NEUROTOXINS AND AESTHETICS

By Michael Chism, OD mtchism55@gmail.com

- Babe Lash, Latisse, Lash Boost.
- Owner of Optometric Aesthetics, LLC

DISCLOSURES

No affiliation with Allergan - Juvederm/Botox[®], Upneeq[®], Lumify[®]

Neurotoxin trainings, iLight IPL machine, electrosurgery machine

OVERVIEW

- Beauty and the aging face
- Neurotoxins Therapeutic & Cosmetic
- Dermal Fillers
- IPL Intense Pulsed Light
- Pharmaceuticals for aesthetics
- Lumps and bumps removal
- Other facial treatments

BEAUTY AND AESTHETICS

- The beauty industry is a 500 billion industry
- Optometrists have opportunities to take a piece of the pie doing aesthetics
- Merriam-Webster definition for Aesthetics Relating to art or beauty; done or made to improve a person's appearance or to correct defects in a person's appearance
- Why do aesthetics?
 - Its fun, it pays well, and no billing to insurance
 - Your patients are doing this anyway, why not help them?





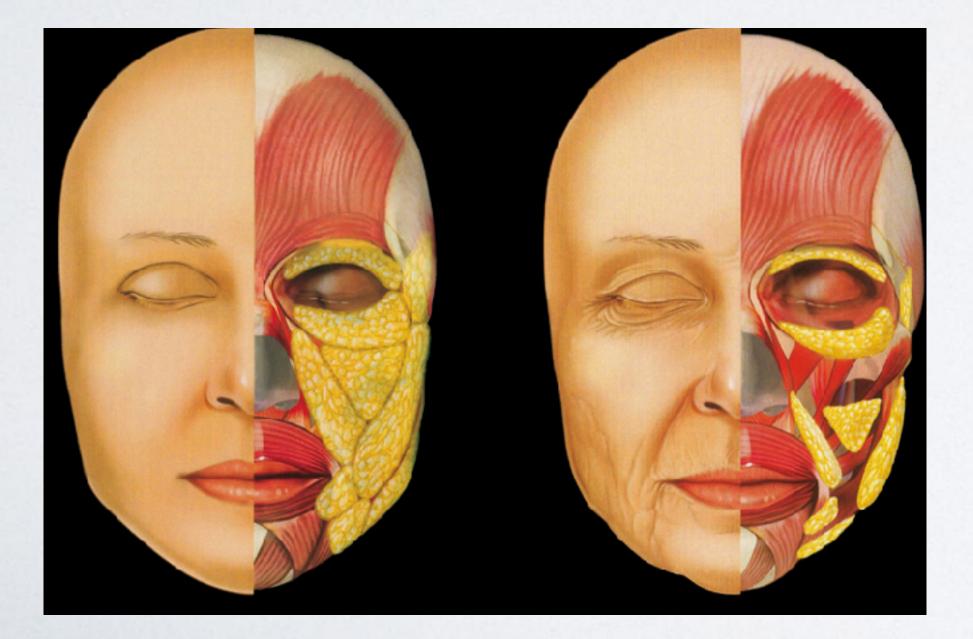
THE AGING FACE

- With age there is wisdom and experience but it also comes with other changes
- Deep creases are formed from facial expressions
- Fines lines formed by sun damage, smoking and natural degeneration
- Looser skin from loss of collagen and elastin
- Puffy or dark circles under eyes

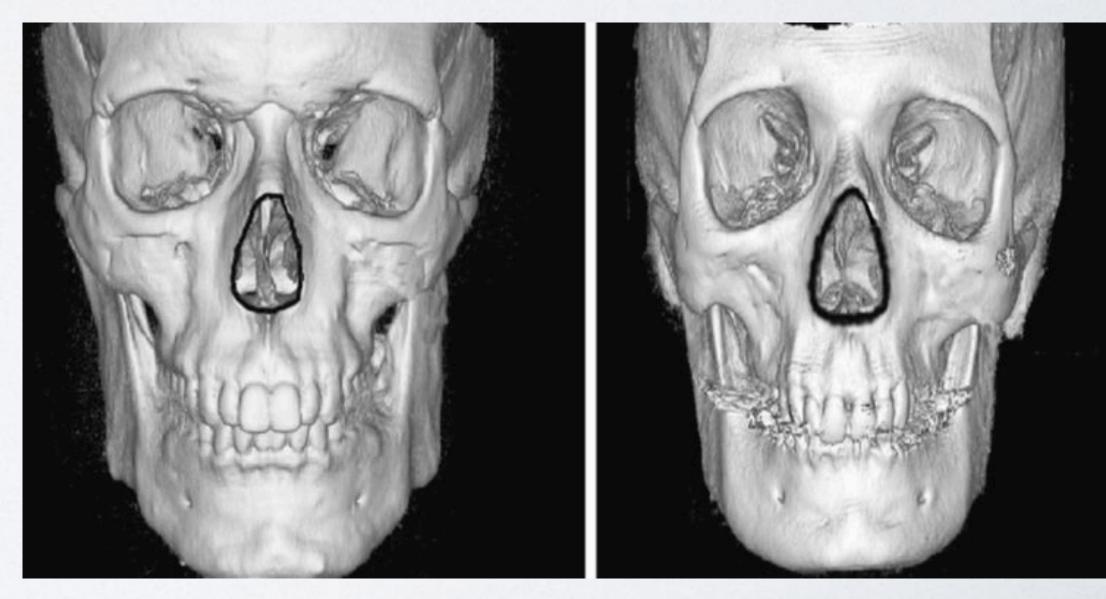


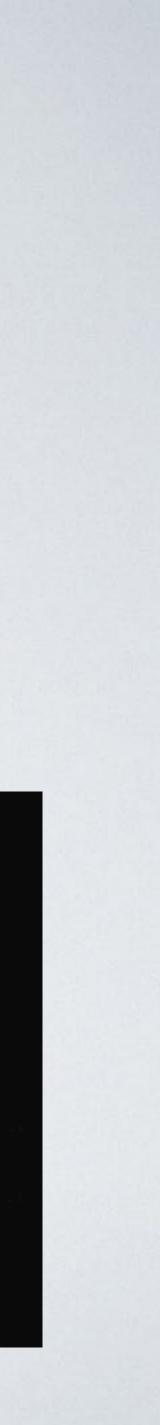
THE AGING FACE

Fat pads shrink and migrate downward



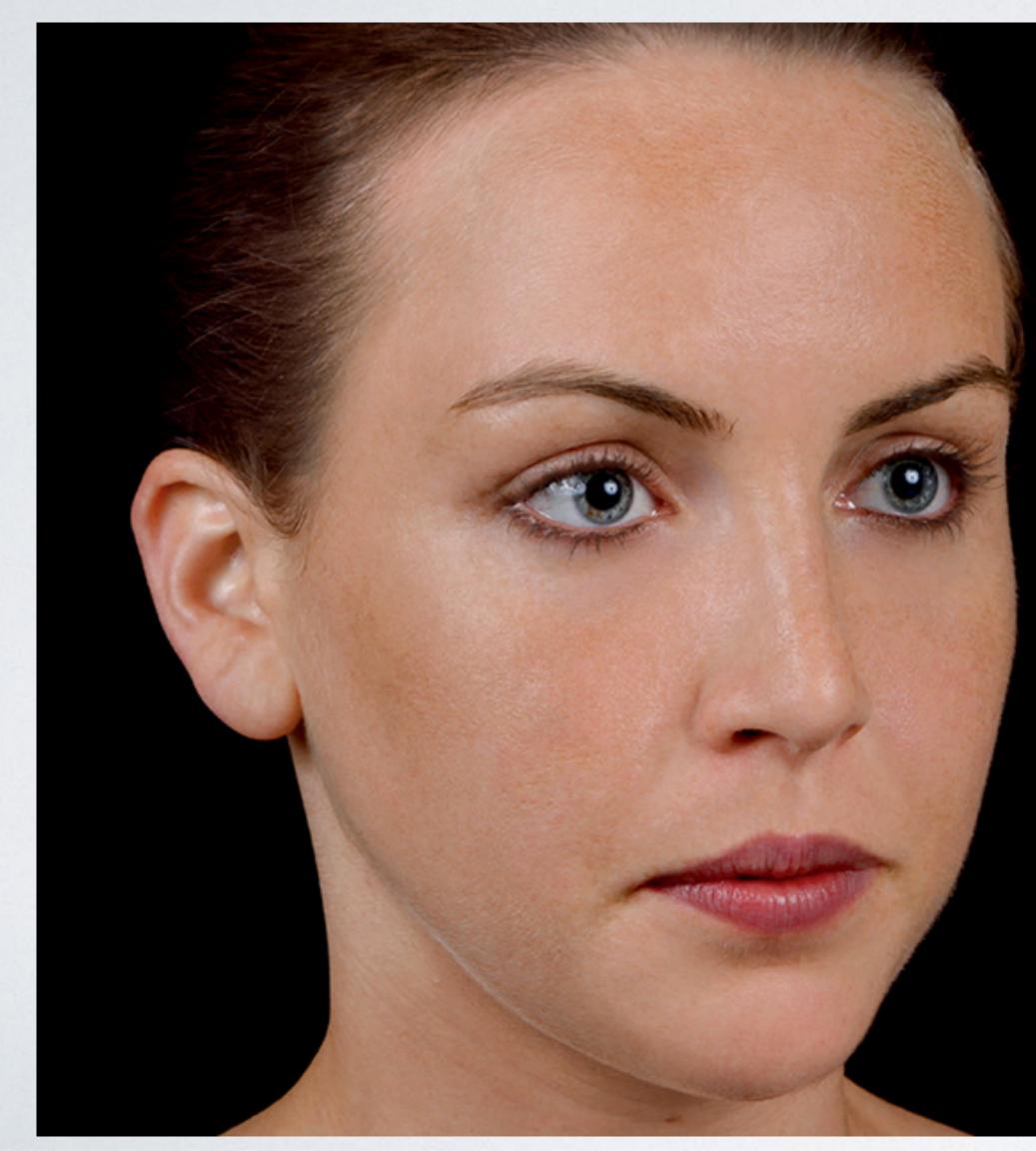
Decrease in bone density

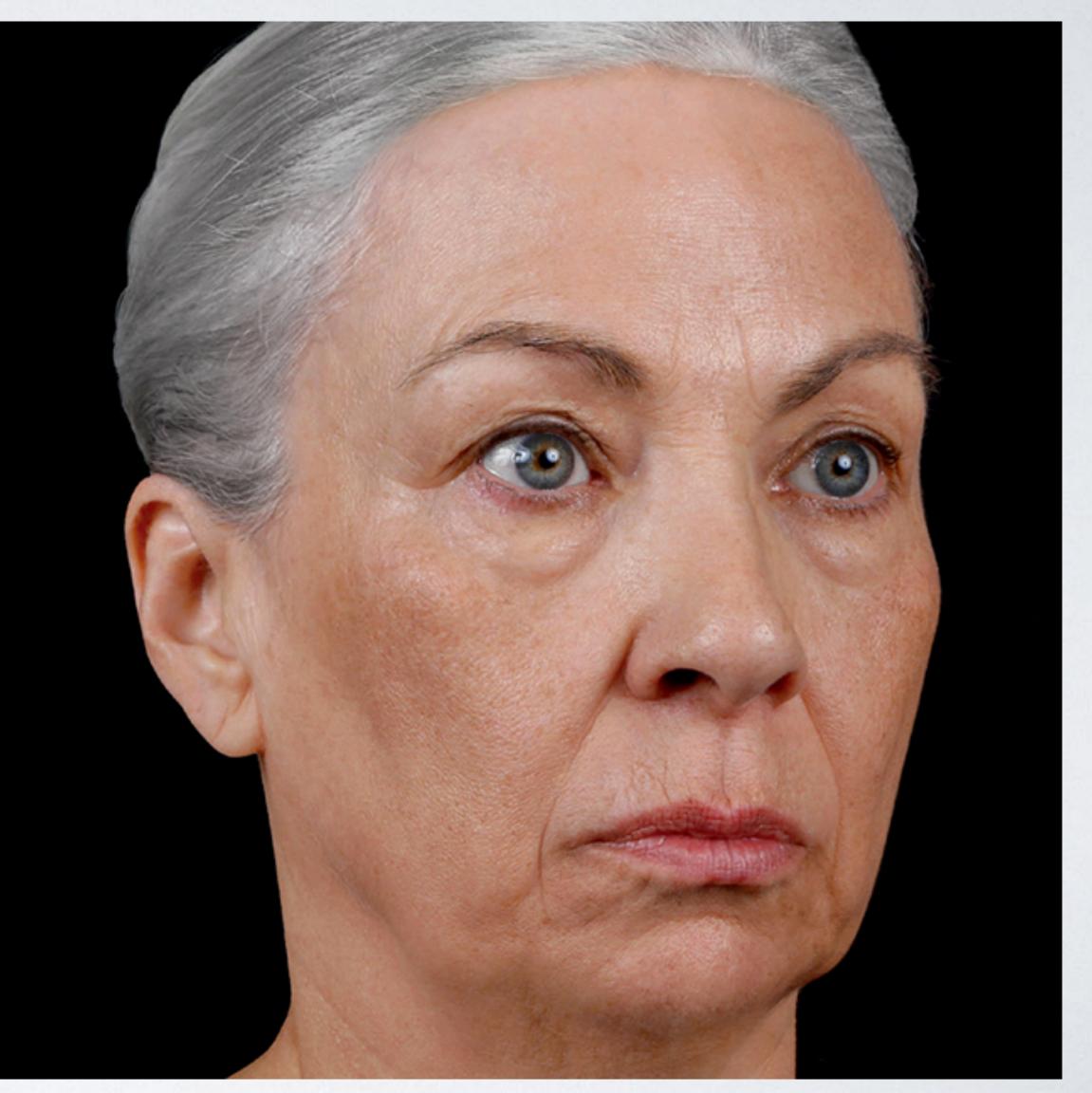






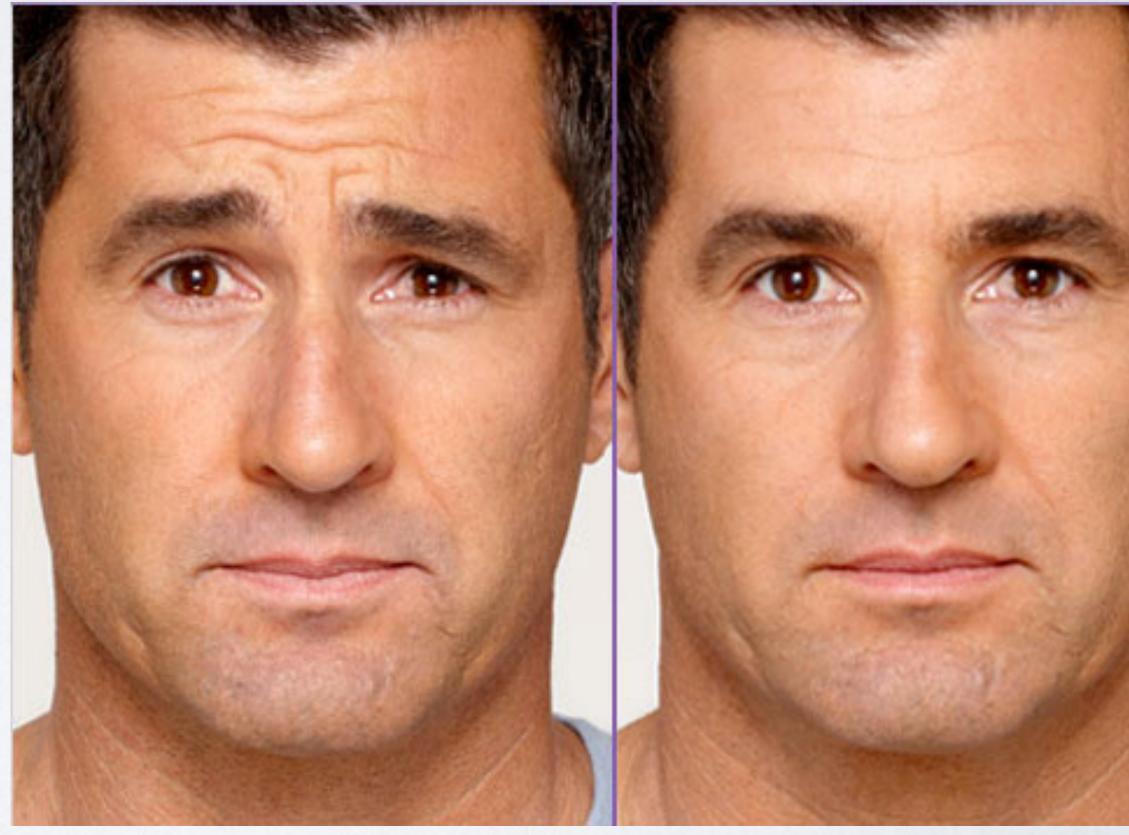
THE AGING FACE





- Dynamic vs. static
- Dynamic rhytids are lines when expressions are made
- Static rhytids are lines when face is at rest

RHYTIDS "WRINKLES"





NEUROTOXINS FOR COSMETICS Botox, Dysport, Xeomin, Jeuvea



NEUROTOXINS

- Onabotulinumtoxin-A (Botox)
- Incobotulinumtoxin-A (Xeomin)
- Abobotulinumtoxin-A (Dysport)
- Prabotulinumtoxin-A (Jeuveau)

NEUROTOXIN HISTORY

- 1895 Botulinum toxin first identified
- 1978 FDA approved Type "A" for testing in humans
- 1989 First Botox FDA approval for Strabismus and Blepharospasm
- 2000 Botox FDA approval for Cervical Dystonia
- 2002 Botox FDA approval for Glabella Lines

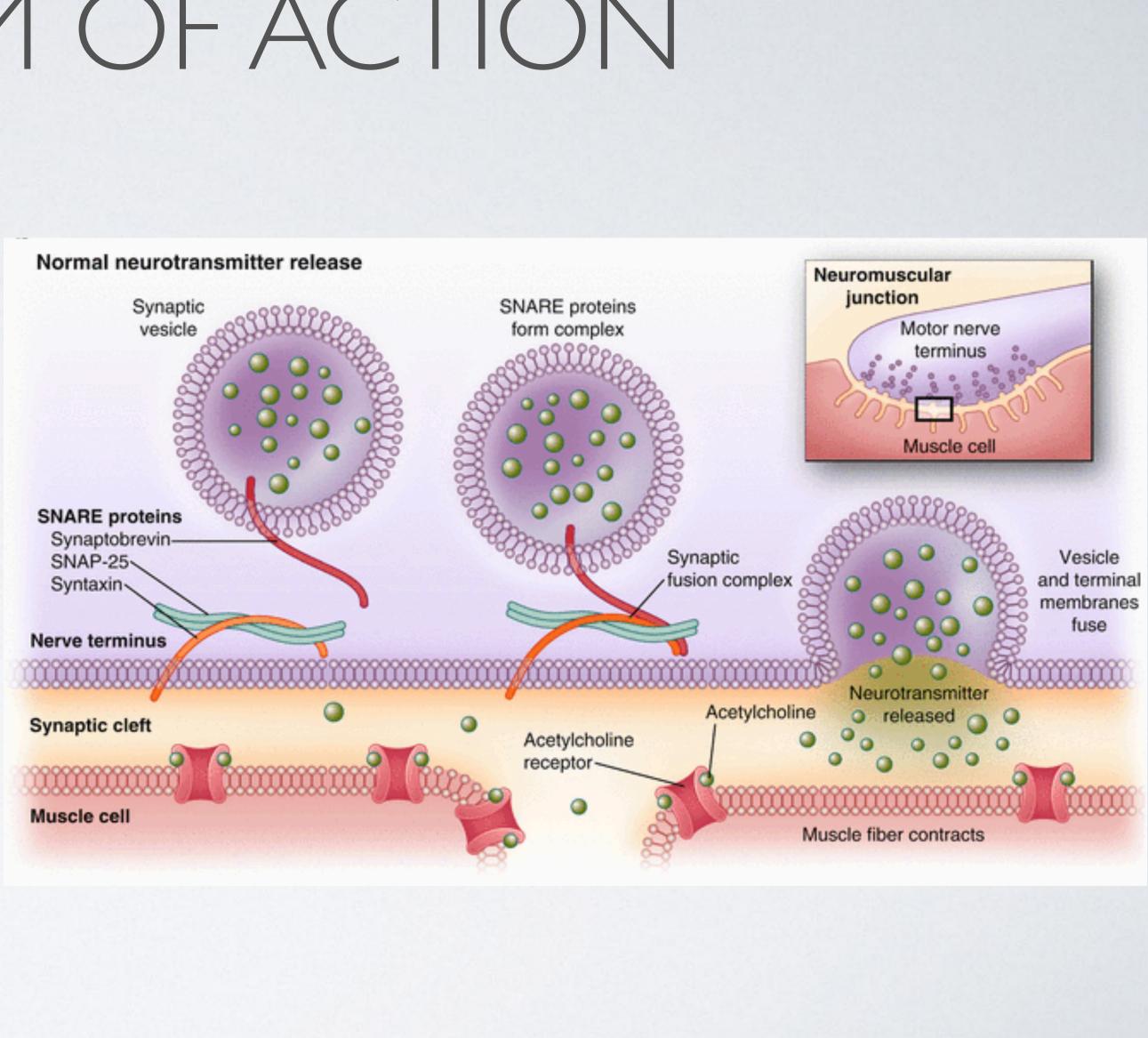


- 2012 Botox FDA approval for Chronic Migraines
- 2013 Botox FDA approval for lateral Canthal Folds (Crows Feet)
- 2015 Botox FDA approval for Overactive Bladder
- 2017 Botox FDA approval Forehead Rhytids, Dysport FDA approved for glabella
- 2019 Jeuveau FDA approved for glabella



MECHANISM OF ACTION

- Derived from Clostridium Botulinum
 - 8 serotypes (<u>A</u>, B, C, D, E, F, G, H)
- Botox cleaves SNAP-25 on motor neuron
- Blocks release of Acetylcholine at NM junction
- Prevents release of ACh and muscle contraction



NEUROTOXIN COSMETIC

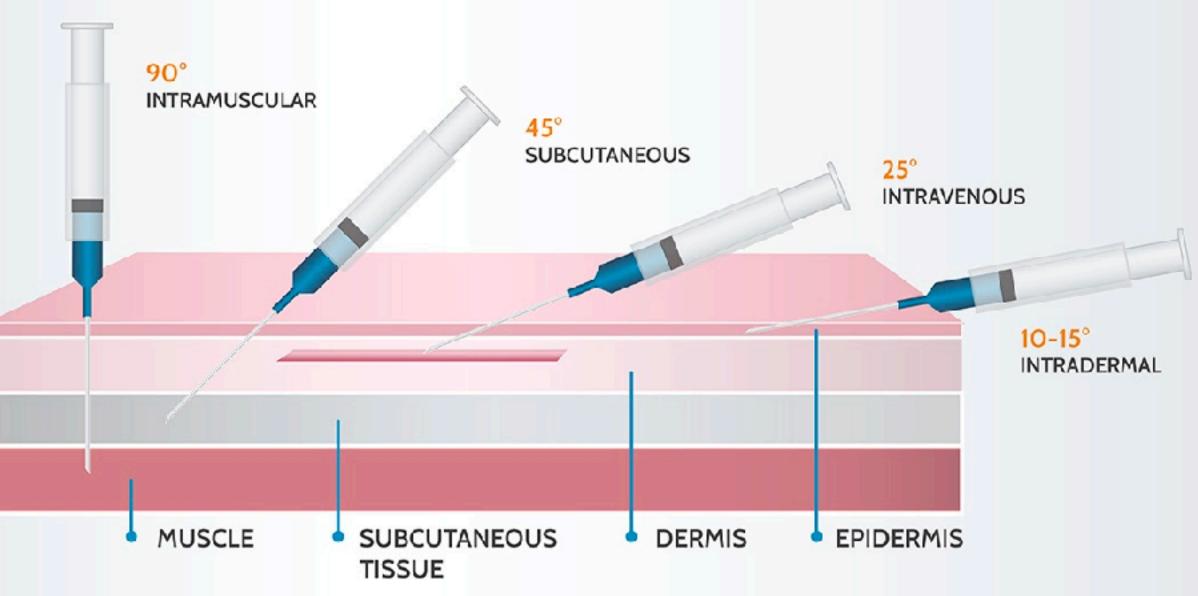
- NOT good candidates:
 - Allergy to botulinum toxin
 - Pregnant or nursing (category C)
 - Skin infections at target site

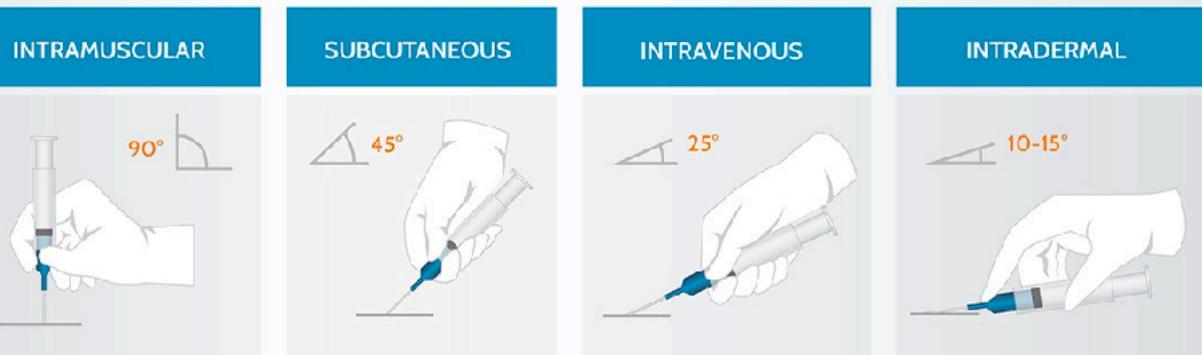
Neuromuscular conditions (myasthenia gravis, muscular dystrophy, ALS)



INJECTION DEPTHS

 The angle of insertion will determine the depth of the needle







NEUROTOXIN COSMETIC



Lateral canthid rhytids "Crows feet" Glabella complex rhytids "||'s" Frontallis rhytids "Forehead wrinkles"



BOTOX COSMETIC - ON-LABEL



Superior Margin of Frontalis Activity

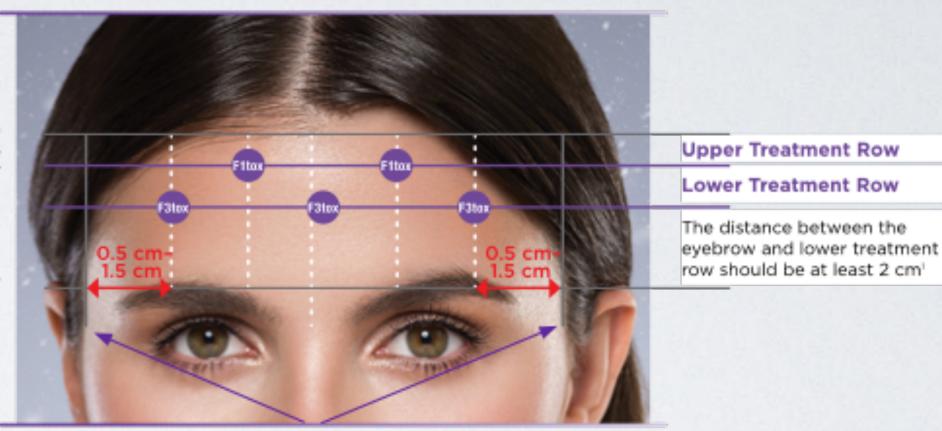
The following injection sites are recommended for on-label treatment with BOTOX® Cosmetic (onabotulinumtoxinA):

BOTOX* Cosmetic is indicated in adult patients for the temporary improvement in the appearance of:

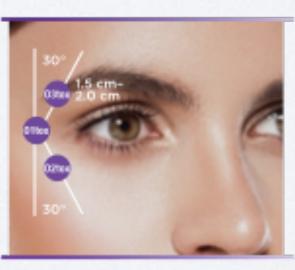
- Moderate to severe forehead lines associated with frontalis muscle activity
- Moderate to severe lateral canthal lines associated with orbicularis oculi activity
- Moderate to severe glabellar lines associated with corrugator and/or procerus muscle activity



Eyebrow



Temporal Fusion Line



Injection Pattern 1

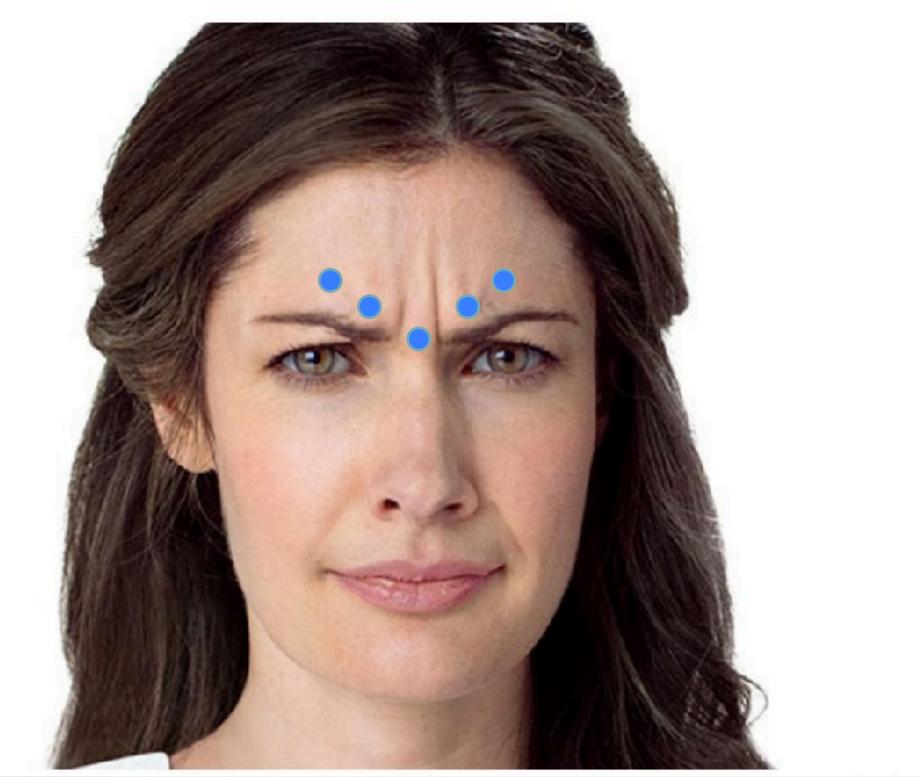




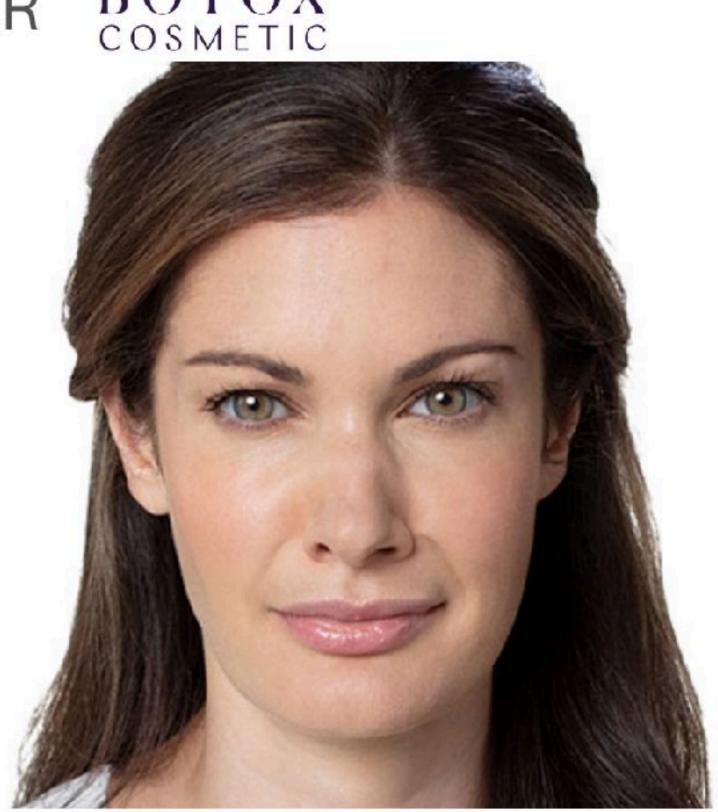
Injection Pattern 2

GLABELLA COMPLEX "I I'S"

BEFORE

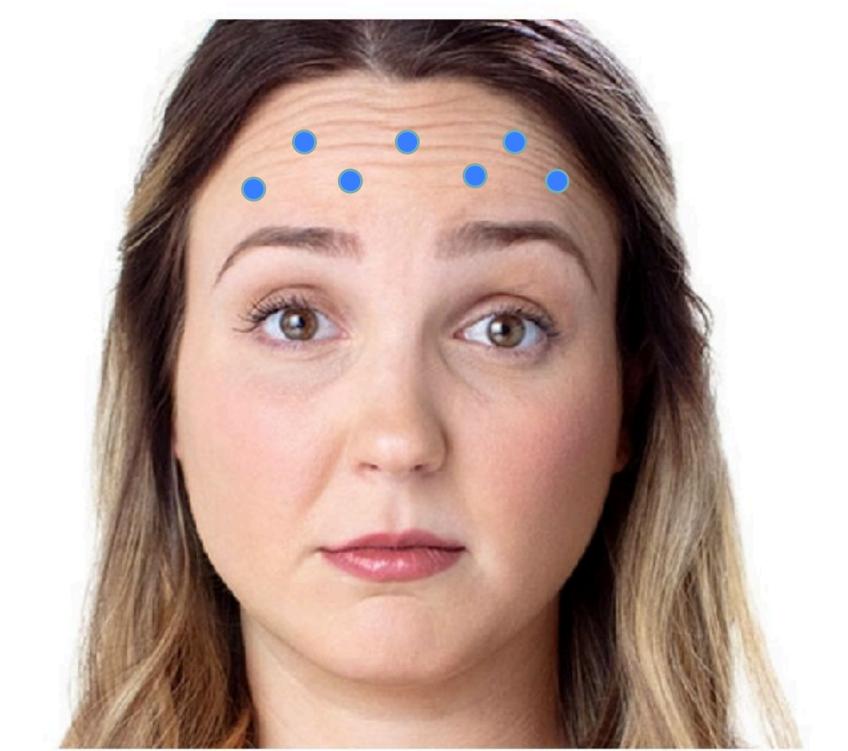


AFTER BOTOX COSMETIC



FRONTALIS RHYTIDS

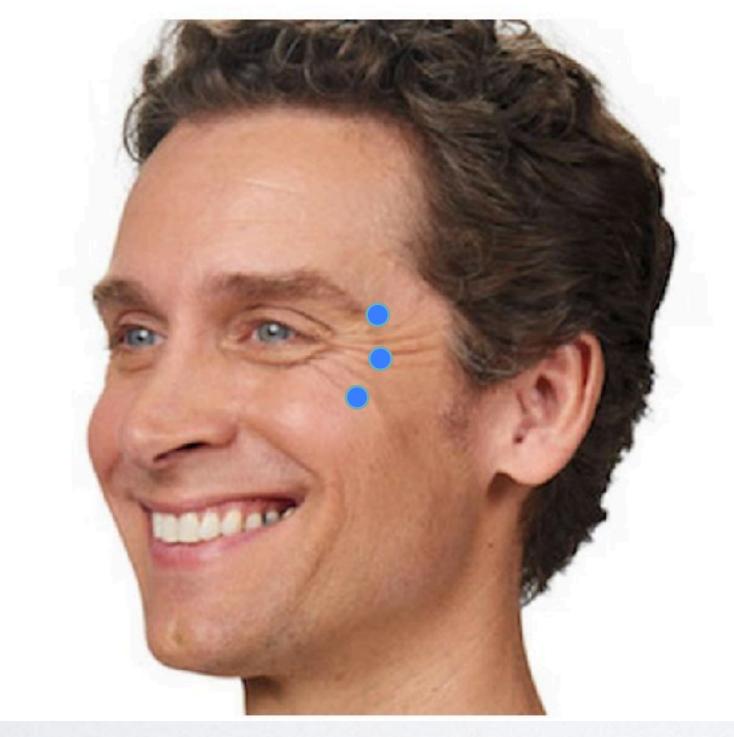
BEFORE



AFTER BOTOX COSMETIC

LATERAL CANTHID RHYTIDS

BEFORE





BOTOX THERAPEUTIC 100 and 200 unit bottles

For blepharospasm, strabismus, hemi-facial spasms



BLEPHAROSPASM

- Blepharospasm focal dystonia of the obicularis oculi
 - Involuntary repetitive blinking or sustained closed lids
- Onset usually between 5th and 7th decade of life*Brin et al
- pain

• Symptoms include: Excessive blinking, dry eyes, light senstivity, ocular

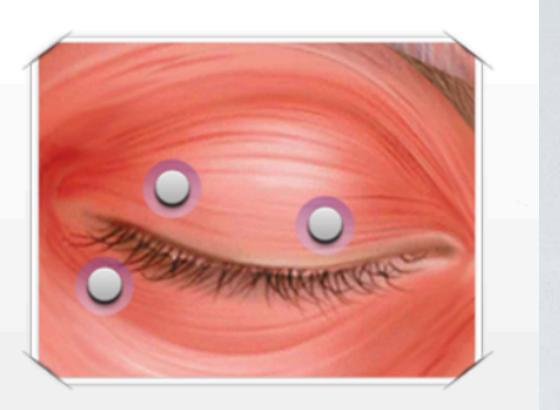
BLEPHAROSPASM CONT.

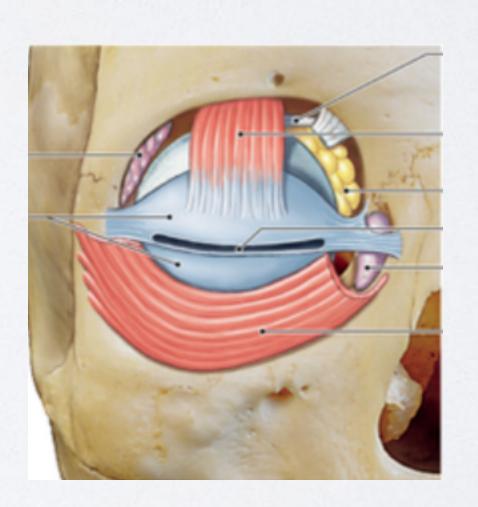
- Treatments:
 - Dry eye artificial tears, Restasis, Xiidra
 - Neurotoxins

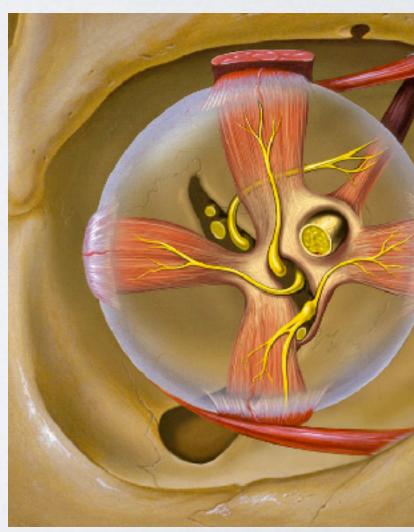
BLEPHAROSPASM CONT.

- Botox for blepharospasm
- Three FDA approved injection sites •
 - 1.25 to 2.5 units each site, then add more in 2 weeks if necessary
 - Avoid levator palpebrae superioris to prevent ptosis •
 - Avoid medial LL to prevent diplopia (inferior oblique • muscle paresis
- Adverse reactions: Ptosis (21%), SPK (6%), dry eyes (6%) •











STRABISMUS

- Misaligned eyes occurs in approximately 1-3% in children*Gunton et al
- Abducen nerve palsy (microvascular disease, trauma, idiopathic, etc)
- Treatment options glasses, glasses with prism, vision therapy, surgery, and botulinum toxin (FDA approved more than 30 years ago)



STRABISMUS CONT.

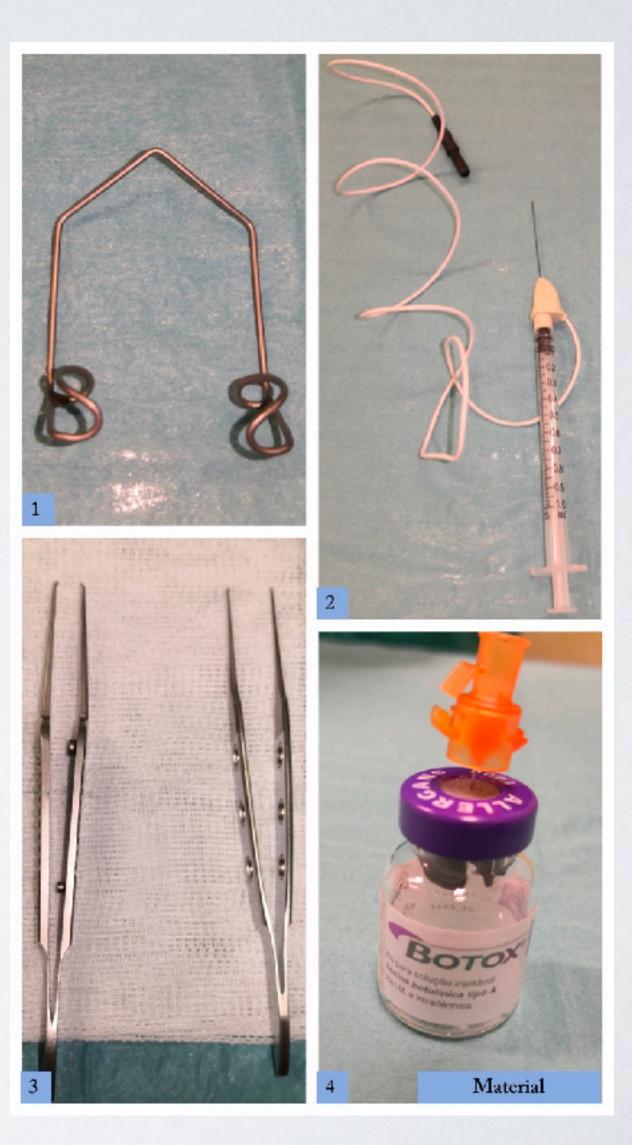
- Botulinum toxin used on overacting muscle for temporary fix (3-4 months)
- Indications:
 - Esotropia/Exotropia <40D
 - Acute paralytic strabismus (6th nerves palsies)
 - Adjunct to surgery for large ET, XT or 6th nerve palsy
 - TED when surgery not recommended (actively inflamed)

STRABISMUS CONT.

- Botulinum toxin LEAST effective
 - Large deviations
 - Restrictive/mechanical (trauma, chronic TED)
 - Alphabetical patterns (A,V, X syndromes)

STRABISMUS CONT.

- Technique:
 - Apply electromyogram (EMG) electrodes
 - Anesthetize area
 - Apply lid speculum
 - Needle placed into the muscle while looking away, then advanced looking toward needle until EMG sounds
 - 1.5 to 5 U injected in the muscle, and slowly removed



11.1 Botox Lateral Rectus

HEMIFACIAL SPASM

- often near brain stem
- Treatments
 - Microvacscular decompression surgery (MVD)
 - Neurotoxins (off-label)

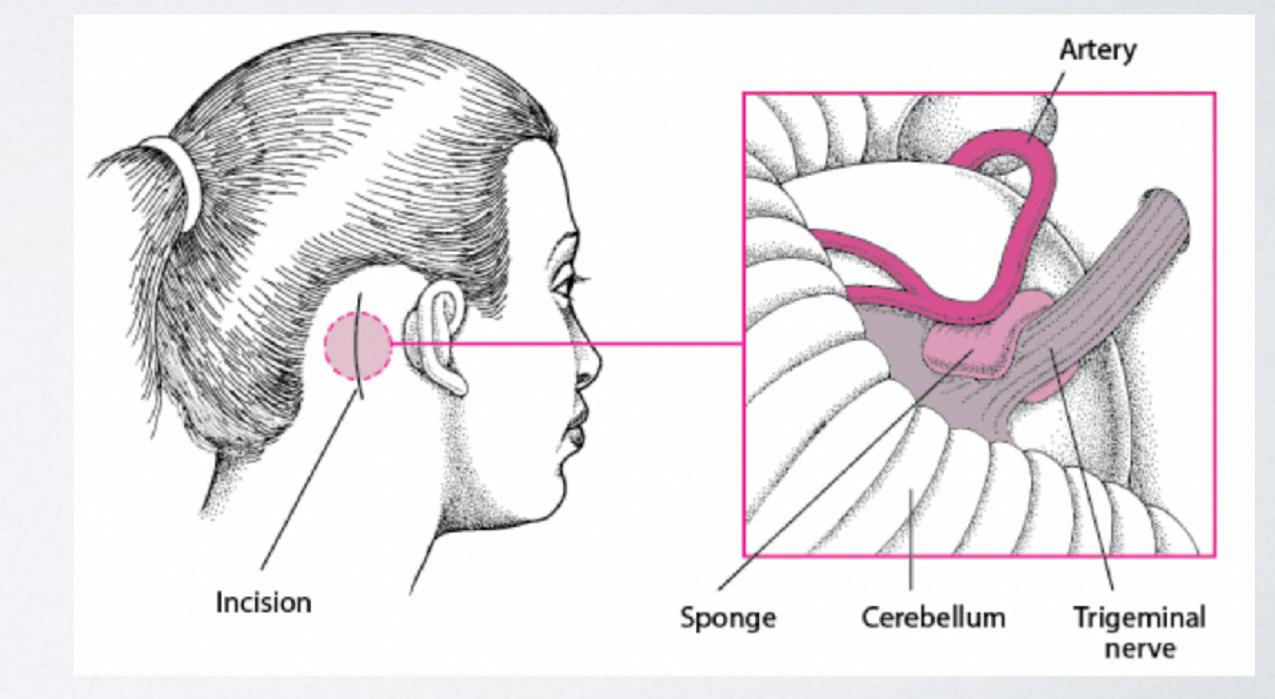
• Involuntary twitching of facial muscles due to pressure against the facial nerve,

• Diagnosis by MRI - May be from malpositioned artery, artery loop or tumor



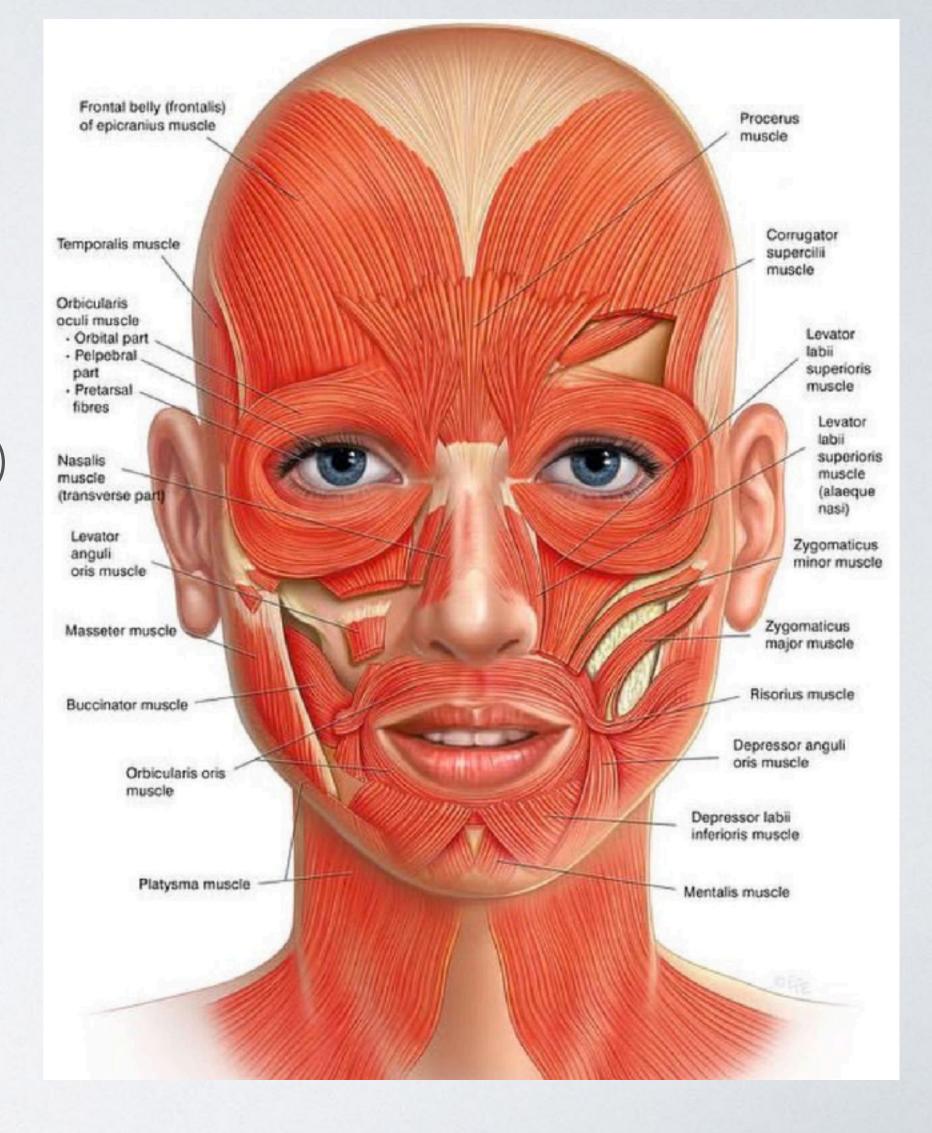
- Treatment
 - Microvascular decompression surgery (MVD)
 - Sponge is placed between the artery and the facial nerve
 - Possible side effects (low risk) facial numbness, diplopia, infection, bleeding, hearing and balance issues, paralysis
 - 15% chance of recurrence •

HEMIFACIAL SPASM CONT.



- Treatment with Neurotoxin
 - 2 10 U Neurotoxin injected in the twitching muscles
 - Discuss possible side effects (ptosis, change in smile, etc)
- Myokymia? Treat it like we normally would... (reduce stress, more sleep, less caffeine, maybe glasses)
 - Chronic? MRI to rule out hemifacial spasm
 - Quinine (found in tonic water), beta blocker (timolol)

HEMIFACIAL SPASM CONT.



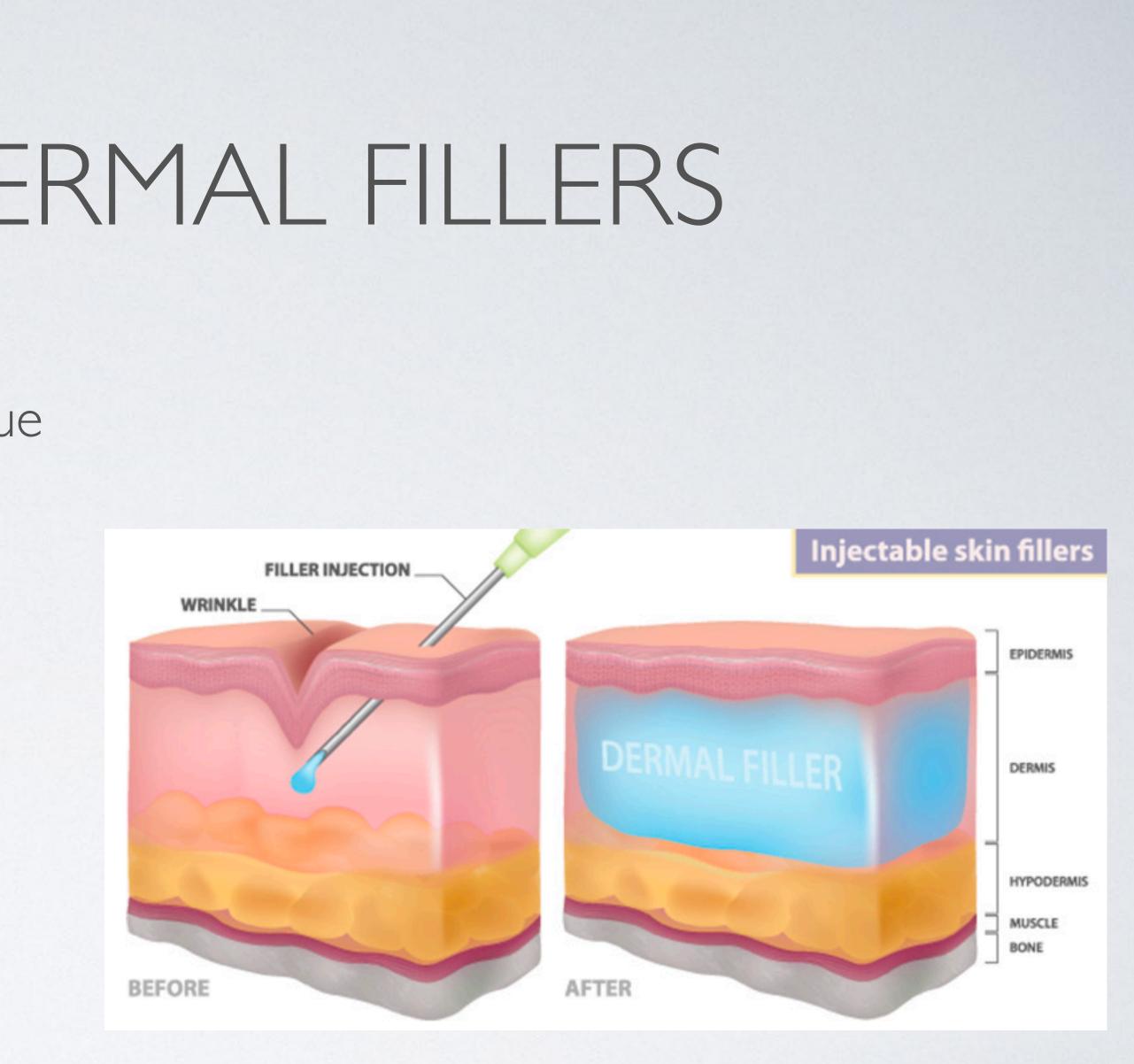
DERMAL FILLERS





WHAT ARE DERMAL FILLERS

- Dermal Fillers are used to fill in volume loss due natural loss of fat and bone density
- Most are made of hyaluronic acid
 - Dissolvable by hyaluronidase
- Sculptra Poly-L-Lactic acid (PLLA) stimulates collagen, but not dissolvable
- Good for deep wrinkles and restore volume loss



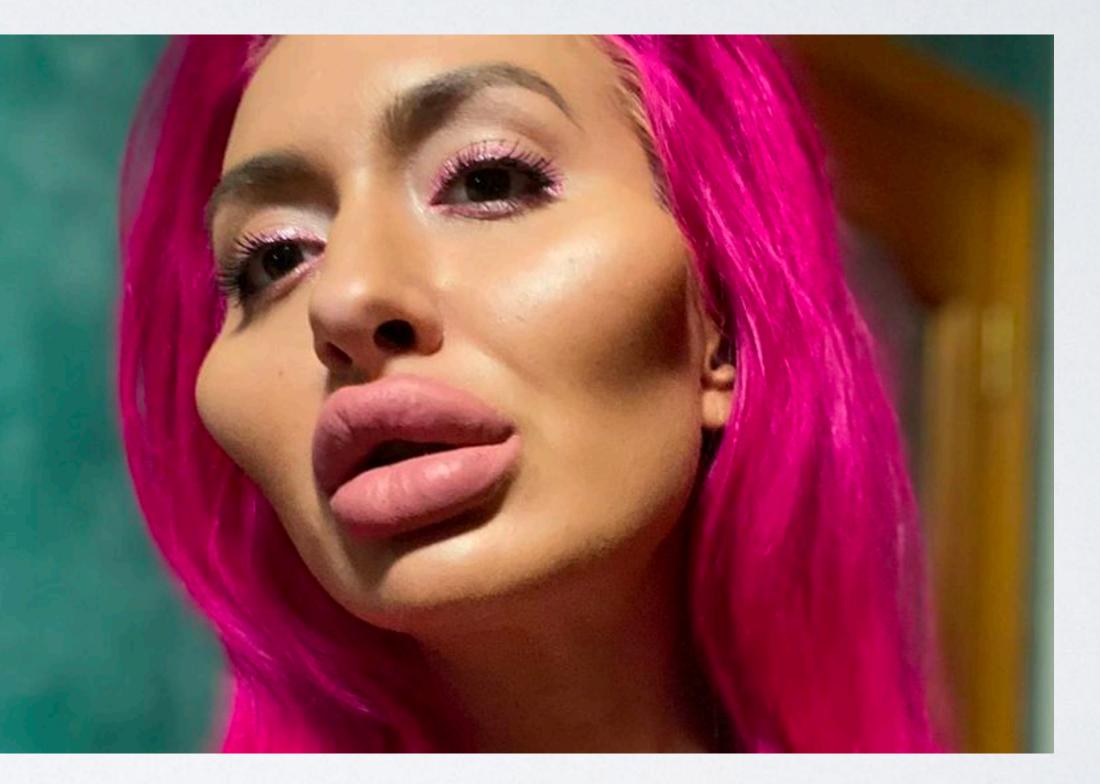
WHERE ARE DERMAL FILLERS USED

- used all over the body
- Upper face Temples, hollowing of eyes, glabella
- Mid face Cheeks, under eye (tear trough), nose
- Lower face jawline, nasolabial folds, marionette, *LIPS

Dermal fillers are used almost everywhere in the face and can be

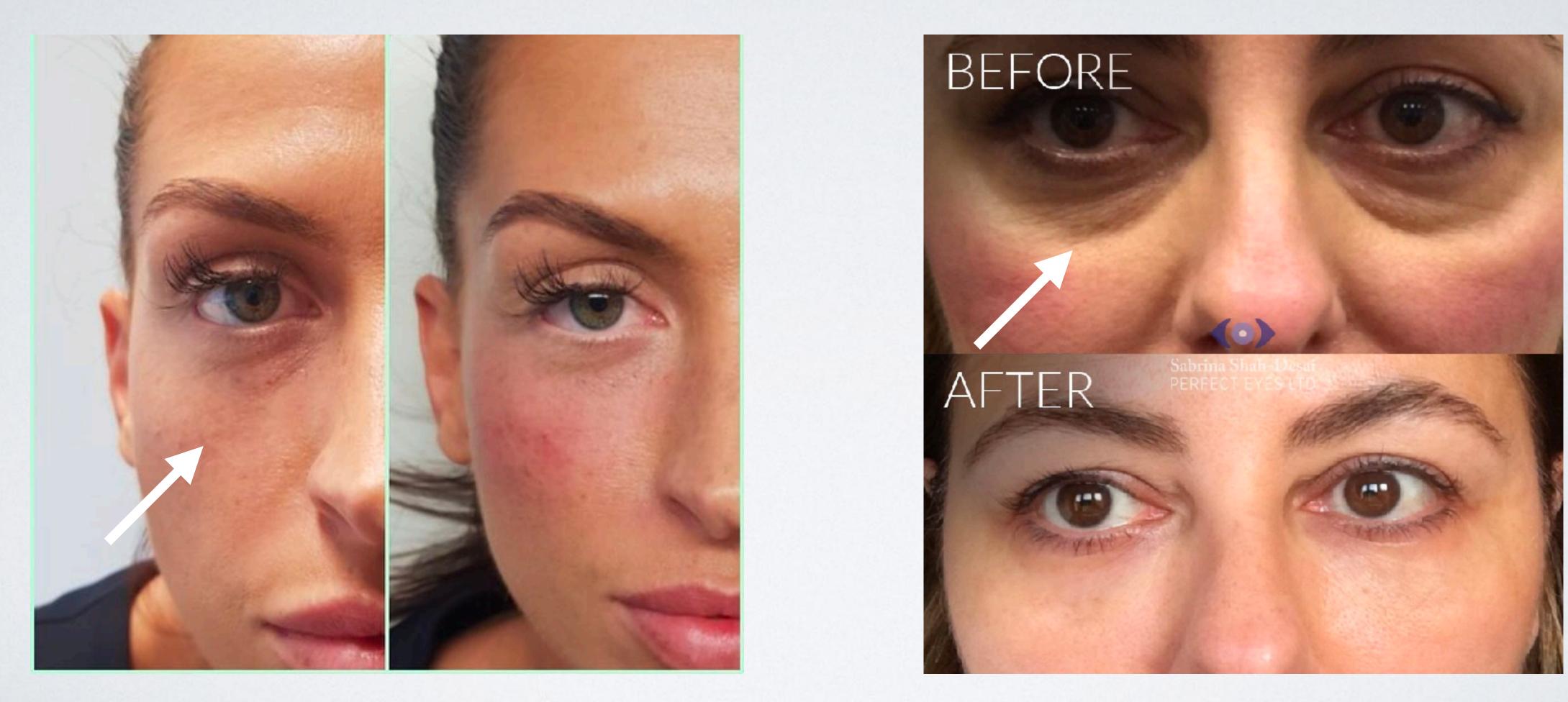
• Dermal fillers can have a bad rep...

DERMAL FILLERS CONT.

















- Possible complications:
 - Vascular occlusion occlusion of any vessel including CRAO
 - Bruising/edema face is highly vascularized
 - Lumps and bumps often from injection is in wrong location





- Safer alternative to dermal fillers
 - cytokines to build new collagen and soft tissue growth
 - Also used for injuries/pain, hair growth, post surgical healing, etc
 - cells, stem cells, up to 10x the amount of platelets

• PRP (platelet-rich plasma) therapy - inject patients own platelets, growth factors, and

• PRF (platelet-rich fibrin) - blood centrifuged at lower speeds to retain white blood

• Coagulates within 10-15 minutes, thickens under skin and stays there longer



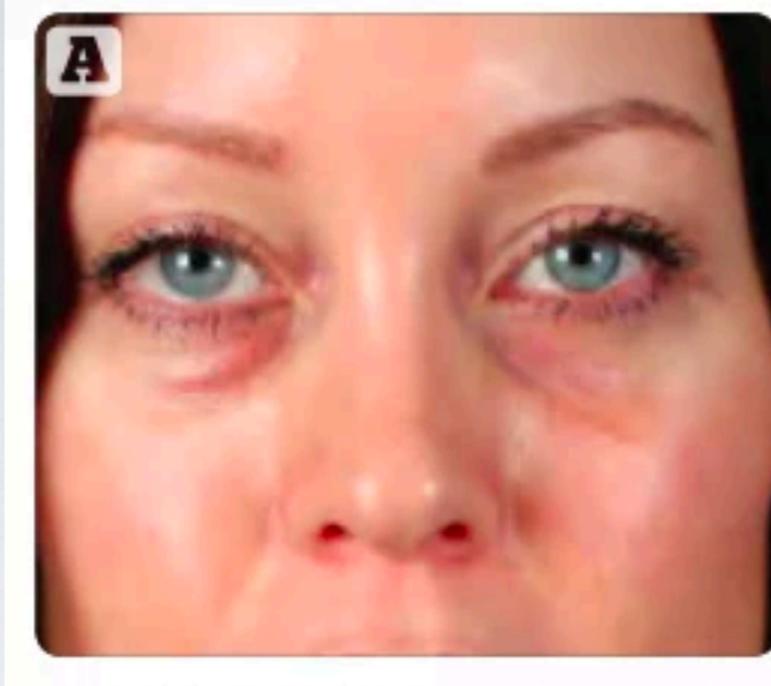






Figure 2 (A) Before and (B) after PRF for dark circles in combination with filler. Images courtesy of Anil Rajani, MD

Figure 3 (A) Before and (B) after treatment for brown spots and the tear trough. Images courtesy of Anil Rajani, MD

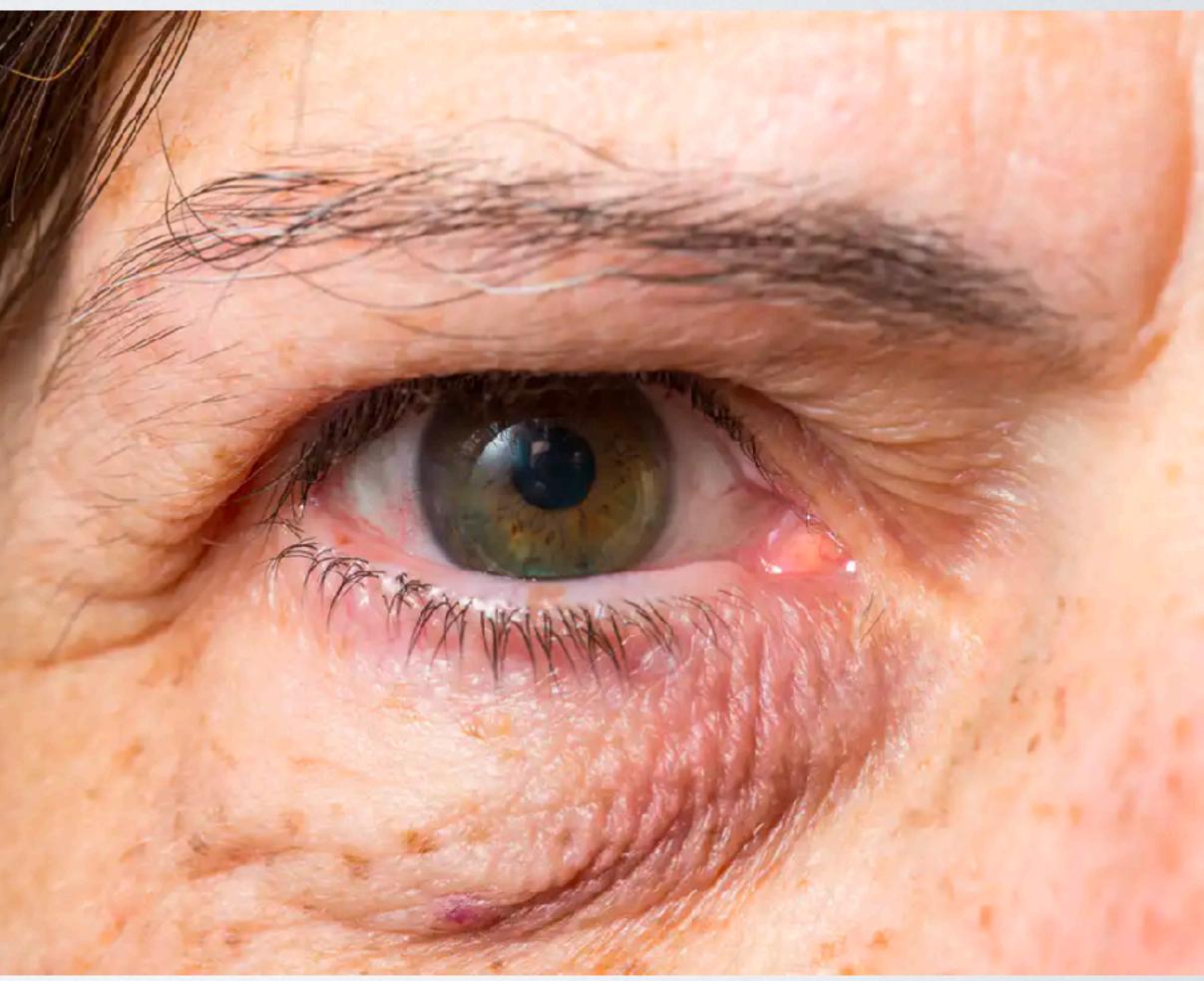
UNDER EYES Dark circles, wrinkles, puffy



UNDER EYES

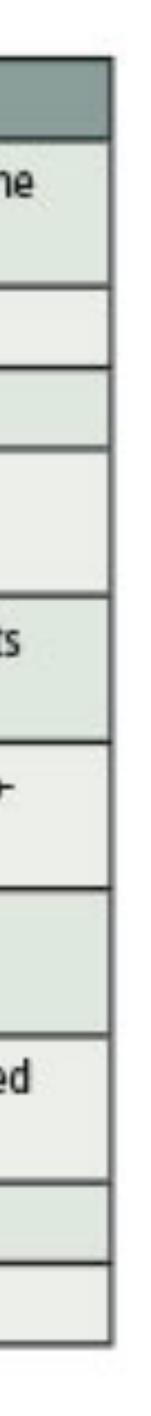
• Hyperpigmentation

- Wrinkles
- Puffiness

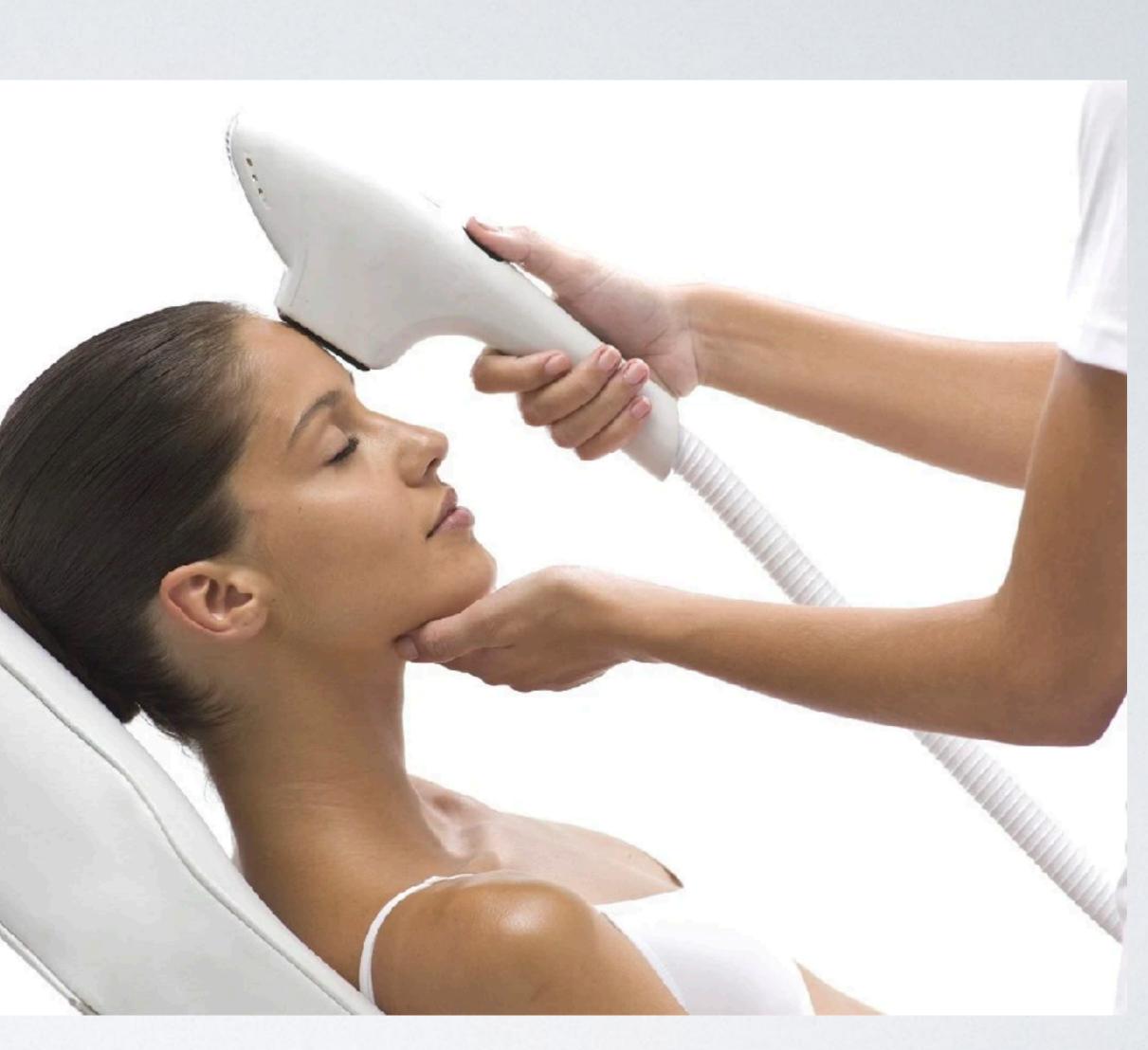




CONDITION	CHALLENGE	SOLUTION
Under-Eye Darkness	Melanin banding (natural pigmentation patterning)	Gentle lighteners, including low-concentration hydroquinone products
	Hemoglobin deposits under the eye	Products that chelate the hemoglobin
	Sun damage	Skin lighteners with DNA-reparation properties
	Thin skin, which allows blood vessels to become visible	Products to improve the skin's tone and texture; makeup
Fine Lines, Sagging, and Wrinkles	Muscle contraction	Neuromuscular inhibitors, which are medical-grade products that contain collagen- and elastin-building properties
	Loss of volume (fat)	Injectable fillers, which are medical-grade products that pro- mote dermal tissue building
	Collagen and elastin loss	Medical-grade products that contain collagen- and elastin-building properties
Puffiness	Water accumulation in the capillaries	Teach clients the proper effleurage technique; to clients, used medical-grade products to seal capillary leakage
	Fat accumulation	Teach clients the proper effleurage technique to clients
	Fat pad migration (movement)	Blepharoplasty



IPL Intense Pulsed Light



IPL - INTENSE PULSED LIGHT

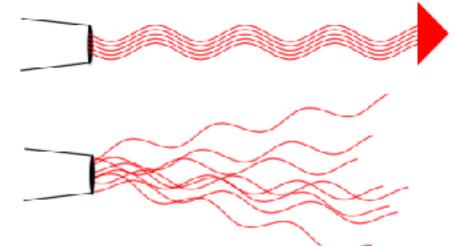
- First FDA approved for telangiectasia in 1995
- Used for many aesthetic and therapeutic purposes including: hair removal, photorejuvenation, hyperpigmentation, acne, and....
- Dry eye disease



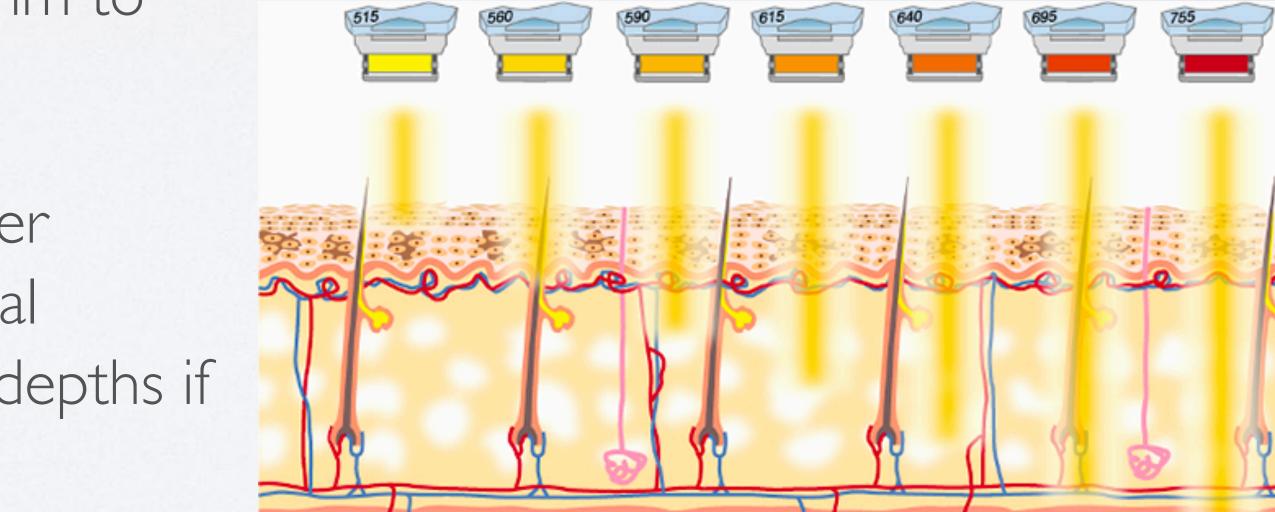
IPL - INTENSE PULSED LIGHT

- Light source from xenon lamp
- Not a laser Broad spectrum non-coherent light vs coherent single wavelength light
- Light produced in range of about 400 nm to 1200 nm
- Cutoff filters are used to cut out shorter wavelengths of light to prevent potential damage to the skin and target specific depths if skin.

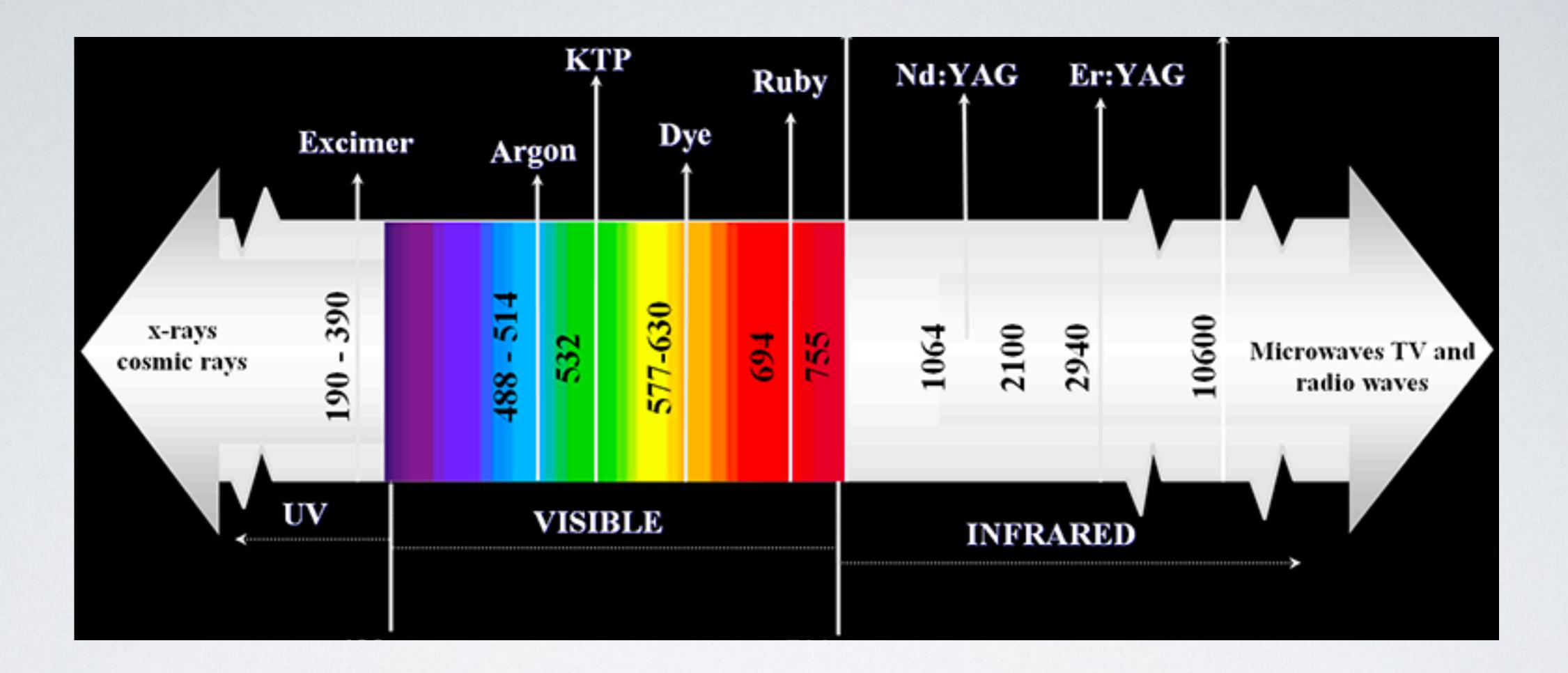
Coherent Laser Light



Incoherent LED Light

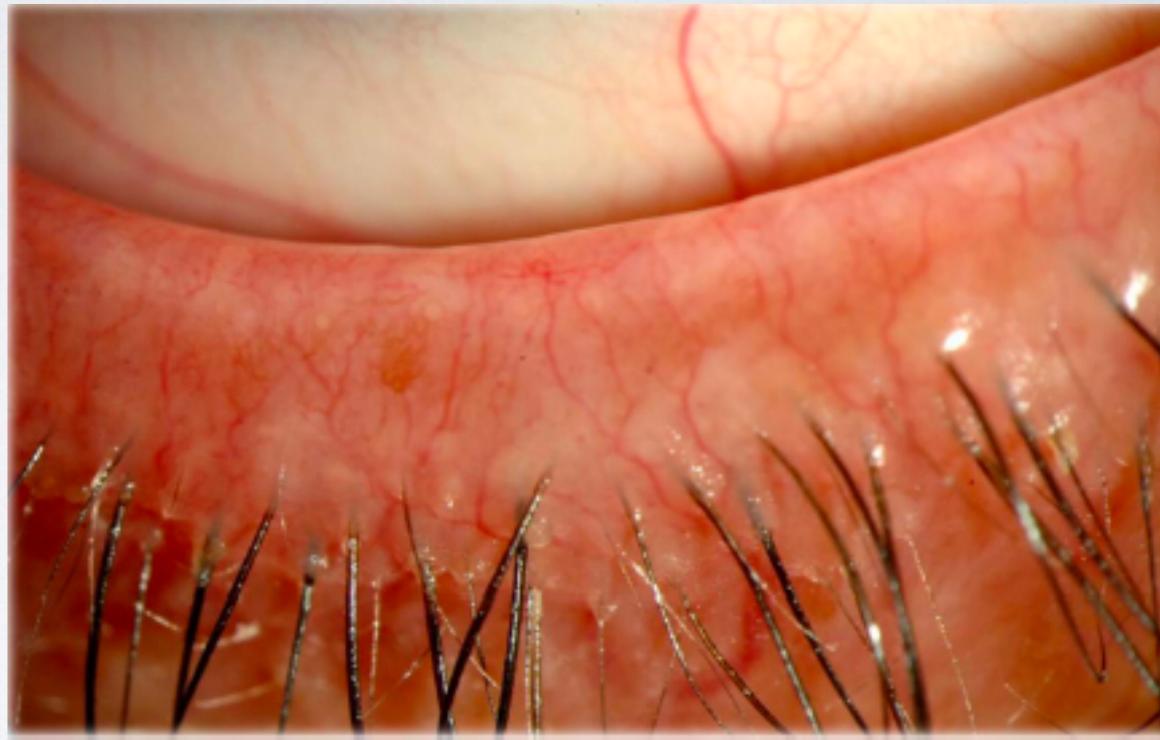


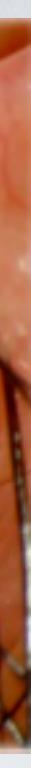




WAVELENGTH OF LIGHT

DRY EYE





IPL - DRY EYE

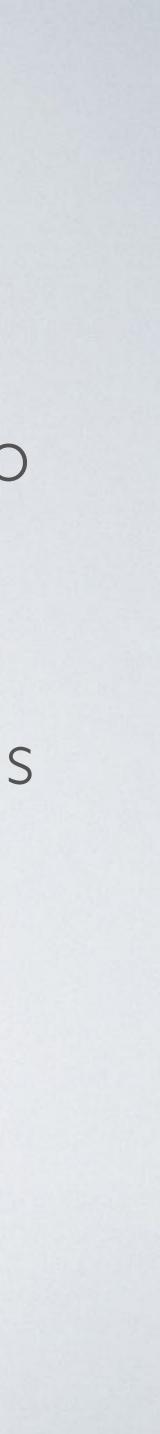
- IPL Indicated for both evaporative and aqueous deficient dry eye
 - Restores form and function of meibomian glands*Yin et al.
 - Destroys telangiectasia vessels on lid that perpetuate inflammation*Kassir et al.
 - Reduces Demodex load* Prieto et al
 - Decreases inflammatory markers IL6 and IL7 in tear film*Liu et al
 - Reduces tear osmolarity* Toyos et al
 - Increases TBUT * Yin et al.

IPL - DRY EYE

- - an active part in the electron transport chain (ETC)
 - This improves adenosine triphosphate (ATP) production which facilitates collagen synthesis in fibroblasts and motility in immunoregulatory cells

 Photobiomodulation - "Stimulates the body's cells/meibomian glands to start working," "jump start for glands in the eyes that produce tears"

• Cytochrome C within the mitochondria absorbs the IPL light which is



- Technique Toyos protocol
 - Clean face
 - Place eye shields
 - Ultrasound gel
 - 2 passes from tragus to tragus along lower eye lid
 - 1% Proparacaine with meibomian expression UL and LL cotton swab
 - Steroid drop, (Lumify drop)
 - (Post treatment cream IS clinical recovery shield and SPF cream)

IPL - DRY EYE







TELANGIECTASIA



IPL - TELANGIECTASIA

- Telangiectasia small dilated blood vessels near surface of skin and eye lid borders
- Genetic and acquired factors
- Most often treated with lasers and IPL
 - Lasers Argon 532 nm or frequency-doubled yag laser
 - IPL using filters with shorter wavelengths

IPL - TELANGIECTASIA

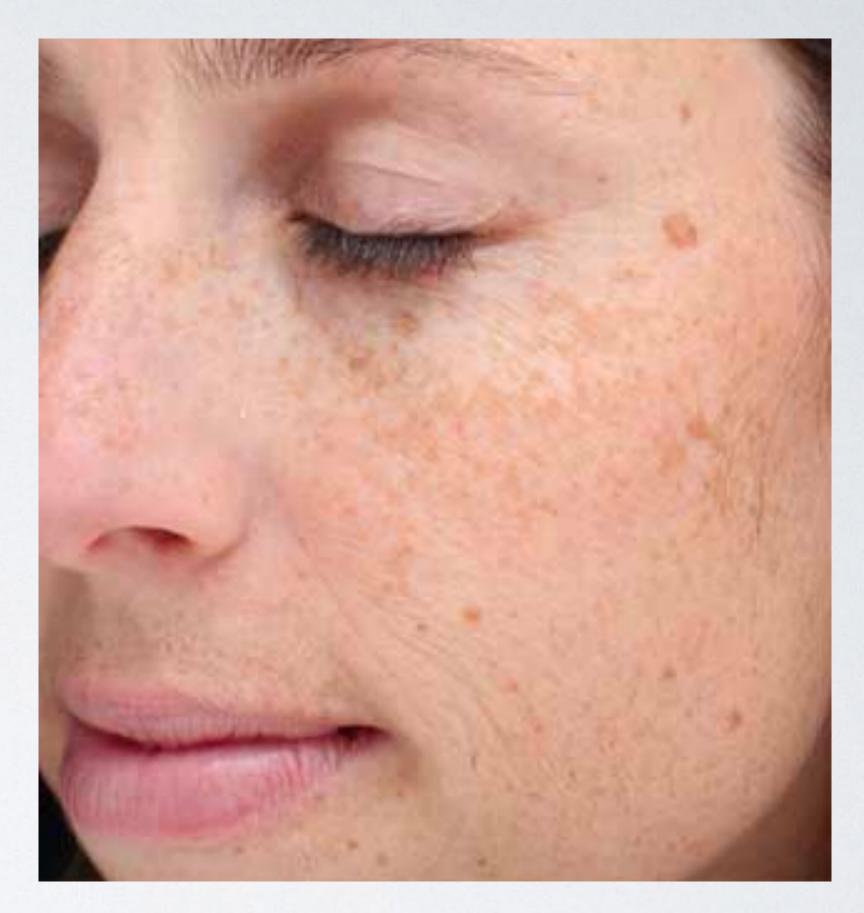
• Tips for treating telangiectasia

- 480/530 nm smaller vessels that are more superficial
- 530/590 nm with longer Pulse Duration for larger vessels
- more ablative

Longer durations pulse helps coagulate blood, shorter wavelengths



HYPERPIGMENTATION





IPL - HYPERPIGMENTATION

- Excess production of melanin from sun damage, inflammation, or trauma to skin (acne scarring)
- Melanin produced by melanocytes in lower epidermis
- Stimulated by UV light

HYPERPIGMENTATION CONT.

- Treatments -
 - Sunscreen Prevention is best
 - Chemical Peels 5 Berry, Jessner, Skinmedica
 - Laser Peels Pico Yag laser, CO2

 - IPL shorter wavelengths 480/530 nm

• Topical depigmenting agents - Hydroquinone 2%-12%, azelaic acid, koijic acid

HYPERPIGMENTATION CONT.

- Hyperpigmentation tips
 - Shorter wavelengths target melanin more
 - Darker the pigment easier to remove, can use either 530nm or 590nm
 - possible
 - with shorter wavelengths.
 - Must use cooling head at the maximum

• Lighter the pigment - harder to remove most likely will need 480 nm or 530 nm if skin type

• Skin types 3-5 typically have more pigmented spots but more difficult to treat - skin can burn easier







IPL FOR ACNE

- Non-invasive and effective way to treat acne vulgaris
- 480 nm filter to target more superficial
- 85% of the individuals had a >50% improvement in their acne

vulgaris lesions following twice weekly therapy for 4 weeks* Elman et al

CHALAZION





CHALAZION

• Causes

- Acne rosacea
- Chronic blepharitis
- Seborrhea
- Tuberculosis
- Viral infection

CHALAZION

• Treatment

- Incision and curettage

• Warm compresses, massage, steroid/antibiotic drop/ung, (IPL) Oral antibiotic (Keflex, z-pak, doxycycline), Kennalog injections

- chalazia
- inflammation
- Great option to speed along the recovery

IPL - CHALAZION

IPL's mechanism of action match quite well the underlying causes of

 Along with photobiomodulation to promote healthy cell function, IPL kills demodex and bacteria, removes telangiectasia, and reduces



PHARMACEUTICALS Used for aesthetics

Ophthalmic solution), 0.1%

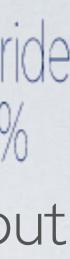


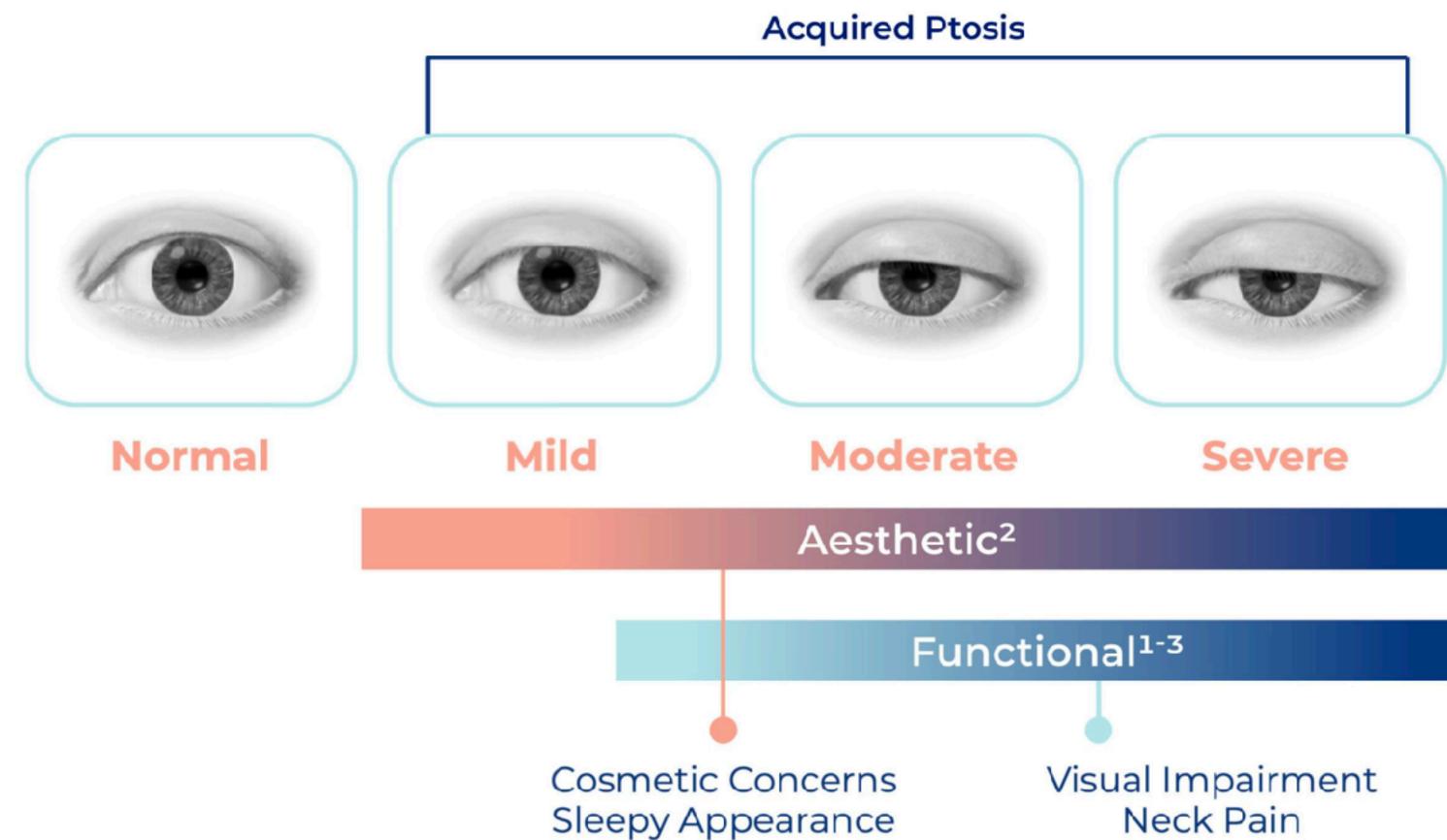




UPNEEQ - BLEPHAROPTOSIS Opnee (oxymetazoline hydrochloride ophthalmic solution), 0.1%

- Alpha-adrenergic agonist
- Works similar to phenylephrine in that it targets Müller's muscle and elevate eye lid but with less dilation effects
- Peak affects from 5 min to 2 hours, duration 6 14 hours
- Side efffects: I-5% SPK, hyperemia, dry eye, blurred vision, instillation site pain, eye irritation and headache
- Retail?



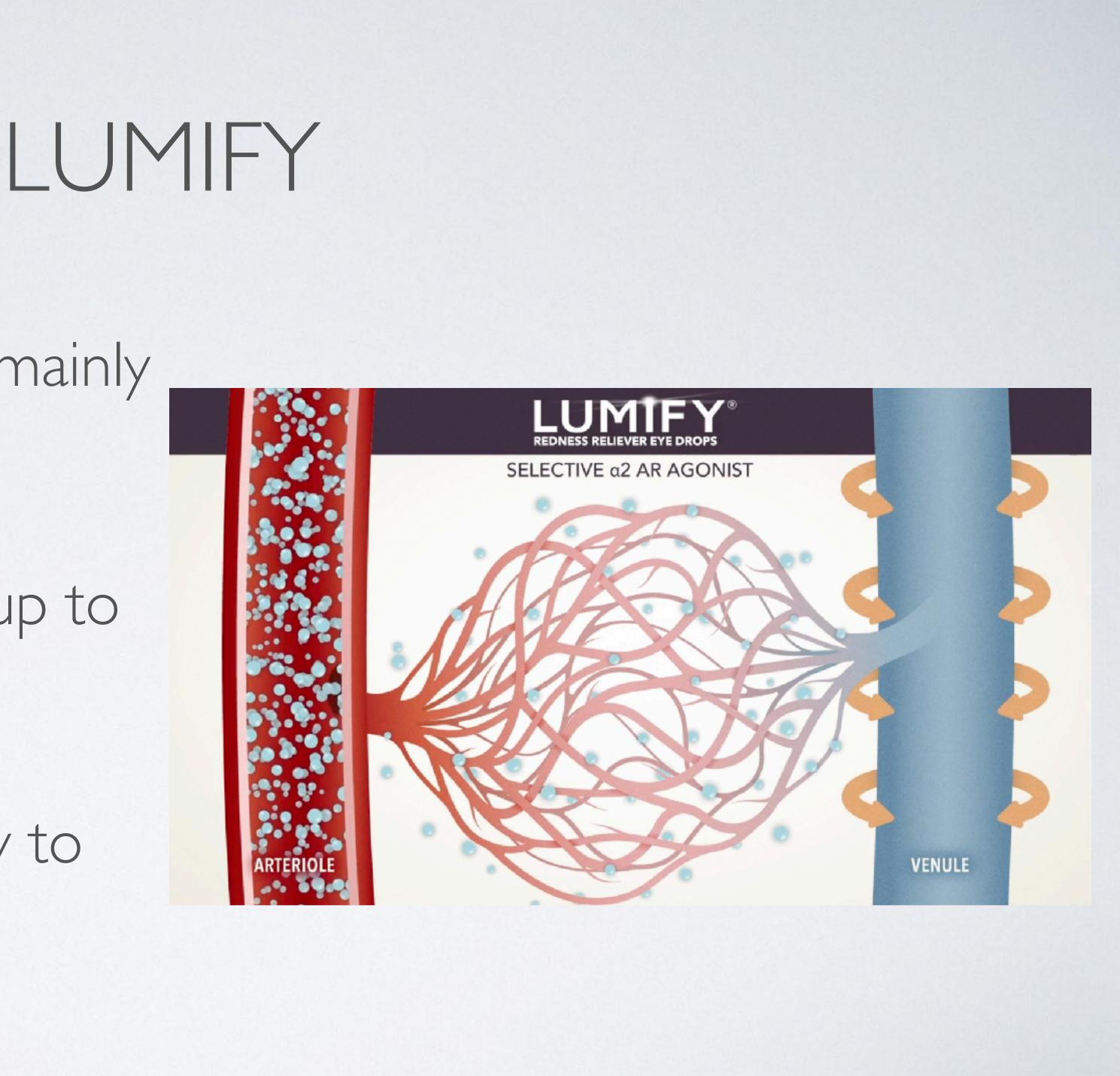


UPNEEQ - BLEPHAROPTOSIS

Asymmetrical Ocular Appearance

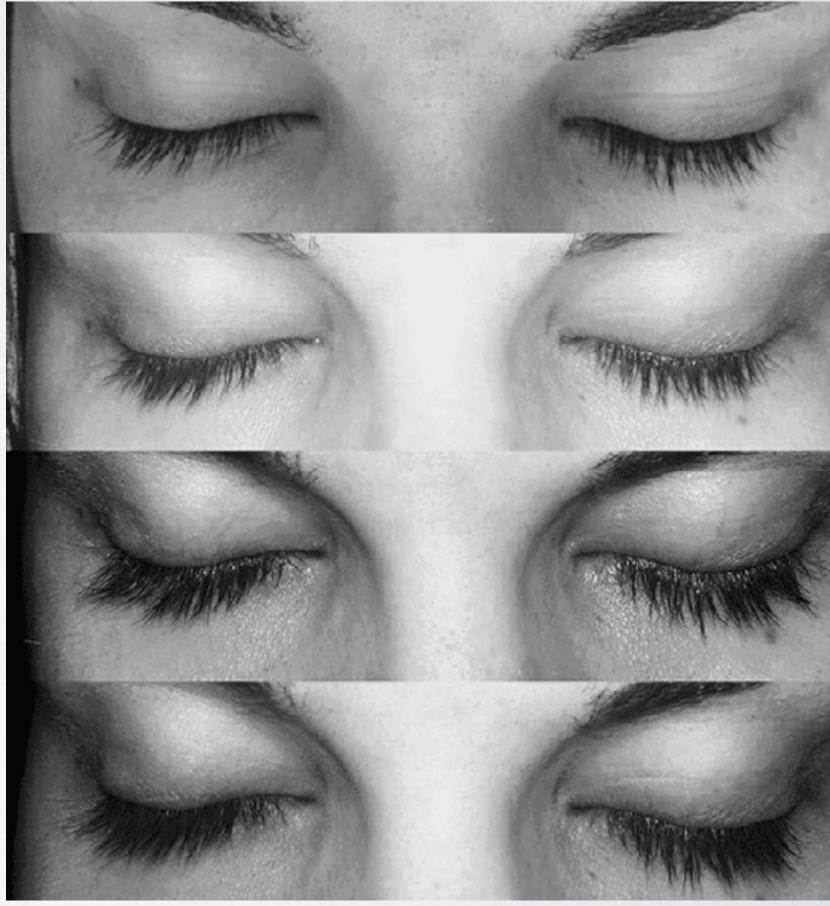
Brow Ache Headaches

- Selective Alpha 2 agonist mainly constricts venules
- Provides redness relief for up to 8 hours
- Maintains oxygen availability to surrounding tissue



PROSTAGLANDIN ANALOGS FOR LASH GROWTH

- Babe Lash, Latisse, Lash Boost (Methylamido Dihydro Noralfaprostal (MDN), Bimatoprost, isopropyl cloprostenate)
- Possible side affects: eye redness, skin/ iris discoloration





BUMP REMOVAL





BUMP REMOVAL

- Indications:
 - Skin papillomas/skin tags
 - Seborrheic keratoses
 - Verruca
 - Chalazion
 - Sebaceous cysts
 - Benign Nevi
 - Cyst of Moll
 - Pyogenic Granulomas
 - Xanthelasma









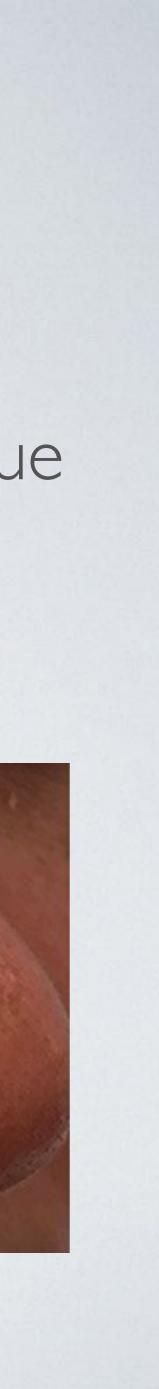


- as the heating element
 - AKA Radiofrequency Surgery
- Chemical cautery dichloroacetic acid
- Wescott scissors
- Scalpel #15 blade

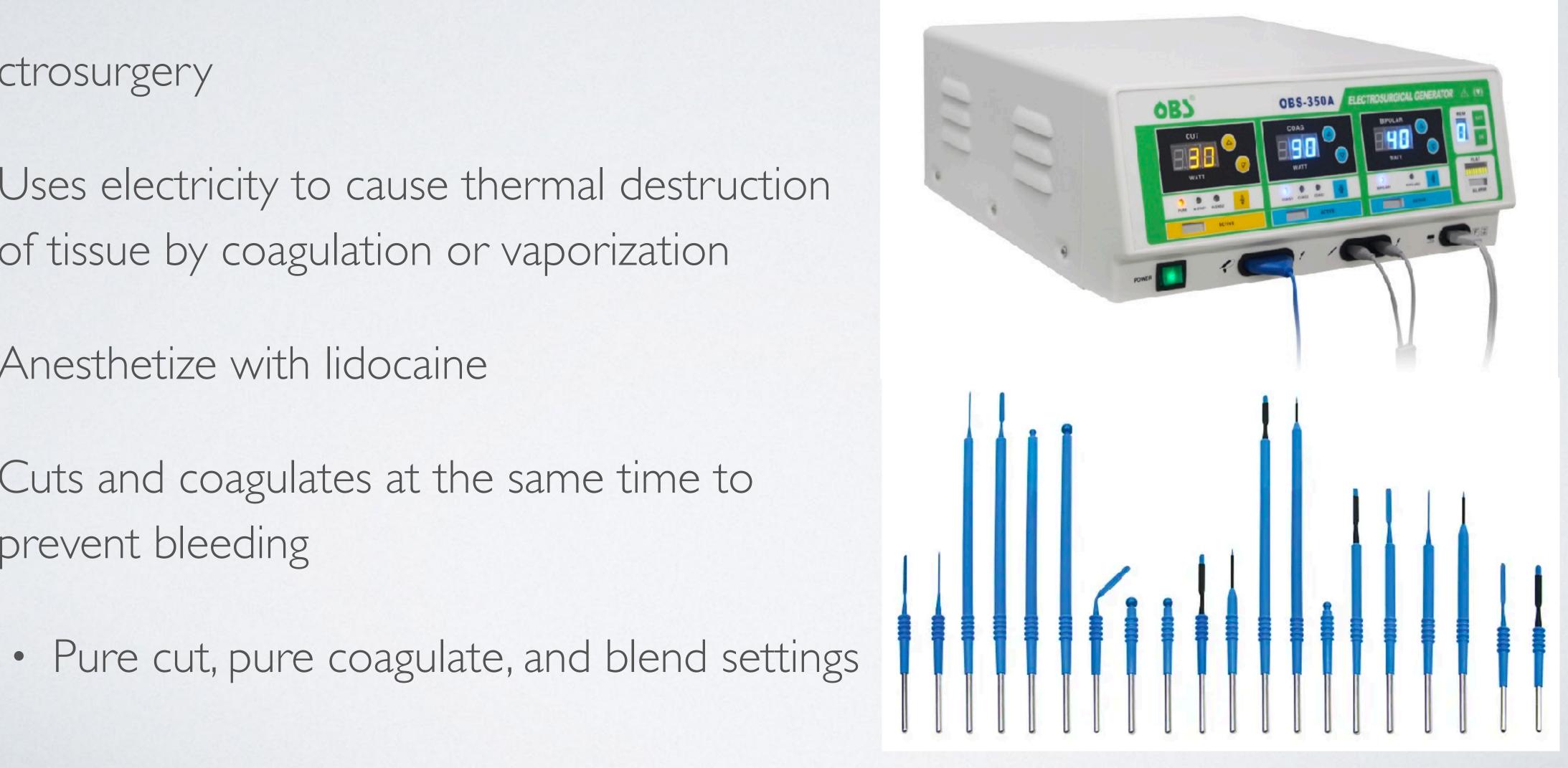
• Electrosurgery – passes high frequency current through tissue, using the tissue



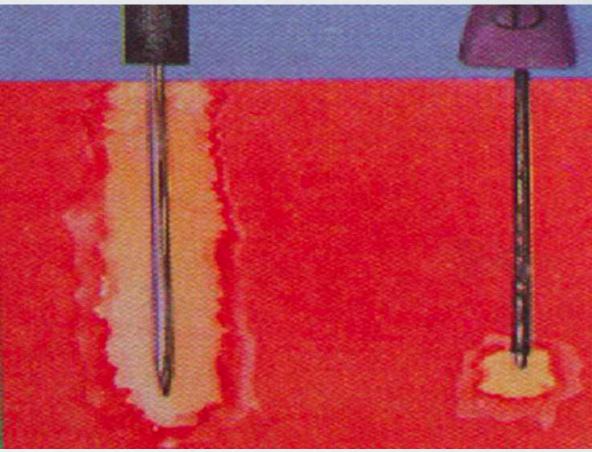




- Electrosurgery
 - Uses electricity to cause thermal destruction of tissue by coagulation or vaporization
 - Anesthetize with lidocaine
 - Cuts and coagulates at the same time to prevent bleeding

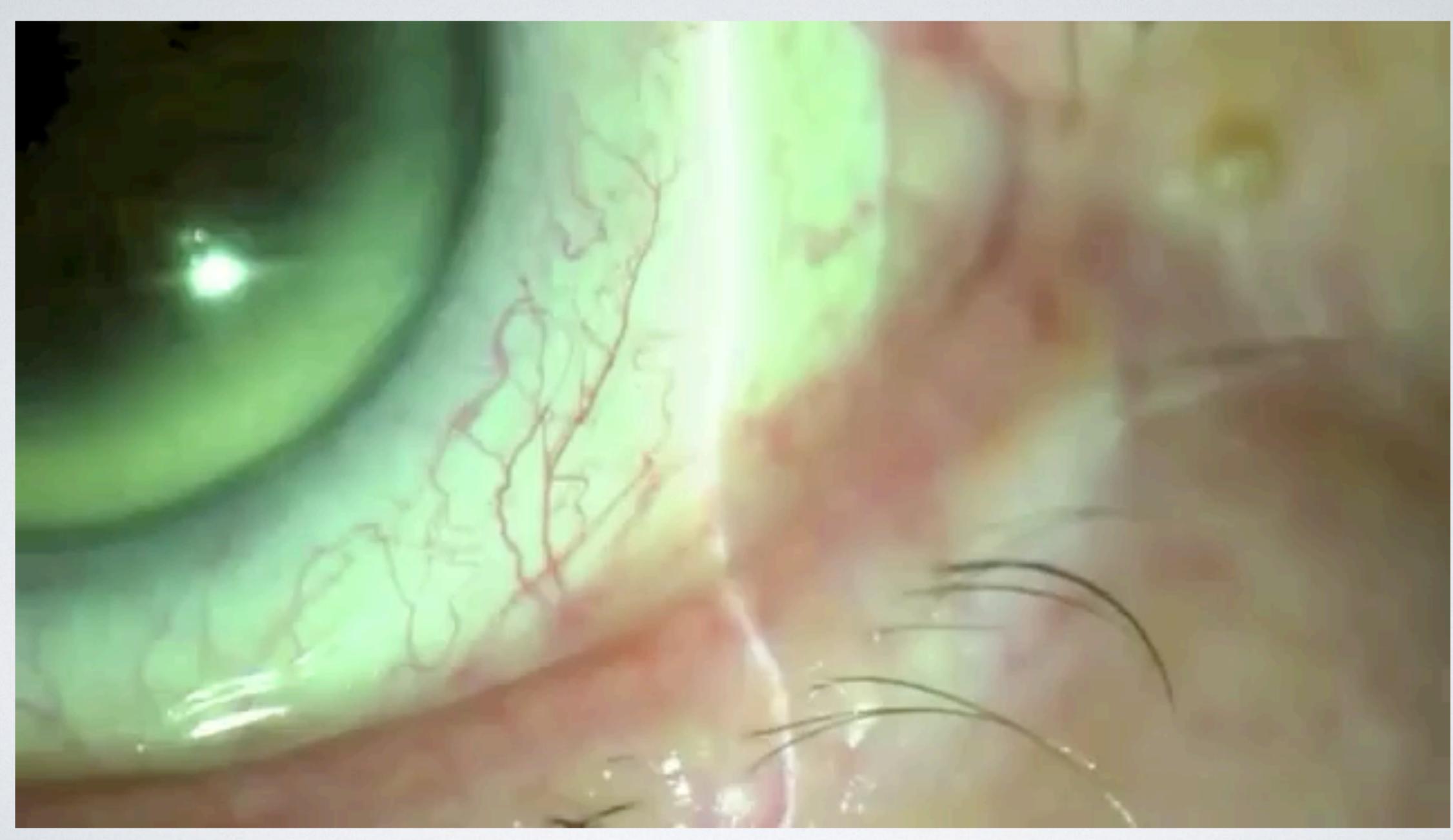


- Advantages and capabilities of electrosurgery
 - Remove bumps quick and very precise
 - Treat trichiasis
 - Punctual cautery coag mode
 - blend mode with low energy

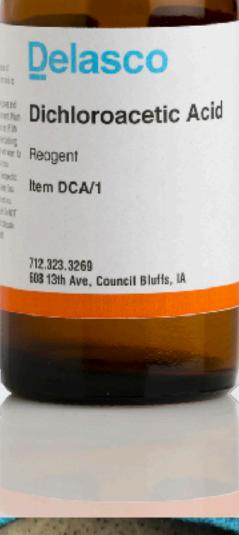


Conjunctival chalasis surgery (video) - using capsulorhexis forceps and coag





- Chemical cautery fast, easy, safe
 - Wear gloves, use cotton swab or toothpick to dip in acid and touch the lesion
 - Turns white immediately after, then darkens over the next couple days
 - Keep out of sun, use erythromycin ung TID x I week

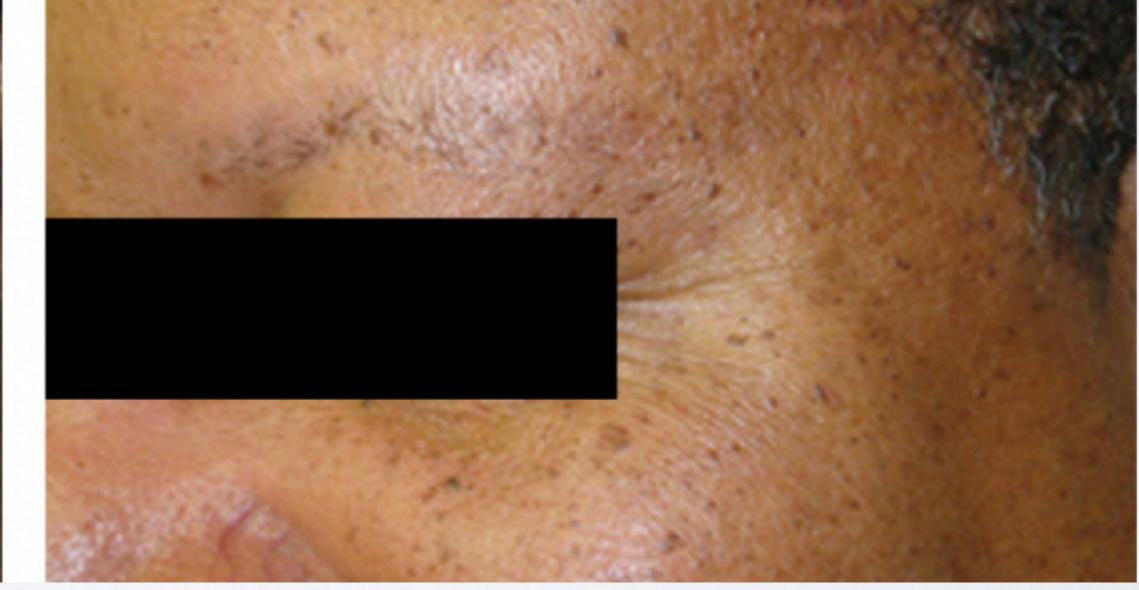




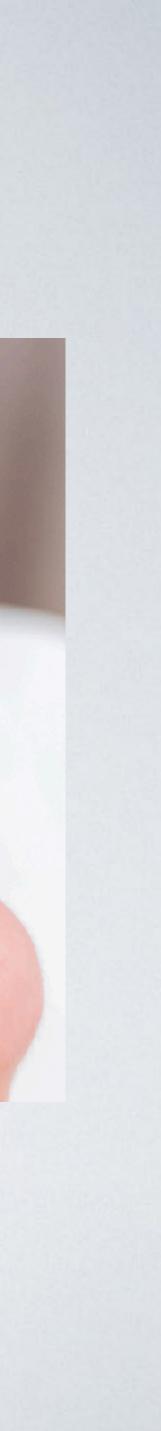


CHEMICAL CAUTERY





OTHER AESTHETICS Most common treatments done



OTHER AESTHETIC TREATMENTS

- Chemical peels Each peel targets specific skin concerns and can address more than one concern at a time
- Facials Treats common skin concerns; aging, hyper pigmentation, dryness
- Microneedling Tightens and firms skin, helps reverse sun damage and pigmentations
- RF skin tightening Reduce the appearance of fine lines and wrinkles
- CO2 resurfacing More aggressive way to reduce wrinkles and improve skin texture
- Microdermabrasion Exfoliates and removes dead skin cells
- Hydrofacial. Exfoliates and removes dead skin cells



Michael Chism, OD 801-500-5115 (call/text) mtchism55@gmail.com

QUESTIONS?