Resist Urge to Inject More Filler Than Needed

BY BETSY BATES
Los Angeles Bureau

SANTA BARBARA, CALIF. — Resist temptation.

When the patient looks good, but the syringe in your hand still contains leftover Restylane or Juvederm, “Put it down,” advised Dr. Allan Wirtzer, a dermatologist in private practice in Sherman Oaks, Calif. “Don’t feel that you have to use an entire syringe on these patients.”

“I don’t say I’ll find a place to put it.” You don’t have to put it anywhere, he said during a panel on aesthetic complications during the annual meeting of the California Society of Dermatology and Cosmetic Surgery.

Dr. Wirtzer said most of the cases he sees for correction of aesthetic filler procedures boil down to technique error: “Many times, people are injecting too much, too superficial, too soon, and sometimes, it’s just a poor choice of material,” he said.

Filler materials are expensive, so some physicians want to inject every drop. But if you see a blanch and realize you have injected below the orbital ridge, “vigorously massage the hell out of it,” he said.

“[Don’t say,] I’ll find a place to put it.”

Photography, Psoriasis Work Recognized

Dr. John J. Voorhees will receive the 2009 Eugene J. Van Scott Award for Innovative Photography of the Skin. The Skin & Allergy News recently recognized his key contributions in the treatment of psoriasis and atopic skin, including work leading to the greater use of immunosuppressive agents for psoriasis, as well as research in the use of retinoids to combat photodamage.

Dr. Voorhees will receive the award at the American Academy of Dermatology's 2009 annual meeting in March. For more information, contact the photographer at 888-462-3376.

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30 Aesthetic Dermatology

Minimize pain with ice and topical and local anesthetics.

Invest in $3 handheld squeeze balls, which create a distraction for the patient during filler injections.

If you see a blanch and realize you have an infection in a vessel, vigorously massage the hell out of it.

Above all, be meticulous in preprocedure discussions with patients about expected sequelae of the treatment. Dr. Wirtzer advised. “When you discuss that a person’s going to get red or get swollen, it isn’t seen as a complication; it’s a natural event that follows the treatment.”

If it is discussed only after the fact, however, it is seen by the patient as an “excuse meant to explain away a perceived complication,” he said.

Dr. Wirtzer disclosed that he serves as a consultant to Medicis Pharmaceutical Corp., maker of Restylane, and Aventis Dermatology, maker of Sculptra.

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