Sculptra May Have Role in Volume Replacement of Hands

Las Vegas — The filler poly-L-lactic acid is indicated for HIV facial atrophy, but in experienced hands it is also safe for volume replenishment of tear troughs and hands. Dr. Neil S. Sadick said at an international symposium on cosmetic and laser surgery. Before the procedure, instruct patients not to take aspirin, ibuprofen, or platelet inhibitors. Apply a topical anesthetic, such as lidocaine, under occlusion for 30 minutes to the treatment area. “When the S-Caine peel is available, it will replace topical lidocaine,” predicted Dr. Sadick, who is in private practice in New York.

Poly-L-lactic acid (Sculptra) is a synthetic filler that requires reconstitution at least 2 hours prior to treatment. Although the instructions for use indicate that the filler can sit reconstituted up to 2 weeks, “it can stay for a couple of months, according to sever al restorers,” Dr. Sadick said. Proper dilution and technique are required. For tear troughs or hands, dilute the poly-L-lactic acid in 6 cc of sterile water and 2 cc of 1% lidocaine. For hands, 2 vials of poly-L-lactic acid and prepare eight 1-cc syringes (four for each hand) with 26-gauge half-inch needles. Have ice packs available.

“The most important factor is to tent the skin to minimize the bruising when injecting between each intraosseous space,” said Dr. Sadick. “Always aspirate to make sure you are not in a blood vessel,” he said. Once the injections are finished, vigorously massage the area for 10 minutes and then apply ice packs for another 10 minutes. Repeat this regimen for three cycles to avoid the formation of nodules and to minimize pain, said Dr. Sadick, who is a consultant for Dermik Laboratories Inc., the manufacturer of Sculptra.

The volumetric effect goes away in the first few weeks, but collagen remodeling produces a late effect that lasts 6-9 months, Dr. Sadick said. “Optimal results are seen after two or three treatment sessions at 3- to 4-week intervals.”

Sculptra May Have Role in Volume Replacement of Hands

‘Retro’ Method Touted for Some Hair Transplants

BY DAMIAN McNAMARA
Miami Bureau

Las Vegas — Hair transplantation using follicular isolation is labor intensive and not for everyone, but the technique serves a subset of patients very well, Dr. Paul T. Rose said at an international symposium on cosmetic and laser surgery.

Unlike the more popular follicular unit extraction, in which hair follicles are extracted together from a donor hair strip, the isolation technique involves removal of individual follicles.

“What I am about to tell you some people would call a return to the 20th century. It’s a retro method—we are going back to a punch biopsy, a 1-mm punch,” Dr. Rose said.

Patients who are younger, want a scar revision, have limited donor hair, or are concerned about a linear scar from a donor strip are candidates. About 15% of Dr. Rose’s hair transplantation patients fit one of these categories, he said.

“These days it is not enough to have a great result in the recipient area. The result in the donor area is becoming increasingly important,” he noted. Some patients are “very concerned” after seeing donor site scar photos on the Internet, said Dr. Rose, who is in private practice in Tampa, Fla.

The donor site is shown immediately after individual hair follicles were harvested with a punch.

One day after the procedure, healthy growth is seen in the hair follicles immediately surrounding the grafts.

Four days after the procedure, the donor site has resumed a normal appearance.

‘Retro’ Method Touted for Some Hair Transplants

Las Vegas — Hair transplantation using follicular isolation is labor intensive and not for everyone, but the technique serves a subset of patients very well, Dr. Paul T. Rose said at an international symposium on cosmetic and laser surgery.

Unlike the more popular follicular unit extraction, in which hair follicles are extracted together from a donor hair strip, the isolation technique involves removal of individual follicles.

“What I am about to tell you some people would call a return to the 20th century. It’s a retro method—we are going back to a punch biopsy, a 1-mm punch,” Dr. Rose said.

Patients who are younger, want a scar revision, have limited donor hair, or are concerned about a linear scar from a donor strip are candidates. About 15% of Dr. Rose’s hair transplantation patients fit one of these categories, he said.

“These days it is not enough to have a great result in the recipient area. The result in the donor area is becoming increasingly important,” he noted. Some patients are “very concerned” after seeing donor site scar photos on the Internet, said Dr. Rose, who is in private practice in Tampa, Fla.

The donor site is shown immediately after individual hair follicles were harvested with a punch.

One day after the procedure, healthy growth is seen in the hair follicles immediately surrounding the grafts.

Four days after the procedure, the donor site has resumed a normal appearance.