

## ACTA SCIENTIFIC MEDICAL SCIENCES

Volume 3 Issue 6 June 2019

Research Article

# The Lift Without A Stitch: A Study of 550 Non-Surgical Facelifts

# Simal Soin and Jaya Pathak\*

Aayna Clinic, Mehrauli, New Delhi, India

\*Corresponding Author: Jaya Pathak, Aayna Clinic, Mehrauli, New Delhi, India.

Received: April 05, 2019; Published: May 06, 2019

#### **Abstract**

**Aim:** To treat concerns related to volume loss, slackening and sagging of the skin and double chin through the use of non-surgical facial contouring modalities, focusing on overall global rejuvenation.

Patients and Methods: 550 cases both men and women, between the age groups of 40-75 who presented over a 4 year period from April 2014 to April 2018 with concerns related to ageing such as sagging skin, double chin, and prominence of nasolabial folds and marionette lines were included in the study. Facial assessment for each case was done using the rule of third and fifths. Treatment plans for each case was decided using modalities in combination or individually depending on age, degree of concern and budgets. The modalities used were mono-polar radiofrequency, injectable hyaluronic acid fillers and neurotoxin. Before and after images were recorded.

**Results:** The results were assessed by photographic documentation. They were recorded immediately post treatment and assessed 3 months later as well. There was a significant improvement in skin laxity, volume loss, skin texture, fine lines and wrinkles. No downtime or side effects were recorded post any of the procedures.

**Conclusion:** Non-surgical modalities done in the right combinations have proven to achieve optimum results for treating ageing concerns and have been able to achieve a paradigm shift in ageing and preventative ageing.

Keywords: Skin, Folds, Modalities; Ageing

#### Introduction

Aesthetics today has evolved and natural is the new buzzword in anti ageing. Clients (since they are healthy people we prefer not to address them as patients) want natural looking results and treatments which are minimally invasive or non invasive with minimal downtime. Clients desires and needs dictate present day trends. They want to look rested, fresher, age appropriate and the best version of themselves. In our practice Indians, Oriental and the Westerners are culturally different in their perception of aesthetics. Indians want their treatments to look as natural as possible; we are a people society and concerned about what people think and have a lot of needle phobias. With Orientals, aesthetic treatments are the norm rather than the exception. The Westerners are individualistic in their views and are much more open to the idea of having treatments.

Men and women are now both more conscious about the way they look and feel. In this era of selfies, everyone closely examines their photographs and can judge changes in their faces over time. Very often this is responsible for their coming to clinic. The commonest complains are looking tired all the time, followed by prominence of the nasolabial folds and appearance of the double chin (sub mental fat collection).

Most individuals come looking for quick fixes but at the same time are very apprehensive about invasive techniques, pain and downtime. For majority of the clients, surgery is an absolute NO. A few of them are very apprehensive about injections and want non-invasive solutions.

A combination of modalities including mono polar radiofrequency, hyaluronic acid fillers and neurotoxin are used to achieve optimal results for different anti-ageing concerns.

#### **Methods**

550 cases both men and women, between the age groups of 40-75 who presented over a period of 4 years from April 2014 to April 2018 with concerns related to ageing such as sagging skin, double chin, and prominence of nasolabial folds and marionette lines were

included in the study. Facial assessment for each case was done using the rule of third and fifths. A thorough medical history was obtained of diabetes, implants, medication (aspirin) and previous treatments done. All results were recorded by baseline photographs and repeated immediate post treatments and followed up at time interval of 3-6 months.

Treatment plans for each case was decided using modalities in combination or individually depending on age, degree and type of concerns and budgets. The modalities used were mono-polar radiofrequency, injectable hyaluronic acid fillers and neurotoxin.

Thermage CPT 9 (Comfort Pulse Technology) (figure 1) was the tool of choice used for mono-polar radiofrequency. It is a non-surgical treatment for skin tightening especially for areas most affected due to ageing such as double chin (sub mental fat accumulation), squaring of the lower face, prominent jowling, prominent nasolabial folds and helps lift the eyebrows.

The client is prepped for the procedure. After a test patch of the anaesthetic cream which is a combination of prilocaine and lignocaine, it is applied on the entire face for a period of 45 minutes. Post that the face is cleaned using aseptic measures and gridding is done and the return pad is applied. The Thermage CPT face treatment has 900 shots which is equally divided over both sides of the face. The energy used is between 3 to 4.5 depending on each individuals pain threshold. The treatment consists of two baseline passes followed by vectors which help lifting and contouring. Thermage CPT is an individualized treatment depending on each individual's concerns. The vectors (figure 2 and 3) were divided between the jawline, anchor point, foreheadlift, under eyes and nasolabial folds. Post the treatment the client may experience mild erythema which settles in a couple of hours and sunscreen is applied.



Figure 1: Thermage is monopolar RF.

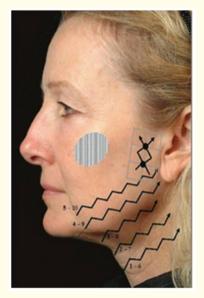


Figure 2: Jawline vectors and anchor point.

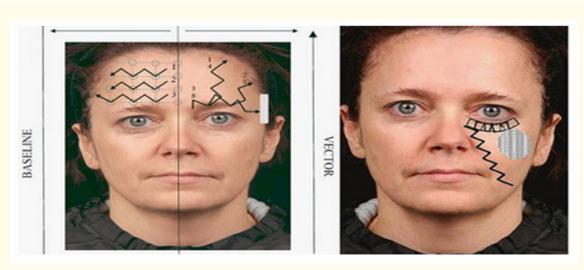


Figure 3: Vectors.

**Fillers**- hyaluronic acid with vycross technology from Juvederm® (Allergan, Inc., Irvine, CA). Lifting fillers are vycross such as Voluma, Volift and Volbella.

Filler injections in the supraperiosteal plane helps add support and lift whereas in the subcutaneous plane they help in contouring reshaping.

Advantage of lifting with fillers over monopolar radiofrequency is that subtle changes can be made in the chin, temples, mento-labial folds and corners of the mouth.

**Combination of Thermage CPT and fillers**: Thermage CPT reduces squaring of the face and the filler lifts further gives the face an oval thinner look making the arcs of youthfulness look prominent. Collagen stimulation is important for creating beauty hence a

combination of the two treatments are ideal to give a rested, fresher, younger lifted and more glamorous look.

All results were recorded with before and after pictures. Post care topical creams like sunscreen, antioxidants and peptide creams were prescribed.

### **Results**

Thermage CPT: Has 75% extremely satisfied results. Thermage CPT shows immediate tightening and the results improve over a period of 6months. The procedure has had a high repetition rate in our practice.

It gives a good jawline contour and reduces the squaring of the face (Figure 4).



Figure 4: Thermage.

Gives great lift, contours and a provides a refreshed and harmonious look (Figure 5).



Figure 5: Thermage.

## **Fillers**

# Done the right way can help in slimming and contouring the face. Some clients only like the filler look as subtle alterations can be made giving them the desired lifts (Figure 6 and 7).

## Thermage and filler

The combination therapy over 6-9 months has proven to show optimal results (Figure 8 and 9).



Figure 6: Filler.



Figure 7: Fillers.

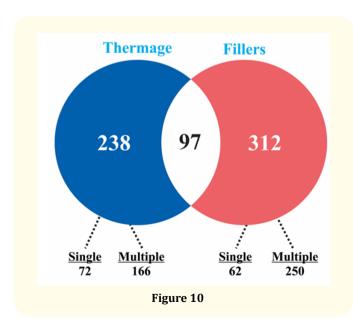


Figure 8: Thermage + Filler.



Figure 9: Thermage and chin filler.

Repetition rates for Thermage CPT and filler (figure 10).



## **Discussion**

In the human body, the commonest element in defining the beauty of the individuals is the face, although the perception of beauty may vary [1]. The concept that 'ideal' proportions were the secret of beauty was the oldest idea regarding the nature of beauty [2]. A number of important soft tissue landmarks were used in the assessment of facial aesthetics and the patient should be examined for facial proportions in full face and in profile view [3]. The rule of fifths is practical, and a convenient guideline is used to analyze the transverse facial proportions, in which the ideal face could be transversely divided into five equal parts, each one is equal to one eye width [4]. Non surgical reversal of ageing is possible by maintaining the rule of fifths. Collagen and elastin fibers rejuvenation is the key to preventative ageing. Men and women want to look younger and maintain their features but not at the cost of a surgery. Very few individuals would allow themselves to undergo a surgical procedure and deal with the pain and downtime following

it. Clients want an instant and dramatic results. In our experience depending on the age group a combination of Thermage and fillers have been able to achieve not only the desired lift but also improvement in skin texture and overall rejuvenation. Older clients who have a significant amount of slackening, are happy to age gracefully but like to maintain what they have (Figure 11).



Figure 11: Thermage + Fillers.

Thermage CPT is a great tool for clients who understand preventative ageing and those who have needle phobia or phobia of injectables. The results are not as dramatic as a surgical facelift but it has the advantage of collagen remodeling which results in youthfulness. Ruiz-Esparza [5,6] described his concept of applying heat in key areas, or anchoring points, for rejuvenation of the face and neck. The concept of applying heat in vectors from areas of less moveable skin – the anchoring points – to areas of more moveable skin, yielded improved tightening compared to treatment over a wider area of the face. By selectively treating anchoring points located along the preauricular area, the skin of the cheeks were tightened [7]. Thermage CPT is an operator dependent procedure and the vectors, passes and energy level for each individual is decided according to their problem areas.

In recent years, the use of botulinum neurotoxins and facial fillers to improve the appearance of facial wrinkles has become common. Indeed, since 1997, the number of cosmetic procedures performed in the USA has increased by 46%, and data from 2005 showed that 66% of all cosmetic procedures performed were nonsurgical [8]. Loss of volume is one of the key factors of ageing and hyaluronic fillers are the only solution. In 1997, 46% of aesthetic procedures were surgical, whereas in 2010, 83% of patient treatment sessions were nonsurgical. Injectable products are used in 52% of these minimally invasive procedures [9].

### **Bibliography**

- Thidar Aye Mya., et al. "Assessing facial beauty of Sabah ethnic groups using Farkas principles". Health Sciences Research 3.1 (2016): 1-9.
- 2. Peck Harvey and Sheldon Peck. "A concept of facial esthetics". *The Angle Orthodontist* 40.4 (1970): 284-317.
- 3. Naini Farhad B and Daljit S. Gill. "Facial aesthetics: 2. Clinical assessment". *Dental Update* 35.3 (2008): 159-70.
- Naini, Farhad B. "Facial aesthetics: concepts and clinical diagnosis". John Wiley and Sons (2011).
- 5. Ruiz-Esparza J. "Nonablative radiofrequency for facial and neck rejuvenation. a faster, safer, and less painful procedure based on concentrating the heat in key areas: the thermalift concept". Journal of Cosmetic Dermatology 5 (2006): 68-75.
- Ruiz-Esparza J and Gomez JB. "The medical face lift: a noninvasive, nonsurgical approach to tissue tightening in facial skin using nonablative radiofrequency". *Dermatology Surgery* 29 (2003): 325-332.
- Deborah S Sarnoff and Robert H. Gotkin. "ACELIFT: A Minimally Invasive Alternative to a Facelift". *Journal of Drugs in Dermatology* (2014).
- 8. Carruthers A and Carruthers J. 'Scale Summit'. *Dermatology Surgery* 34 (2008): S149.

- 9. American Society for Aesthetic Plastic Surgery. Cosmetic Surgery National Data Bank 2010 Statistics on Plastic Surgery.
- 10. Wang F, *et al.* "In vivo stimulation of de novo collagen production caused by cross-linked hyaluronic acid dermal filler injections in photodamaged human skin". *Archives of Dermatology* 143 (2007): 155-163.

Volume 3 Issue 6 June 2019 ©All rights are reserved by Simal Soin and Jaya Pathak.