PLASMAGE®

Parutions de presse et magazines



brera medical technologies

Sommaire

PLASMAGE | Plasma fractionné

Parutions de presse - et magazines

Cliquez sur un titre. Les numéros correspondent aux pages de ce PDF.
Les numérotations imprimées dans les documents sources restent inchangées.

face & body : expérience de la thérapie plasma	**4-6**
Aesthetic Medical Practitioner : Put Precision First	**7-8**
Aesthetic Medicine : All that matters	**9-10**
Aesthetic Medical Practitioner : The Eyes Have It	**11-12**
Aesthetic Medical Practitioner : entretien et publicité	**13-14**
Anti Age Magazine : traitement des festons	**15-18**

Intitulés abrégés en français ; documents conservés dans leur langue originale.

FRACTIONAL PLASMA®
STUDIES / ARTICLES

Plasmatherapie in der Ästhetischen Praxis – erste Erfahrungen

Autor: Dr. med. Navid Roshanaei

Durch die interdisziplinäre Kooperation von Medizinern, Physikern, Chemikern, Biologen und Mikrobiologen hat sich die Plasmamedizin zu einem spannenden Feld mit großem Potenzial entwickelt. Zwar kann sie die operativen Methoden in der Ästhetischen Medizin nicht ersetzen, aber durchaus sinnvoll ergänzen.

In der Physik beschreibt „Plasma" die vierte Form eines Aggregatzustandes neben „fest", „flüssig", und „gasförmig". Es wird durch ionisierte Luft erzeugt und besteht aus Elektronen, Ionen, freien Radikalen, elektrischen und magnetischen Feldern sowie UV-Licht[1] (Abb. 1). Auf der Erde kommt Plasma auf natürliche Weise nur selten vor, allerdings liegt das restliche Universum zu über 99 Prozent in Form von Plasma vor. Es weist eine hohe bakterizide Wirkung auf, daher wird es unter anderem auch zur Sterilisation von Medizinprodukten sowie zur Konservierung von Lebensmitteln eingesetzt.[2] Durch die verschiedenen Anwendungsmöglichkeiten von Plasma stehen aber auch unterschiedlichste Behandlungssysteme in der Ästhetischen Medizin zur Verfügung.[1] Die „Food and Drug Administration (FDA)" erteilte 2005 der „Plasma skin regeneration technology (PSR)" die Zulassung zur Hautverjüngung sowie Behandlung von Falten.
Die vom Autor angewendete Plasma-Methode bringt Energie in Form von Plasma sehr fein dosiert auf die Haut. Das umliegende Gewebe sowie tiefere Hautschichten werden dabei nicht beeinträchtigt. Die Energie fließt von der Hautoberfläche in die tieferen Schichten, verändert dabei ihre Intensität und den Einfluss auf die unterschiedlichen Hautschichten (Abb.2). Der lokale Temperaturanstieg und die damit verbundene kontrollierte Schädigung der Haut führen zu einer Kollagenneogenese und einer Restruktu-

Abb. 1: Die uns bekannten Aggregatzustände: fest, flüssig, gasförmig und Plasma.
Abb. 2: Unterschiedliche Auswirkungen von Plasma an den verschiedenen Hautschichten.
Abb. 3: Wärmebild einer Plasmage®-Behandlung bei 0,3 J/mm².

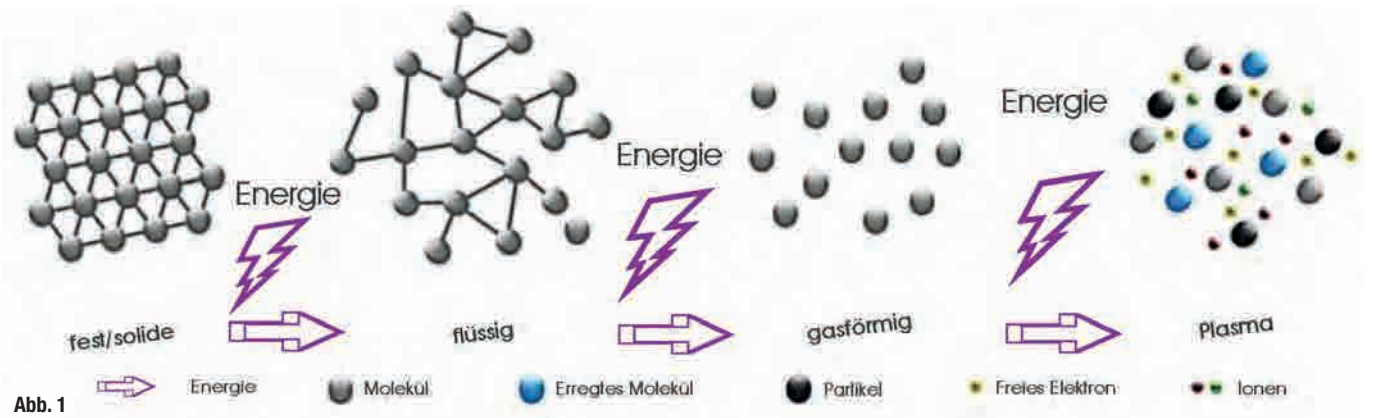


Abb. 1

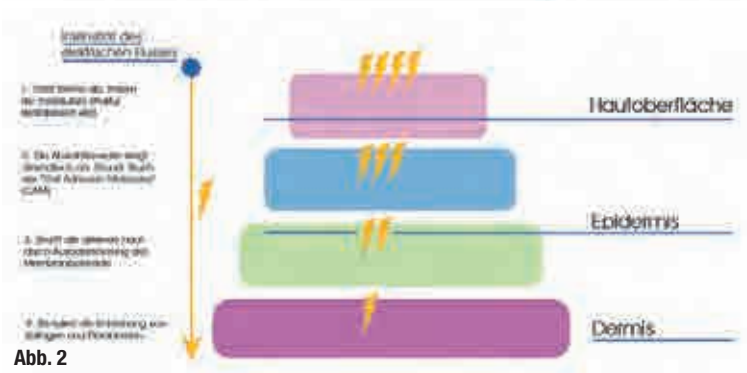


Abb. 2



Abb. 3


Abb. 4a


Abb. 4b


Abb. 4c

Abb. 4a–c: Vor **(a)**, direkt nach **(b)** und sechs Monate nach **(c)** einer Plasmage®-Behandlung.

rierung der Haut. Diese Veränderungen konnten histologisch bestätigt werden.[3–5] Durch den vergleichsweise niedrigen Energiebedarf ergeben sich wenige Nebenwirkungen sowie eine rasche Regeneration der Haut. Eine Ablation von unerwünschtem Gewebe ist schon bei ca. 66 Grad Celsius möglich (Abb. 3).

Nichtchirurgische Blepharoplastik

Eine der beliebtesten Behandlungsmöglichkeiten dieser Technologie wird „Blefaroplasma®" genannt und mit dem Gerät Plasmage® (medsab GmbH) durchgeführt. Diese Methode eignet sich bei geringer Ptosis des Oberlids oder moderater Erschlaffung im Bereich des Unterlids. Hierbei werden viele kleinste Energieentladungen mit folgender Vaporisierung der obersten Hautschicht durchgeführt. Hieraus erfolgt in den folgenden Wochen und Monaten ein „Shrinking", also eine Straffung der Haut in diesem Bereich (Abb. 4).

Üblicherweise wird die Behandlung ambulant, unter lokaltopischer Anästhesie (Betäubungscreme) durchgeführt, ein Augenschutz ist nicht notwendig. Die folgende Krustenbildung heilt üblicherweise innerhalb von fünf bis sechs Tagen, eine lokale Schwellung klingt innerhalb von drei bis fünf Tagen wieder ab. Das maximale Ergebnis zeigt sich nach vier bis sechs Monaten.

Durch die limitierte Wirksamkeit wird das Blefaroplasma® die operative Methode nie ersetzen können. Sinnvolle Indikationen stellen jedoch Patienten mit leichten Befunden, Patienten mit erneuter Ptosis einige Jahre nach einer Operation sowie Patienten, welche keine OP wünschen. Positiv werden dabei von den Patienten das geringere Verlet-

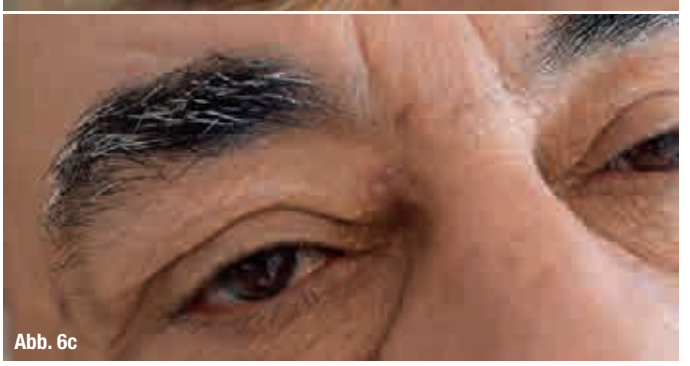
Abb. 5a und b: Vor **(a)** und vier Wochen nach **(b)** einer Plasmage®-Behandlung.
Abb. 6a–c: Vor **(a)**, direkt nach der Plasmage®-Behandlung **(b)**, acht Tage nach der Behandlung **(c)**.


Abb. 5a


Abb. 5b


Abb. 6a


Abb. 6b


Abb. 6c

zungsrisiko für das Auge und die relativ kurze Ausfallzeit empfunden. Abgesehen von der Blefaroplasma®-Behandlung lässt sich die Plasma-Methode auch zur Behandlung moderater Falten einsetzen. Häufiger nutzt der Autor das Plasmage®-Gerät zur präzisen Entfernung gutartiger Hautveränderungen, wie zum Beispiel aktinische Keratose, seborrhoische Keratose, Narben, Altersflecken u. a. (Abb. 5 und 6).[6,7]

Zusammenfassung

Die Blefaroplasma®-Methode gilt sicherlich als neues Einsatzgebiet, wobei es die operative Methode natürlich nicht ersetzen kann. Besonders im Augenbereich hat es einen großen Vorteil gegenüber konventionellen Lasergeräten, da hier kein Augenschutz notwendig ist sowie eine topische Anästhesie ausreicht.
Schlussendlich handelt es sich bei Plasmage® um ein kleines und handliches Gerät mit schneller Einsetzbarkeit. Bei Vorerfahrung mit entsprechenden Laser- oder Radiofrequenzsystemen ist man rasch mit dem System vertraut. Die Kosten für Verbrauchsmaterialien sind gering.

Der Autor setzt die beschriebene Methode seit circa einem Jahr in seiner Praxis erfolgreich ein. Weitere Untersuchungen und Erfahrungen werden zeigen, wie weit sich die Technologie durchsetzen wird und ob weitere Einsatzgebiete erschlossen werden können.

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Literatur

PUT PRECISION FIRST WITH BRERA

PLASMAGE®

INTEREST IN NON-SURGICAL BLEPHAROPLASTY IS ON THE RISE. PLASMAGE® BY BRERA MEDICAL TECHNOLOGIES USES PATENTED FRACTIONAL PLASMA TECHNOLOGY TO DECREASE DOWNTIME AND DELIVER 'NEXT LEVEL' RESULTS.



As the first patented fractional plasma device for dermatology and aesthetic medicine, Plasmage® by Brera offers practitioners a precise, non-surgical solution for the reduction of excess skin in the upper and lower eyelids, and the treatment of wrinkles, xanthelasma, acne, scarring, lentigo, fibroma and verrucas.

Plasmage® has been specifically designed to facilitate the effective and gentle treatment of delicate areas of the face and body. Its signature treatment, the Blefaroplasma®, is a minimally invasive alternative to surgical blepharoplasty. This procedure is efficient for the practitioner to perform, produces less downtime than the surgical alternative with quick results, and is more affordable for the patient.

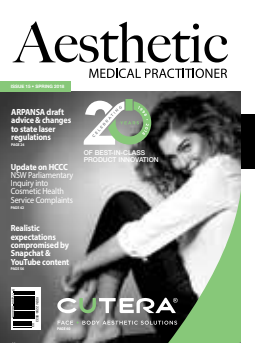
Available throughout Australia from Advanced Cosmeceuticals, Plasmage® sublimates tissue without ablation or side effects to the skin. It delivers plasma energy to the skin and provides 30 modulations of energy, continuous mode, fractional mode, four levels of fractionation, and six scales of intensity. This comprehensive selection allows the operator to adapt the energy to the treatment protocol, while ensuring a high level of safety and precise control of the treatment area.

'SURGEONS WILL FIND PLASMAGE® A JOY TO USE IN AN OFFICE OR DAY SURGICAL SETTING.'

PLASMAGE® IN PRACTICE

Dr Robin Chok from Regenesis Cosmetic Surgery in Adelaide has been using radiowave surgical technology to remove moles and benign lesions, and perform minor surgery for a number of years.

'I have always found radiowave surgery much more efficient than conventional surgery, with excellent



PRODUCTS

> 'WITH THE MANY PLASMA ENERGY DEVICES THAT ENTERED THE MARKET, BRERA PLASMAGE® WAS, AND IS, THE STAND OUT DEVICE OF CHOICE BY FAR.'

results and minimal scarring,' he says. 'Recently with the advent of plasma surgical devices, we were curious if the newly released Brera Plasmage® can produce similar or better results. With the many plasma energy devices that entered the market, Brera Plasmage® was, and is, the stand out device of choice by far.'

Plasmage® by Brera Medical Technologies is the only plasma energy device to use a fractional energy delivery system, rather than the standard form of continuous energy. This affords practitioners greater control over the energy used and helps them achieve advanced results by minimising risk, injury and patient recovery time.

'Not only does the Brera device allow physicians to utilise the preset options, it also allows the operator to use advanced techniques with the ability to customise treatment settings according to specific patient requirements,' explains Dr Chok. 'With the ability to select a lower energy power with Plasmage®, treating patients of various ethnicities is also now a possibility, making plasma treatment with Brera Plasmage® a much safer option to most others on the market.'

In the case of eyelid treatments, Plasmage® reduces excessive skin, producing a localised and precise retraction of the eyelids.

Once treatment is completed, patients may experience some redness and swelling around the target area. This typically doesn't last long, but there will be some crusting of the affected skin.

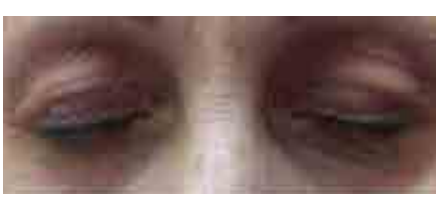
'Brera Plasmage® offers a more precise treatment, making it the ideal device for use around the eyelid area,' says Dr Chok. 'Plasmage® offers a simpler and technically more controlled and direct balancing of the lift and refirming of the skin in this very fragile area. Pain control is paramount in periorbital procedures, as any movement by the patient can jeopardise the results. I combine topical anaesthesia with some injectable anaesthesia for best results. Adrenaline is often not required as Plasmage® creates a dry surgical field with minimal to no bleeding. This creates good vision of the operative field, which is important in any fine surgery.

'With Plasmage®, recovery time for patients is shorter due to the ability to select a lower energy level and being fractional,' continues Dr Chok. 'We combine Brera Plasmage® with our Lutronic Healite II to speed up recovery time and lower the risk of Post Inflammatory Hyperpigmentation.'

In addition to the Healite II, Dr Chok has used the Plasmage® in combination with radiofrequency and Lutronic's Spectra XT. He also uses the device's larger attachment probe to perform the Brera Plasmage® Peel, a treatment that gives the patient more instant visual results.

'We are also incorporating Plasmage® with our Lutronic INFINI MFR device for even better lift at areas such as the preauricular, brow edge, jawline and neck,' he says. 'Overall, Brera Plasmage® offers a more precise, safer and effective plasma treatment than any other device on the market, with a significantly shorter recovery time for our patients. The device complements the various treatments offered within our surgery.

'Plasmage® is an excellent medical device, but it must be used in a safe medical environment for best outcomes and safety. I believe it offers a lot more to experienced doctors - and especially surgeons in refining their art of surgery and scar control. Surgeons will find Plasmage® a joy to use in an office or day surgical setting. There are minimal to no consumables, making this device much more efficient for multi-lesion excisions and other applications.' **AMP**


BEFORE


AFTER treatment

For more information call 1800 242 011, email cs@advancedcosmeceuticals.com.au or visit www.advancedcosmeceuticals.com.au



All that matters

Dr Tim Eldridge discusses introducing Plasmage into his practice

In 2016 Italian company Brera introduced a new tool in dermatology and medical aesthetics which was based on fractional plasma, called Plasmage.

Due to interdisciplinary cooperation in medicine, physics, chemistry, biology and microbiology, plasma medicine has developed into an exciting field, with potentially many uses. In 2005, the US Food and Drug Administration licensed plasma skin regeneration technology (PSR) for skin rejuvenation and for treatment of wrinkles.

In physics, plasma is considered the fourth state of matter next to solids, liquids and gases, and is made up of an ionised gas, which consists of a set of electrons, ions, free radicals, molecules, and neutral atoms. On earth, the plasma presence is relatively rare, but in the universe it constitutes more than 99% of the known matter; the sun, the stars and the nebulae are all in plasma form. Plasmas have a high bactericidal effectiveness and are used to sterilise medical devices and in packaging of food stuffs. In everyday technology plasmas are used in the manufacture of television screens or fluorescent tubes.

Plasmage generates its plasma through an electric discharge, without directly contacting the skin. It uses a special generator to produce a micro current that, through the electrical discharge generated, causes a localised temperature rise and a controlled demolition of the tissue. It acts only on the area it is directed at, without breaking deeper layers of the skin and influencing the health of the surrounding tissues.

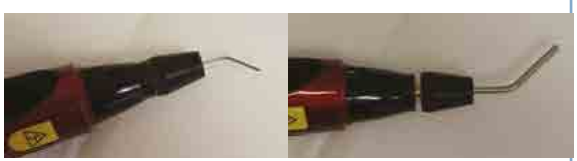
The application of Plasmage induces controlled thermal damage in the skin, which results in the new production of collagen, a reduction of elastic fibres and a restructuring of dermal architecture that can be confirmed histologically. In addition to wrinkle treatment Plasmage can be used to treat:

- Non-surgical blepharoplasty
- Acne
- Warts
- Lentigo
- Ageing
- Scars
- Stretch marks
- Wrinkles
- Fibromas

THE MACHINE



Plasmage is a small portable energy based device, optimised by 10 preset programs, and has a smart design with touch screen interface. There are six levels of intensity and four shooting modes (single or multiple), in addition to the continuous operation mode. There are different tips to improve precision; a selective shaped tip and a needle shaped tip.



The selective shaped tip is used to treat a large treatment area with biostimulation. The needle shaped tip has greater flexibility, is more precise and used to treat a number of conditions.

The smart touch screen interface has nine guided protocols, each of which has a pre-set tuning of energy. It is simple to use. Alternatively, if more or less energy is required for a treatment these pre-set applications can be adjusted.

The manual mode allows the pre-set applications to be adjusted to suit particular treatments. The intensity and pulse action can be adjusted. This is what makes Plasmage unique to the market because it has one of the widest ranges of power intensity and number of shots.



TREATMENTS

Benefits to the patients can often been seen just after one treatment. For patients it is a relatively quick procedure, usually performed under topical anaesthetic, and taking only minutes. It is a non-invasive, non-ablative procedure with no bleeding and short recovery time. For some of the conditions that Plasmage can treat, the alternative often requires local or general anaesthetic, is more invasive and has a much longer recovery time. There is also usually more of a risk of haematomas and infection associated with surgical treatment. There is a big comparison in the cost of treatment too, making Plasmage much more cost effective and affordable.

A good strong topical anaesthetic cream is applied to the area to be treated at least 30 minutes before treatment (ideally one hour with several applications). The area is then suitably cleansed and treatment is commenced. It is advisable to get good before and after photographs similar to those you would take for other aesthetic treatments.

TREATMENT EXAMPLES

Non-surgical blepheroplasty

Plasmage is used in the treatment of wrinkles around the eyes or heavy eyelids and creates a natural looking eyelid rejuvenation with no scars and less recovery time compared to surgery. The procedure can be repeated in the future, whereas with surgery this is often not the case. The treatment is generally carried out using topical anaesthetic, however, if the patient would prefer a local anaesthetic can be used.

Peri-oral rhytides



Non-surgical blepharoplasty pre-treatment and two weeks post-treatment (A: Dr Jacque Andre David, Paris, France. B:Dr Annamaria D'Ardis, Napoli, Italy)



Often this area can be treated using the biostimulation tip with no anaesthetic. Or treatment can be performed with this tip first then any residual lines treated with the finer needle with topical anaesthetic.

Before and directly after photograph using only the biostimulation tip (resurfacing with fractional plasma). The procedure took 15 minutes (Dr Eleftheria Gliarmi)



Mole removal

This treatment must only be performed after confirmation that the lesion is benign. It takes only minutes and is performed with topical anaesthetic.

Before and directly after treatment. After a few weeks there will be no visible evidence of a mole and of any treatment (Joanne Staniforth)



Fibroma removal

This treatment can again be performed in just minutes with topical anaesthetic.

Before and immediatelty after photograph. This procedure took five minutes with topical anaesthetic. The patient had previously been told by her GMP that the fibromas could not be removed (Dr Tim Eldridge)

Reducing pre-auricular wrinkles

This treatment takes minutes to perform with topical anaesthetic. This area of the face is often overlooked but can be quite ageing, and treated so simply.



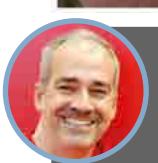
Before treatment, one week after treatment and two weeks after treatment photograph (Dr Tim Eldridge)

These are just a few examples of what the Plasmage machine can do. It is a powerful and unique tool dedicated to micro surgery, blepharoplasty, and cutaneous excrescence, that will compliment any aesthetic practice.

Use of photographs with kind permission from Brera medical technologies. **AM**

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Dr Timothy Eldridge BDS founded myFACE dentistry and facial aesthetics in Cheltenham in 2009 and is the principal dentist. Today he spends half of his time in practice combining non-surgical treatments with cosmetic and restorative dentistry, and the other half as a clinical supervisor at Birmingham Dental Hospital. He is a full member of the British Academy of Cosmetic Dentistry and is currently chairman of CODE. Dr Eldridge has trained hundreds of dentists, doctors, therapists, hygienists and registered medical nurses both nationally and internationally. He is the trainer and course leader for Dr Paul Tipton's facial aesthetic training courses, and is a committee member of the British Academy of Restorative Dentistry.

PLASMAGE®
The Eyes Have It

BRERA PLASMAGE®, A NON-SURGICAL ALTERNATIVE TO BLEPHAROPLASTY DISTRIBUTED BY ADVANCED COSMECEUTICALS, COULD HEIGHTEN PATIENT SATISFACTION AND ELEVATE YOUR PRACTICE.

Plasmage® Connect Lab

The first of its kind, the Plasmage® Connect Lab smartphone application links to a medical device that connects the practitioner to a network of medical peers. This innovative technology allows the practitioner to take 'before and after' photos and edit them into a useful format for easy sharing.

It offers an immediate platform for keeping up-to-date with patients, colleagues and scientific committees from around the world and provides updates on significant protocols and events.

While it undoubtedly delivers incredible results, surgical blepharoplasty does come with extended downtime, which for time-poor patients, may not be ideal. And for those patients who are in need of a gentler lift or tweak, going in for the full surgical procedure may not always be necessary. Enter, Blefaroplasma® Plasmage® by Brera Medical Technologies.

This innovative new technology allows for non-invasive, non-ablative treatment of sensitive, hard-to-treat areas in as little as one session. The secret is a patented Fractional Plasma System known as Plasmage®, which allows for fast and convenient treatment, less aggressive techniques, improved patient comfort and considerably less downtime.

Signature to this technology is the Blefaroplasma®, a minimally invasive alternative to a surgical eyelift, or blepharoplasty. Efficient and easy for a practitioner to perform, it delivers quick results at a fraction of the price of surgical options.

Addressing issues including wrinkles, xanthelasma, acne scarring, lentigo, fibroma and verrucas, the device is as versatile as it is efficient. It also works well on treating milia cysts, fatty eye lumps, acne, scars and warts.

Patented, Controlled Technology

Plasmage® is the first and only fractional energy delivery system that affords practitioners greater control over the energy used, rather than the standard form of continuous energy. This delivers advanced results while minimising risk, injury and recovery time.

A class IIb device, its features include a 'user friendly' interface that sublimates tissue without ablation or other adverse side effects to the skin.

The plasma energy delivered can be provided in 30 modulations of energy, continuous mode, fractional mode, four levels of fractionation, and six scales of intensity. Such a varied and comprehensive selection allows the practitioner to adapt the energy to the treatment protocol and precisely control the treatment area, all while providing a high degree of safety.

This versatility of variable energy power also means that practitioners may treat patients from a wider variety of ethnic backgrounds.



"EFFICIENT AND EASY FOR A PRACTITIONER TO PERFORM, IT ALSO DELIVERS QUICK RESULTS AT A FRACTION OF THE PRICE OF SURGICAL OPTIONS."

Eyes Right

When treating eyelids, Plasmage® can be used to reduce excess skin, producing a localised and precise retraction of the eyelids, without the need for general anaesthetic. In fact, patient comfort can be ensured simply by using topical or injectable anaesthesia.

Reduced Downtime

Post treatment, patients may experience some redness and swelling around the treatment area, as well as some crusting of the affected skin, the latter of which is necessary to protect the new skin forming underneath. Typically, these post-treatment signs last between 10-14 days, depending on the intensity of the treatment and condition of the patient's skin.

Complementary, Holistic Treatments

Plasmage® can be used alongside other techniques, including ultrasound eyelift or muscle relaxants, to produce ideal results, minimising fine lines, reducing puffiness and creating overall rejuvenation and a youthful, blemish-free appearance.

Why Choose Plasmage®

- **Smart Software:** A selection of pre-set, 'indication specific' programs allow ease of use with optimal energy supply for each procedure.
- **Intuitive Technology:** The smart software allows the operator to choose from 30 different treatment protocols and to manually adjust as desired.
- **Needle Tip:** The applicator consists of an ergonomic and lightweight handpiece, as well as various sized and shaped electrodes.
- **Lightweight and Portable:** Weighing only 2kg, Plasmage® comes equipped with its own carry case.



Q&A with Dr Richard Hogben

Dr Richard Hogben of Allure Laser & Skin Studio in Mackay, QLD, has been using Plasmage® in his busy practice for the past 12 months and says it has become an integral part of his practice for a number of different conditions.

'I find the Plasmage® is the go-to device now, because of the minimal preparation needed, less downtime and fewer adverse effects, plus improved patient comfort.'

Here, we speak to Dr Hogben about his experience with the device.

Q: Aside from the eye area, what conditions are you using it to treat most?
A: Around the eyes is extremely popular and we do see excellent results with tightening of the loose skin, particularly under the eye. Apart from this, the Plasmage® is used extensively for removal of skin tags, small benign lesions, for example seborrheic keratoses, cysts and even milia which are very hard to extract. Fine perioral lip lines can also benefit from the Plasmage®.

Q: How do you find the results?
A: The results are excellent. For the benign lesions, usually only one treatment is required and most of the time there is no hypopigmentation, scarring or any adverse effect seen. In most cases on review you cannot see where the lesion was removed. Around the eye with the Blefaroplasma® mode we see tightening of the loose skin in both the upper and lower eyelids and reduction of fine lines.

Q: Which modality is your preferred? Or rather, the most requested?
A: The Plasmage® has become an integral tool in our clinic, used multiple times on a daily basis, whether for the popular tightening around the eye with the Blefaroplasma® mode or an 'add on' to a consultation to remove skin tags or other benign lesions on the face or other parts of the body. It is a very quick, straightforward procedure with minimal to no preparation and downtime.

Q: Typically, how many treatments are required for best results in any given procedure?
A: For a majority of indications only one treatment is needed. For tightening of loose skin in the upper and lower eyelids and reduction of fine perioral lines, the patient may benefit from two procedures spread over three to six months.

Q: What would you say patient satisfaction is like?
A: Patient satisfaction is excellent. When removing the cysts, skin tags and other benign lesions patients often state 'that was so much easier than I thought it would be. I should have done this years ago.'

Q: Is downtime and patient comfort improved?
A: I find with the removal of small lesion, no preparation is needed. Comfort is helped with cooling only. For larger lesions, either local anaesthetic topical gel or minimal local anaesthetic injections is all that is required. For the Blefaroplasma® we prepare our patients by getting them to come 30 minutes before the procedure to apply local anaesthetic gel.

Q: Would you recommend other practitioners get Plasmage® for their practices?
A: I have found the Plasmage® to be an excellent and reliable tool in our practice with reproducible results time and time again. I would recommend the Plasmage® to practitioners as they will find it becomes an integral part of their practice, whether that be larger procedures for the loose skin of the upper and lower eyelids or the multiple times a day that they would like to remove benign lesions with minimal to no preparation, downtime and adverse effects. **AMP**

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AS SEEN IN AESTHETIC MEDICAL PRACTITIONER



PLASMAGE®



The first patented Fractional Plasma® for treatments of delicate areas

A MEDICAL DEVICE FOR NON-INVASIVE MICRO-SURGERY

- Blefaroplasma® (non-surgical blepharoplasty)
- Wrinkles
- Xanthelasma
- Acne
- Lentigo
- Scars
- Fibroma
- Verrucas



XANTHELASMA



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DR DANIELA TAHER

TRAITEMENT DES MONTICULES DE MALAR OU FESTONS À L'AIDE DU PLASMA FRACTIONNÉ

LE RAJEUNISSEMENT DE LA ZONE PERI-ORBITALE A UN IMPACT MAJEUR SUR L'ENSEMBLE DU VISAGE, NOTAMMENT DES SOURCILS À LA JOUE.

MANAGEMENT OF FESTOONS WITH FRACTIONATED PLASMA

PERIORBITAL REJUVENATION HAS A MAJOR IMPACT ON FACIAL APPEARANCE AND THE GOAL IS TO CREATE A SMOOTH CONTOUR FROM BROW TO CHEEK

Les monticules de Malar, hernies graisseuses ou festons (plis redondants de la peau, graisse, muscle orbiculaire) s'étendent de la paupière inférieure à la joue.

The term festoon describes a hanging tissue (orbicularis muscle, skin, +/- fat) between two points represented by the lower eyelid and cheek.

Ils sont très fréquents et seul un expert peut les traiter correctement. Ils représentent un vrai problème pour les chirurgiens car ils peuvent persister suite à une blépharoplastie, sont récurrents et nécessitent parfois une seconde intervention.

Étiologie et physiopathologie

Les monticules de Malar et hernies graisseuses sont liés à l'âge ou transmis génétiquement. D'autres facteurs peuvent en être la cause : allergies chroniques, thyroïde, dysfonctionnements rénaux, déséquilibre lymphatique, voir injections de fillers.

Festoons are more common than we think but only an expert would recognise them. They have been a frustrating problem for surgeons because they persist after classical blepharoplasty, are recurrent and sometimes a secondary procedure is necessary.

Etiology and pathophysiology

Festoons can appear with age or can be genetically inherited. Predisposing factors may be: chronic allergies, thyroid, renal dysfunctions, lymphatic imbalance and fillers in the area.
The development of malar oedema, malar mounds and festoons are related to the anatomy of the lid-cheek junction



LES MONTICULES DE MALAR ET HERNIES GRAISSEUSES SONT LIÉS EN PARTIE À L'ÂGE ET À LA GÉNÉTIQUE.

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Le développement des monticules de Malar, des hernies graisseuses, des poches est lié à l'anatomie de notre jonction paupière-joue et du milieu du visage. L'étirement de l'ORL provoque une descente de la jonction de la joue et une dégénérescence des muscles orbiculaires qui étire la peau sus-jacente. La distension chronique sur cette structure représentée par le septum malaire et le ligament cutané zygomatique rend possible une progression de l'œdème malaire, des monticules de Malar et des poches. L'atrophie du milieu du visage, la fonte des os et la graisse sub-orbiculaire contribuent également à son apparition. De la graisse et des fluides peuvent également s'accumuler dans la zone, donnant aux paupières une apparence gonflée.

and mid face. The stretching of ORL produces the sagging of the lid-cheek junction and the degeneration of the orbicularis muscles stretches the overlying skin. The chronic distention over a strong structure, represented by the malar septum and zygomatic cutaneous ligament, causes the progression from malar oedema to malar mounds and finally to festoons. Mid-face atrophy, bone and SOOF will also contribute to the festoon appearance. Fat and fluid may also begin to accumulate in the area, giving the festoon a puffy appearance.

Treatment strategies

Surgical correction with local excision, subperiosteal mid-face lift associated with lower blepharoplasty, skin-muscle flap, CO2



Fig.1

Un patient de 62 ans présentant un monticule malaire marqué, avant et un mois après la procédure. Paramètres d'intensité 4 et fractionnement 3.

A 62 year old patient with marked malar festoon, before and one month after the procedure. Settings used were intensity 4 and fractionation 3.



Fig.2

Patient de 47 ans. Avant et un mois après la procédure. Paramètres d'intensité 4 et fractionnement 3.

A 47 year old patient with festoon. Before and one month after the procedure. Settings used were intensity 4 and fraction 3.

IL EST UN BON COMPLÉMENT À UNE APPROCHE CHIRURGICALE.

A COMBINATION OF SURGICAL AND NON-SURGICAL PROCEDURES MAY BE THE ANSWER.

Quels sont les traitements ?

La blépharoplastie chirurgicale avec excision locale, un lifting associé à une blépharoplastie inférieure, la correction du lambeau cutanéo-musculaire, un resurfaçage au laser CO2 ou Er-Yag, la radiofréquence, les injections de tétracycline à 2%, les injections de Kybella et la micro liposuccion, les injections de graisse ou de fillers sont différentes techniques envisageables.

Depuis quelques années, un nouvel appareil a été mis sur le marché, le Plasmage, à base de plasma fractionné. Il offre 4 niveaux de fractionnement et 6 échelles d'intensité permettant d'adapter le traitement selon les cas tout en maintenant un niveau de sécurité constant.

Le plasma est considéré comme le quatrième état de la matière après les solides, les liquides et les gaz. Il est constitué de gaz ionisé. Plasmage produit un arc de plasma qui va chauffer et ioniser l'air ambiant. Il agit uniquement sur la zone concernée, sans endommager les couches plus profondes de la peau et sans nuire à la qualité des tissus environnants.

L'arc électrique provoque une élévation de température entrainant un effet de sublimation des cornéocytes superficiels, sans affecter la couche de cellules basales, créant un effet lifting. Les dispositifs non fractionnés causaient plus de dommages aux tissus et leurs effets indésirables étaient beaucoup fréquents comme un érythème prolongé ou une hyperpigmentation en raison du faisceau d'énergie continu. Les dispositifs fractionnés ne vont eux pas aussi profondément et évaporent superficiellement l'excès de peau.

L'énergie libérée provoque un spot, un petit point ou la peau est sublimée. En cicatrisant, ces spots se rapprochent les uns des autres. C'est ce qui permet de réduire l'excès de peau. On ignore encore quel est le mécanisme permettant de réduire l'œdème local.

Les résultats sont encourageants sachant que d'autres études continuent d'être menées. Le plasma fractionné est bien adapté au traitement des festons légers ou modérés à prédominance cutanée. Il sera bien évidemment adapté au cas par cas et pourra être un bon complément à une approche chirurgicale de cette zone pour obtenir un résultat optimal.



Fig.3

Patient de 62 ans avec une perte de poids massive après une chirurgie bariatrique. Monticule malaire sévère avec accumulation de liquide et atrophie de la région médiane de la joue. La deuxième image montre le résultat un mois après la procédure. Paramètres d'intensité 4 et de fractionnement 3. Une deuxième séance est prévue après 2 mois.

Patient 62 years old with massive weight loss post bariatric surgery. Severe malar festoon with fluid accumulation and atrophy of mid cheek area. Second image shows the result one month after the procedure. Settings used were intensity 4 and fractionation 3. Another second session is scheduled after 2 months.

and Er-Yag laser resurfacing, radiofrequency, 2% tetracycline injection, Kybella injection and micro liposuction, volumising injection fat or fillers are the options to consider in the treatment of festoons.

A couple of years ago, a new tool in dermatology and medical aesthetics was introduced which was based on fractionated plasma, called Plasmage. This device delivers 4 levels of fractioning and 6 scales of intensity. In this way, the doctor can adapt the treatment and maintain a constant level of safety.

In physics, plasma is considered the fourth state of matter next to solids, liquids and gases, and is made up of ionised gas. Plasmage generates its plasma through an electric discharge, without directly contacting the skin. It acts only on the area it is directed at, without breaking the deeper layers of the skin or affecting the health of the surrounding tissues.

The electrical discharge causes a temperature rise in a targeted part of the skin in a very selective way, with high energy density. This causes sublimation spots of the superficial corneocytes, without affecting the basal cell layer, creating a lifting effect. Non-fractionated devices cause more damage to the surrounding tissue and side effects are much more common: prolonged erythema, hyperpigmentation. This is due to the continuous beam of energy used, compared to the pulsating beam of the fractionated devices. The fractionated devices also do not go as deep, and evaporate the excess skin superficially.

This technology can be an adjuvant therapy or a solution for small, incipient festoons. This technology does not anchor the sagging tissue, but stimulates contraction and improves the skin laxity. It is still unclear what brings about this reduction in local oedema.

The results are encouraging but further long term studies should be done. Fractionated plasma can be an adjuvant for surgical correction or can be a primary treatment for mild or moderate, skin predominating festoons. However, a clear understanding of each patients anatomic variations of festoons, together with an individualised treatment that might combine surgical and non-surgical procedures, may be the key for an optimal outcome.

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