The Benefits of Controlled Trauma Induced Neocollagenesis Post Dermal filler Injection Technique

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Introduction:

There are various ways of delivering dermal fillers to the skin tissue. All of the techniques bring to the table their unique selling points. Techniques that use the "controlled trauma theory" address the three basic signs of facial aging: loss of volume, skin laxity, and skin deterioration.

Introducing an entirely new concept of “blanketing” thin strands of hyaluronic acid dermal filler product, placed in strategic multi-directional vectors, to create an artistic lift of the lax tissues. In this technique, dermal fillers are administered applying an intentional, controlled force on the tissue stimulating the fibroblasts even more and causing them to stretch. Based on the controlled injury theory in which type I and type III collagen production occur at accelerated rates post trauma, this mechanical stretching leads to an increase in collagen production. Using the needle to create a modest subcuticular undermining effect, this controlled trauma disrupts fragmented collagen strands and replaces them with purposeful, vectored strands of promoted neocollagenesis. This effect results in sustaining the desired lift longer than conventional methods of simply filling. A major advantage to being able to lift and redirect the patient’s now separated tissue is the ability to use the patient’s own lax skin and reposition it upward, lifting it back to its point of origin.

Methods:

This will be an oral lecture format using creative teaching strategies, as well as scientific research and data to substantiate the claims of the benefits of using controlled trauma techniques while injecting. Before and after photos will be used including product amount documentation beside each case study.

The study of this technique was developed to satisfy master level injectors that have reached a point of perceived optimization in their current practice. The intended audience is physicians, mid-level practitioners, and nurses working in the non-surgical realm of facial aesthetics. The scope of practice includes materials that contain information on how to inject hyaluronic acid cosmetic dermal fillers in a novel, strategic, pan-facial approach that addresses all three signs of facial aging.

Results:

The use of dermal fillers, as well as the effects of dermal needling on the skin has been studied and confirmed to stimulate neocollagenesis. The presenting topic combines the two concepts in one technique to offer superior outcomes for the patient.

Using this technique translates into longer-lasting results, and leaves a hydrating effect on the skin’s texture in the treated areas.
Analysis/Conclusion:

Using this technique opens a world of possibilities for difficult to treat areas such as the jowls and marionette lines of the lower face. The incomparable outcomes are achieved using less of the dermal filler when compared to conventional filling methods. This is an exciting development in the aesthetic industry as it is the only technique to simultaneously address all three signs of aging.