



Combination Aesthetic Therapies for Whole-Body Rejuvenation

Neil S Sadick*

Department of Dermatology, Weill Medical College of Cornell University, USA

Abstract

Increasing numbers of people around the globe are embracing whole body rejuvenation with non-invasive or minimally invasive treatments to address a variety of cosmetic concerns. Clinicians are rigorously trying to strategically plan and stage treatment plans for their patients that encompass several months and involve distinct therapeutic devices in order to ensure efficacious and safe long-term outcomes. Results of these efforts has led to mounting evidence that combination approaches to whole-body rejuvenation can globally address patients needs leading to greater patient satisfaction, increased patient retention and overall better quality of patient care. This brief commentary describes the authors experience with combination therapies for facial and whole body rejuvenation.

Keywords: Rejuvenation; Aesthetic therapies; Facial

Introduction

Demand for non-invasive aesthetic treatments is soaring across the globe and there is no sign of the trend decelerating. Highly sought treatments span from injectable products such as fillers/toxins, energy-based devices such as radiofrequency, ultrasound and lasers and active cosmetics known as cosmeceuticals that include skin care, eye care, skin lightening and scar care products [1]. Any and all aesthetic concerns faced by patients today can be addressed with overlapping or complementary strategies, and it is rare that a patient has only one specific goal [2-6]. More often than not, patients seek to revitalize their face and body, and address issues of photoaging, dyschromia, loss of tone, rhytides, laxity, localized adiposities and cellulite. In short, they seek to reverse the signs of aging together with setting goals of personalized cosmetic tweaking that they feel will lead to the best aesthetic version of their own self. As the process of aging is multifaceted and the result of a combination of several biologic processes, it is expected that one therapeutic strategy cannot single-handedly address the diverse set of indications the patient is seeking a resolution to. The current trend in the clinical arena is that of a multimodal approach, that exploits several different procedures to treat multiple tissues that are involved in the manifestation of various skin concerns. A growing amount of evidence indicates that this new trend is indeed the most efficacious for both the patient and the treating clinicians [7-12]. Nevertheless, designing effective treatments requires exceptionally strategic thinking by the clinician and thoughtful accounting for the patient's individual budgetary and time constraints. It relies on a change of thinking from viewing the patients as a snapshot in time, to a holistic continuum that will be shaped over time. In this brief commentary, two case studies of patients receiving combination approaches for facial and body rejuvenation are presented. Over the course of time, publication of combination studies will aid in chiseling protocols and ideal stewing of procedures for efficacious, durable and safe outcomes.

In the authors experience most patients request a facial rejuvenation to restore a natural look of youth and glow, as well as tightening and sculpting areas of the body. One of the most versatile energy-based devices that can be combined with other technologies is the multipolar radiofrequency device with pulsed electromagnetic fields (PEMF) and suction (Venus Legacy, Venus Concept, and Toronto, CA). This device uses multiple electrodes to deliver thermal energy to the dermal and subdermal tissue thus stimulating dermal remodeling effects, while the PEMF stimulates fibroblast proliferation, angiogenesis and collagen synthesis in a non-thermal manner, thus augmenting matrix rejuvenation in a synergistic and complementary way [13]. The pulsed suction allows for deep energy penetration, lymphatic drainage, and helps stimulate circulation. The Venus Legacy device is an ideal treatment that can be integrated in combination treatment protocols, such as with fillers, toxins, fractional lasers, acoustic waves and cryolipolysis.

OPEN ACCESS

***Correspondence:**

Neil S Sadick, Department of Dermatology, Weill Medical College of Cornell University, New York, E-mail: nssderm@sadickdermatology.com

Received Date: 06 Oct 2016

Accepted Date: 20 Apr 2017

Published Date: 27 Apr 2017

Citation:

Sadick NS. Combination Aesthetic Therapies for Whole-Body Rejuvenation. Clin Surg. 2017; 2: 1444.

Copyright © 2017 Neil S Sadick. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.



Figure 1A: Female (38-year-old) at baseline, prior to any treatments.

Table 1: Combination protocol for facial rejuvenation.

Treatment	Schedule
CO ₂	Week 1: pre-photos, consultation, and CO ₂ fractional treatment Week 2, 3 recovery
Multipolar RF+PEMF/suction	Week 4, 5, 6, 7, 8, 9 – Weekly multipolar-RF with PEMF/suction (25 min Tx cycles) Week 10: post photos, follow up to discuss results and maintenance Month 3, 6 post photos Month 6 bi-annual multipolar Rf+PEMF/suction maintenance Tx



Figure 1B: After 2 weeks following CO₂ treatment.

Case Presentation

Case 1: Combination treatments for facial rejuvenation

A 38-year-old woman with early signs of aging and skin prone to sun-spots requested full face rejuvenation (Figure 1A and Table 1). Her lifestyle included a lot of traveling and outdoor activity but otherwise she was healthy with an unremarkable medical history. The treatment plan selected for her during consultation was a fractional laser CO₂ followed by six treatments with multipolar radiofrequency with PEMF and suction. This protocol would allow a more intense initial treatment to revitalize the epidermis and upper dermis followed by milder treatments that would stimulate the dermis to remodel and repair without impeding with her lifestyle. After the initial consult, photographs were taken and the patient was prepared for the CO₂ treatment. After three passes (100 mJ, 60 W), the patient was given post-treatment recommendations and scheduled for a follow-up in 2 weeks. After the CO₂ laser treatment photographs were taken to document recovery and results (Figure 1B), and the patient received the first of six Venus Legacy treatments (25 min treatment cycle) to



Figure 1C: After 7 weeks after the completion of the 6 Venus Legacy treatments.



Figure 2A: Female (40-year-old) at baseline.



Figure 2B: After 2 weeks following cryolipolysis treatment.

address the generalized facial laxity. A week after the last RF treatment the patient was seen for a follow-up and post-treatment photographs were taken (Figure 1C). There was clear improvement in the skin laxity, tone and texture. The patient reported high level of satisfaction and was scheduled for a 3- and 6 month follow up for maintenance treatments that would include a bi-annual multipolar RF+PEMF/suction treatment, given of course that no additional issues will have arisen by then. This protocol, both simple and effective in execution provides mutual clinical benefits to the patient and the physician and in the authors experience ensures long-term success.

Case 2: Combination treatments for localized body sculpting

The second patient, a 40-year-old woman, was seeking to reduce the fat in the thigh/buttock area and improve the appearance of her cellulite in the thighs (Table 2). A protocol of cryolipolysis followed by multipolar RF with PEMF and suction was selected during the consult. Although some physicians recommend thermal treatments for laxity to be completed prior to fat removal, as the fat removal procedures may result in side-effects that impede the efficacy of the RF, in the authors experience the reverse sequence is recommended,

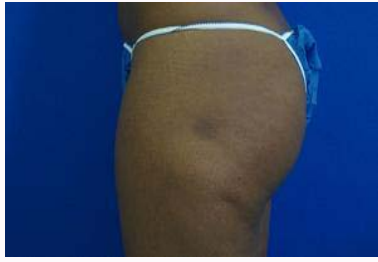


Figure 2C: After 2 weeks following cryolipolysis treatment, side view.



Figure 2D: After 7 weeks following the completion of the 6 Venus Legacy treatments.

as the RF treatments can aid in eliminating the circulating fat as well as accelerating the resolution of the side effects. Thus, in the case of the 40-year-old woman, photographs were taken prior to her commencing the cryolipolysis treatment (Figure 2A). The medium applicator was used and a 50 min cryolipolysis treatment cycle was done according to the manufacturers guidelines. The patient was scheduled for a two-week follow up when post-cryolipolysis photographs were taken (Figure 2B). Visible reduction in the thigh circumference was noted. The areas of cellulite, a separate indication from the localized thigh adiposities, were photographed prior to commencing the six Venus Legacy RF treatments (Figure 2C). Following the RF treatment (30 min cycle), the patient was scheduled for 5 additional weekly treatments. A week after the last treatment a follow-up for consultation and photographs was scheduled (Figure 2D). The patient expressed high satisfaction with the reduction of the thigh circumference and visible improvement of the cellulite appearance. After discussion with the clinician, and recommendations for following a healthy active lifestyle, follow up visits were scheduled at 3 and 6 months with the goal of establishing an annual maintenance program to secure the long-term effects of the treatments.

Conclusion

Combination aesthetic treatments are an integral to achieving successful whole body rejuvenation. Treatments can be done the same day but also staged at regular intervals, especially when performing treatments such as fractional laser ablation, or subcision that are anticipated to result in swelling and erythema. Moreover, several parts of the body can be targeted and treated, although extra care should be taken when treating areas of the body that, in contrast with the face, have diminished regenerative capacity due to vascularity or lack of pilosebaceous units [14,15]. Combining energy-based devices with each other are most successful when they don't overlap in the mechanism of action (thermal with non-thermal), and when they don't target the same tissue layers (epidermis versus subcutaneous

Table 2: Combination protocol for localized body sculpting.

Treatment	Schedule
Cryolipolysis	Week 1: pre-photos, consultation, and CO2 fractional treatment
	Week 2, 3 recovery
Multipolar RF+PEMF	Week 4, 5, 6, 7, 8, 9 – Weekly multipolar-RF with PEMF/suction (30 min Tx cycles)
	Week 10: post photos, follow up to discuss results and maintenance
	Month 3, 6 post photos
	Month 12 Annual multipolar Rf+PEMF/suction maintenance Tx

fat). Together with fillers/toxins and topical cosmeceuticals, always in the context of a healthy lifestyle in terms of activity and nutrition, these regimes are anticipated to simplify over time and become an indispensable part of patient's warranting their well-being [16,17].

References

1. Medical Aesthetics Market worth \$69,786 Million by 2021. Prime Journal. 2016.
2. Commander SJ, Chang D, Fakhro A, Nigro MG, Lee EI. Noninvasive Facial Rejuvenation. Part 1: Patient-Directed. *Semin Plast Surg.* 2016;30(3):129-33.
3. Dickey RM, Louis MR, Cox JA, Mohan K, Lee EI, Nigro MG. Noninvasive Facial Rejuvenation. Part 2: Physician-Directed-Neuromodulators and Fillers. *Semin Plast Surg.* 2016;30(3):134-42.
4. Meaie JD, Agrawal N, Chang D, Lee EI, Nigro MG. Noninvasive Facial Rejuvenation. Part 3: Physician-Directed-Lasers, Chemical Peels, and Other Noninvasive Modalities. *Semin Plast Surg.* 2016; 30(3):143-50.
5. Sadick N, Rothaus KO. Minimally Invasive Radiofrequency Devices. *Clin Plast Surg.* 2016;43(3):567-75.
6. Sadick N, Rothaus KO. Aesthetic Applications of Radiofrequency Devices. *Clin Plast Surg.* 2016;43(3):557-65.
7. Butterwick K, Sadick N. Hand Rejuvenation Using a Combination Approach. *Dermatol Surg.* 2016;42:S108-18.
8. Friedmann DP, Fabi SG, Goldman MP. Combination of intense pulsed light, Sculptra, and Ultherapy for treatment of the aging face. *J Cosmet Dermatol.* 2014;13(2):109-18.
9. Woodward JA, Fabi SG, Alster T, Colon-Acevedo B. Safety and efficacy of combining microfocused ultrasound with fractional CO2 laser resurfacing for lifting and tightening the face and neck. *Dermatol Surg.* 2014;12(40):S190-3.
10. Carruthers JD, Glogau RG, Blitzer A. Facial Aesthetics Consensus Group. Advances in facial rejuvenation: botulinum toxin type a, hyaluronic acid dermal fillers, and combination therapies--consensus recommendations. *Plast Reconstr Surg.* 2008. 121(5):5S-30S.
11. Beer KR. Combined treatment for skin rejuvenation and soft-tissue augmentation of the aging face. *J Drugs Dermatol.* 2011;10(2):125-32.
12. Alster TS, Doshi SN, Hopping SB. Combination surgical lifting with ablative laser skin resurfacing of facial skin: a retrospective analysis. *Dermatol Surg.* 2004;30:1191-5.
13. Sadick NS, Malerich SA, Nassar AH, Dorizas AS. Radiofrequency: an update on latest innovations. *J Drugs Dermatol.* 2014;13(11):1331-5.
14. Coleman KM, Pozner J. Combination Therapy for Rejuvenation of the Outer Thigh and Buttock: A Review and Our Experience. *Dermatol Surg.* 2016;42:S124-30.
15. Weiss M, Mahoney AM, Gold M, Lawrence N. Leg Rejuvenation: A Combination Approach: A Review and Our Experience. *Dermatol Surg.* 2016;42(2):S131-8.

16. Jacob S, Hersant B, Mezi MS, Meningaud JP. Factors That May Enhance Longevity: A Literature Review and a Comprehensive Update for Aesthetic Surgeons. *Aesthetic Plast Surg*. 2016;40(4):625-31.
17. Carruthers J, Burgess C, Day D, Fabi SG, Goldie K, Kerscher M, et al. Consensus Recommendations for Combined Aesthetic Interventions in the Face Using Botulinum Toxin, Fillers, and Energy-Based Devices. *Dermatol Surg*. 2016;42(5):586-97.