy to spread as lotions, and even lotions, which can cover a large affected area, may contain excipients that can cause irritation.

Changing the face of AD treatment

The recent availability of the aqueous-based, moisturizing Hydrogel vehicle is making inroads in AD therapy. Hydrogel is alcohol free, fragrance free, and surfactant free. Cosmetically elegant, the vehicle disappears quickly without leaving a greasy or shiny film. Additionally, Hydrogel has been shown to be very well tolerated, even when used on compromised skin. All of these attributes may enhance patient compliance.

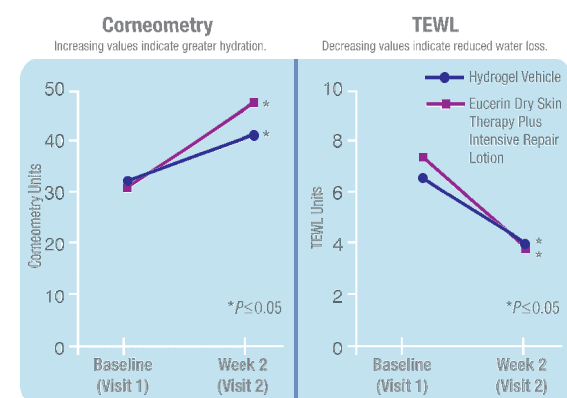
Clinically, Hydrogel has demonstrated enhanced moisturizing properties. In one corneometry study (N=50), Hydrogel vehicle was shown to significantly increase and maintain moisture in mild to moderate dry skin after a single application vs the untreated control.¹

Corneometry Readings After a Single Application of Hydrogel Vehicle (N=50)



In a separate 4-week corneometry and transepidermal water loss (TEWL) study, at 2 weeks, Hydrogel vehicle was shown to significantly enhance moisturization and to reduce the loss of water through improved barrier function on par with a lotion marketed for dry skin plus intensive repair.¹

Measurements Over 2 Weeks of Product Application (n=10)



Patients show a preference toward Hydrogel

Hydrogel has also been evaluated in a topical vehicle preference study (N=51). Hydrogel was described as "absorbs quickly," "soothing," and "easy to apply/use" by patients—important attributes that may aid patient compliance. In addition, Hydrogel was preferred by a majority of patients over other topical steroid vehicles.²

As a whole, aqueous-based Hydrogel offers moisturizing qualities and patient-preferred attributes that may help enhance compliance and positively impact treatment outcomes. Be sure the atopic dermatitis treatment you prescribe carries the benefits of Hydrogel.

References:

1. Trookman NS, Rizer RL, Ford R, Trancik RJ. Atopic dermatitis: advantages of a novel Hydrogel vehicle. Poster presented at: 65th Annual American Academy of Dermatology Meeting; February 2-5, 2007; Washington, DC. Poster 730.
2. Trookman NS, Rizer RL, Ford R, Trancik RJ. Topical vehicle preferences in atopic dermatitis patients—evaluating a novel Hydrogel vehicle. Poster presented at: 65th Annual American Academy of Dermatology Meeting; February 2-5, 2007; Washington, DC. Poster 725.

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