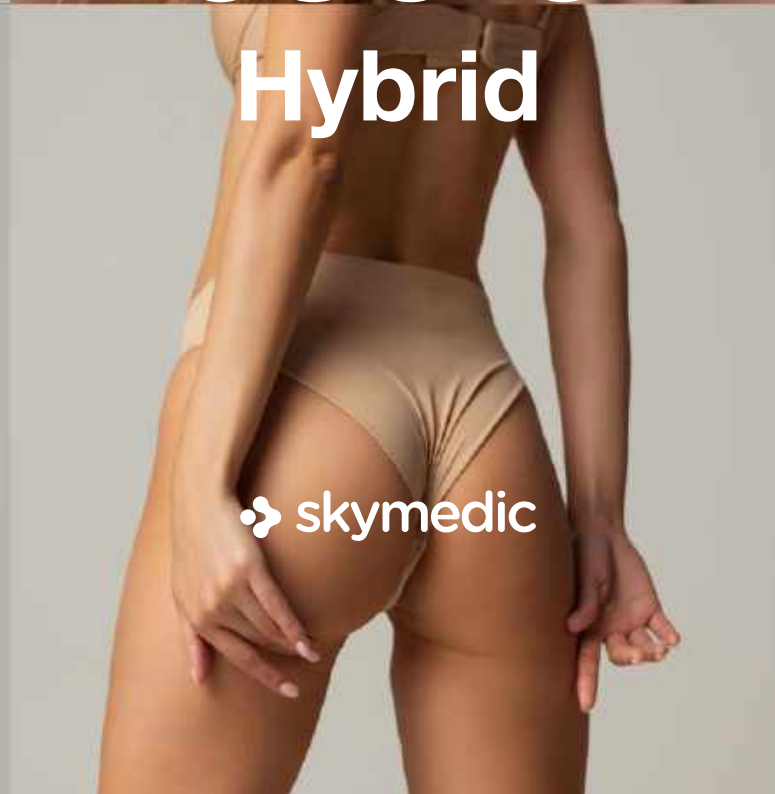




meso ox.

Hybrid



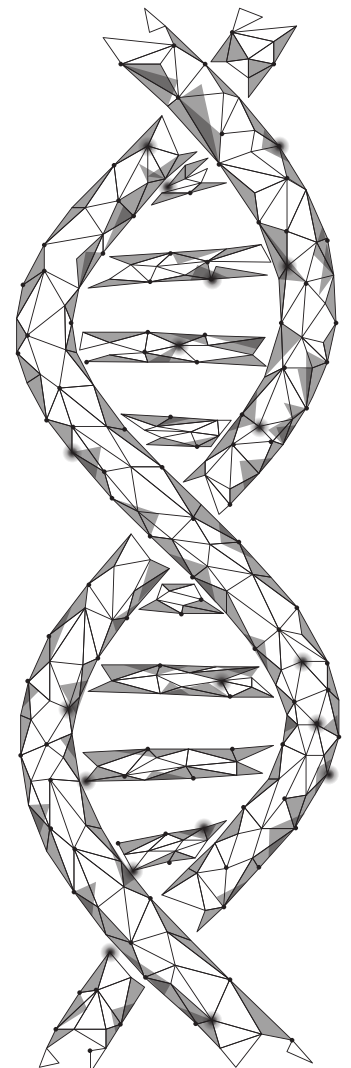
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La pérdida de colágeno con la edad

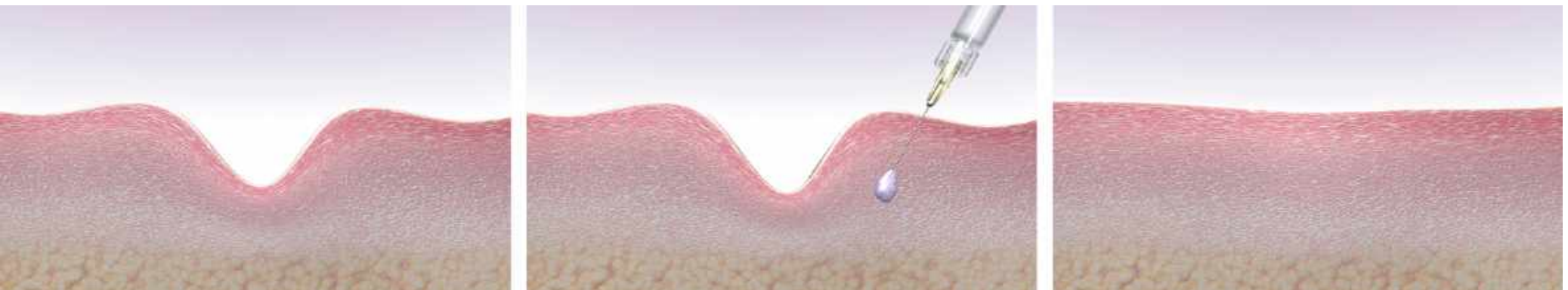
El colágeno es una proteína que constituye una parte importante de nuestra piel y le proporciona estructura, resistencia y elasticidad. A medida que envejecemos, la producción natural de colágeno de nuestro cuerpo se ralentiza, y las fibras de colágeno se vuelven más débiles y menos organizadas, lo que provoca la aparición de líneas finas, arrugas y flacidez de la piel.

También hay otros factores que pueden contribuir a la pérdida de colágeno, como la exposición a la radiación UV del sol, el tabaquismo y una dieta inadecuada. Sin embargo, la edad sigue siendo el principal factor en la pérdida gradual de colágeno con el paso del tiempo.

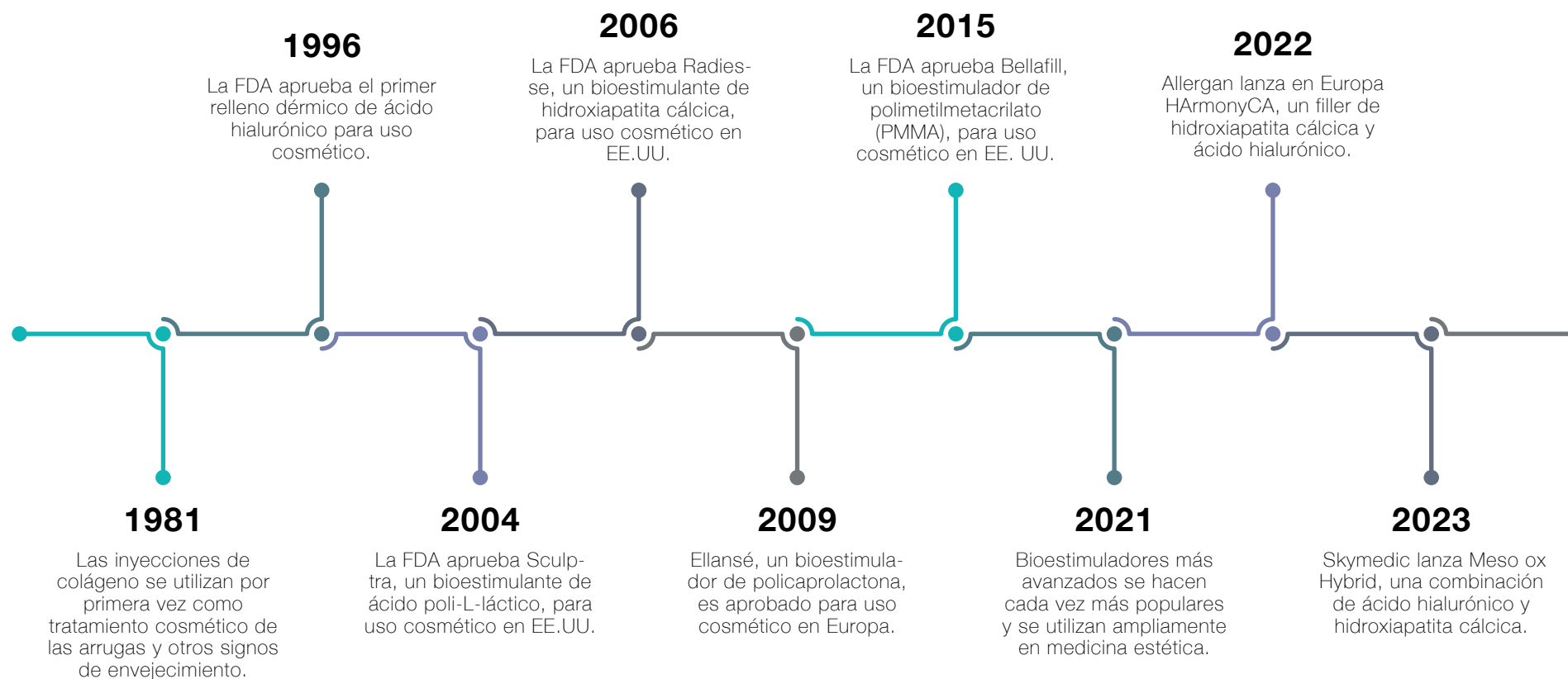


Qué es la bioestimulación

La bioestimulación cutánea es un tratamiento cosmético que implica el uso de productos especializados para **estimular la producción de colágeno y elastina en la piel**. Estos productos actúan activando los procesos naturales de curación del organismo, lo que se traduce en una mejora gradual de la textura, la firmeza y el aspecto general de la piel. Es una alternativa mínimamente invasiva a los procedimientos quirúrgicos. Pueden estar hechos de diversos materiales, como ácido hialurónico, hidroxiapatita cálcica y policaprolactona.



Historia de la bioestimulación



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Componentes del producto

Ácido Hialurónico
2 millones de Dalton

Hidroxiapatita cálcica
25-45 μ m

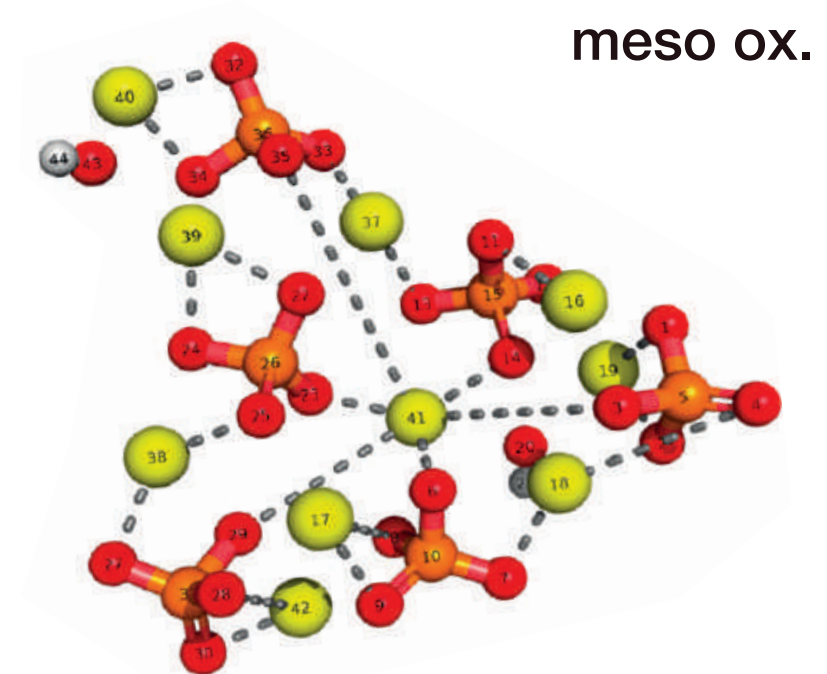
Teofilina

Manitol

Qué es la hidroxiapatita

La hidroxiapatita cálcica es un agente bioestimulador. Se compone de partículas microscópicas suspendidas en una sustancia gelatinosa que se inyectan en la piel para estimular la producción de colágeno.

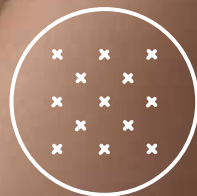
Se descubrió por primera vez en los años sesenta y lleva décadas utilizándose en aplicaciones médicas. En un principio se desarrolló como material sustitutivo del hueso para cirugías ortopédicas, pero posteriormente se reconocieron sus propiedades únicas para su uso en tratamientos cosméticos.



En medicina estética, se utiliza como relleno dérmico para devolver volumen al rostro y suavizar arrugas y líneas de expresión. Actúa estimulando la producción natural de colágeno y elastina del organismo, lo que puede dar lugar a un aspecto más joven y radiante, con resultados que duran hasta 12 meses o más.

También es biocompatible, bien tolerada por el organismo y tiene un bajo riesgo de reacciones alérgicas u otros efectos adversos.

Indicaciones de tratamiento



Flacidez



Celulitis



Estimulación
de colágeno

Comparativa de la competencia

RADIESSE
INJECTABLES

Bioestimulador de microesferas de **hidroxiapatita cálcica**, que estimula la producción de colágeno y proporciona volumen inmediato a la piel. Se utiliza a menudo para tratar las arrugas, las líneas de expresión y la laxitud de la piel. Se ha demostrado que Radiesse dura hasta un año o más.

Sculptra

Bioestimulador de microesferas de **ácido poli-L-láctico** (PLLA). Actúa estimulando la producción de colágeno en la piel durante varios meses, lo que produce una mejora gradual de la textura y la firmeza de la piel. Sculptra puede durar hasta dos años.

 **ELLANSÉ**

Bioestimulador de microesferas de **policaprolactona**. Actúa estimulando la producción de colágeno en la piel a lo largo del tiempo. También proporciona volumen inmediato a la piel y puede durar hasta dos años o más.

meso ox.
Hybrid

Bioestimulador de microesferas de **hidroxiapatita cálcica y ácido hialurónico** que estimula la producción de colágeno. Preparado para usar, de bajo coste y larga duración. Para el tratamiento de la flacidez corporal y la celulitis.

Estudios clínicos

Global Consensus Guidelines for the Injection of Diluted and Hyperdiluted Calcium Hydroxylapatite for Skin Tightening

KATE GOLDIE, MBChB,* WOUTER PEETERS, MD,[†] MOHAMMED ALGHOUL, MD, FACS,[‡]
KIMBERLY BUTTERWICK, MD,[§] GABRIELA CASABONA, MD,^{||} YATES YEN YU CHAO, MD,[†]
JOANA COSTA, MD,[#] JOSEPH EVIATAR, MD, FACS,^{*#} SABRINA GUILLEN FABI, MD, FAAD, FAACS,^{††}
MARY LUPO, MD,^{‡‡} GERHARD SATTLER, MD,^{§§} HEIDI WALDORF, MD,^{||††}
YANA YUTSKOVSKAYA, MD,^{##} AND PAUL LORENC, MD^{***}

BACKGROUND Calcium hydroxylapatite (CaHA) is approved to correct moderate-to-severe wrinkles and folds and soft-tissue volume loss in the face and hands. More recently, subdermal injection using diluted CaHA has been used to improve skin laxity.

OBJECTIVE To review evidence for the safe and effective use of diluted CaHA in the face and body and provide best practice recommendations.

METHODS A global panel of expert aesthetic physicians convened to develop consensus-based guidelines for treating laxity and superficial wrinkles using diluted (ratio of 1:1) and hyperdiluted (1:2) CaHA.

RESULTS Diluted and hyperdiluted CaHA stimulates targeted neocollagenesis in the injection area to improve laxity and skin quality in the mid- and lower face, neck, décolletage, upper arms, abdomen, upper legs, and buttocks. Treatment can be used as an adjunct to volume augmentation or combined with additional modalities for optimal results. Adverse events are related to the injection and include bruising, swelling, mild pain, and induration. In thinner and darker skin, too-superficial injections of less diluted CaHA can lead to more adverse events.

CONCLUSION This report provides preliminary guidelines for the novel off-label use of CaHA for bio- stimulation in the face and body. Further trials will provide additional clarity regarding treatment paradigms for optimal outcomes.

Estudios clínicos

ORIGINAL CONTRIBUTION



Microfocused ultrasound in combination with diluted calcium hydroxylapatite for improving skin laxity and the appearance of lines in the neck and décolletage

Gabriela Casabona MD¹ | Diana Nogueira Teixeira PhD²

Summary

Background: Skin laxity and wrinkling on the neck and décolletage reveal age as reliably as the face.

Objective: To evaluate the combined use of microfocused ultrasound with visualization and diluted calcium hydroxylapatite (CaHA) for treating the neck and décolletage.

Methods: Subjects with moderate-to-severe lines on the neck and/or décolletage were retrospectively enrolled. MFU-V was applied using 7 and 10 MHz transducers followed by subdermal injection of CaHA diluted 1:1 with lidocaine solution. Photographs at baseline and 90 days were assessed by two independent, blinded evaluators using three scales: Merz Aesthetics décollete wrinkles, Fabi-Bolton chest wrinkle, and Allergan transverse neck lines scales.

Results: A total of 47 subjects were treated as follows: 29 (neck only), five (décolletage only), and 13 (both areas). Mean neckline score improved from 2.6 (moderate-to-severe lines) at baseline to 1.3 (mild lines) 90 days after treatment ($P < .001$). Mean décolletage scores improved from 2.6 and 3.3 (moderate-to-severe wrinkles) on the Merz Aesthetics and Fabi-Bolton scales, respectively, to 1.1 and 1.8 (mild wrinkles), respectively, after treatment (both $P < .001$). Both procedures were well tolerated with high subject satisfaction.

Conclusions: Combining MFU-V with 1:1 diluted CaHA is effective for improving the appearance of neck and décolletage lines and wrinkles.

Estudios clínicos

Combination of Calcium Hydroxylapatite Diluted With Normal Saline and Microfocused Ultrasound With Visualization for Skin Tightening

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^cDepartment of Anatomic Pathology, Sechenov University, Moscow, Russia

BACKGROUND Calcium hydroxylapatite (CaHA) is approved to correct moderate-to-severe wrinkles and folds and soft-tissue volume loss in the face and hands. More recently, subdermal injection using diluted CaHA has been used to improve skin laxity.

OBJECTIVE To review evidence for the safe and effective use of diluted CaHA in the face and body and provide best practice recommendations.

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CONCLUSION This report provides preliminary guidelines for the novel off-label use of CaHA for bio-stimulation in the face and body. Further trials will provide additional clarity regarding treatment paradigms for optimal outcomes.

Estudios clínicos

Combined Calcium Hydroxylapatite Plus Microfocused Ultrasound for Treating Skin Laxity of the Chest and Buttocks

Gabriela Casabona MD
Ocean Clinic Marbella, Marbella, Spain

BACKGROUND Calcium hydroxylapatite (CaHA) is approved to correct moderate-to-severe wrinkles and folds and soft-tissue volume loss in the face and hands. More recently, subdermal injection using diluted CaHA has been used to improve skin laxity.

OBJECTIVE To review evidence for the safe and effective use of diluted CaHA in the face and body and provide best practice recommendations.

METHODS A global panel of expert aesthetic physicians convened to develop consensus-based guidelines for treating laxity and superficial wrinkles using diluted (ratio of 1:1) and hyperdiluted (1:2) CaHA.

RESULTS Diluted and hyperdiluted CaHA stimulates targeted neocollagenesis in the injection area to improve laxity and skin quality in the mid- and lower face, neck, décolletage, upper arms, abdomen, upper legs, and buttocks. Treatment can be used as an adjunct to volume augmentation or combined with additional modalities for optimal results. Adverse events are related to the injection and include bruising, swelling, mild pain, and induration. In thinner and darker skin, too-superficial injections of less diluted CaHA can lead to more adverse events.

CONCLUSION This report provides preliminary guidelines for the novel off-label use of CaHA for bio- stimulation in the face and body. Further trials will provide additional clarity regarding treatment paradigms for optimal outcomes.

Estudios clínicos

Calcium Hydroxylapatite Dermal Filler Combined with Microneedling and Topical Ascorbic Acid: A Novel and Effective Method of Treating Stretch Marks

Gabriela Casabona, MD Paula Marchese, MD

Background: Stretch marks can have a negative psychological impact on some individuals. Methods are available for treating stretch marks, but high-quality evidence supporting their use is limited. We treat stretch marks using injections of diluted calcium hydroxylapatite (CaHA, Radiesse) filler combined with microneedling and topical ascorbic acid. This retrospective study evaluated the effectiveness of this combined therapy.

Methods: Subjects presented with red ($n = 25$) or white ($n = 10$) striae on their buttocks, thighs, knees, abdomen, and breasts. CaHA filler was diluted 1:1 with lidocaine 2% without epinephrine. A maximum of 3.0 mL of filler was injected per patient at all skin depths using a 23G needle. This was immediately followed by microneedling and topical application of 20% ascorbic acid. Microneedling with ascorbic acid was repeated after 1 and 2 months. Skin biopsies were obtained from a patient who later underwent abdominoplasty.

Results: The mean ($\pm$ SD) pretreatment Manchester Scar Scale scores were 12.0 ($\pm$ 0.8), decreasing to 7.1 ($\pm$ 1.4) 1 month after the final treatment, indicating improvement in stretch mark appearance ($P < 0.001$). Subjects were very satisfied ($n = 22$; 62.9%), satisfied ($n = 8$; 22.9%), neither satisfied nor dissatisfied ($n = 4$; 11.4%), or unsatisfied ($n = 1$; 2.8%) with their treatment results. Analysis revealed a significant correlation between Scar Scale scores and Patient Satisfaction scores ($r = 0.483$; $P = 0.003$). Skin biopsies showed increased quantity and quality of collagen and elastin fibers in areas treated with combination therapy. Procedures were well tolerated.

Conclusion: Combining 1:1 diluted CaHA with microneedling and topical ascorbic is safe and effective for treating stretch marks. (Plast Reconstr Surg Glob Open 2017;5:e1474;

Estudios clínicos

Efficacy and Safety of 2 Injection Techniques for Hand Biostimulatory Treatment With Diluted Calcium Hydroxylapatite

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GISELE JACOBINO DE BARROS NUNES, MD,* MARTA BARROS DE SOUZA, MD,* AND
EDILÉIA BAGATIN, MD, MSc, PhD[‡]

BACKGROUND Calcium hydroxylapatite (CaHA) is effective for dorsal hand rejuvenation. Higher dilutions are used for biostimulation with fewer side effects.

OBJECTIVE To evaluate the efficacy and safety of 2 techniques of diluted CaHA injection for dorsal hand treatment.

METHODS A prospective, evaluator-blinded study was performed to compare (side-to-side) techniques for treating the dorsum of the hands with diluted CaHA: deep fat lamina or subdermal injection. Fifteen women with aging grades between 1 and 3 on the MHGS (Merz hand grading scale) were enrolled and followed up for 24 weeks. The outcomes were a histological analysis of collagen, skin viscoelasticity, high-frequency ultra- sound parameters, MHGS score, and the global aesthetic improvement scale (GAIS) score.

RESULTS Improvement in the MHGS and GAIS scores ($p < .01$) was observed, with no difference between techniques ($p > .05$). Skin viscoelasticity measures and ultrasono- graphy for dermal parameters improved for both treatments ($p < .01$). The mean total collagen density increased from the baseline for both techniques ($p < .01$). Pain during the procedure as well as adverse effects within the follow-up did not differ between treatments ($p > .4$). The overall satisfaction was 12% greater for the subdermal tech- nique ($p < .05$).

CONCLUSION Diluted CaHA improves the skin quality of aging hands with a safe profile, without substantial differences between the techniques.

Estudios clínicos

Hyperdiluted calcium hydroxylapatite for the treatment of skin laxity of the neck

Stefania Guida¹ | Sabrina Longhitano¹ | Marco Spadafora¹ |
Andrea Lazzarotto² | Francesca Farnetani¹ | Nicola Zerbinati³ |
Giovanni Pellacani^{1,4} | Hassan Galadari⁵

Abstract

Despite being a common concern, there are very few minimally invasive treatments targeting neck skin laxity (NSL) reported in the literature. To assess the efficacy of hyperdiluted calcium hydroxyapatite (hy-CaHA) for the treatment of NSL, according to the NSL scale, and to estimate safety. Twenty patients showing NSL were treated with hy-CaHA 1:2. To evaluate the efficacy of hy-CaHA treatment for NSL, pictures of treated subjects were collected before and 3 months after treatment and graded according to the NSL scale, and T-student's test was applied to estimate differences. Hy-CaHA for the neck was effective according to the previously unreported NSL scale ($p < 0.001$) and safe. There were no major adverse events reported. This study supports the efficacy (according to the NSL scale) and safety of hy-CaHA (1:2) for NSL. Our results also highlight the utility of the newly developed NSL scale, being a useful tool to evaluate the level of NSL before treatment and to measure the outcome.

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Protocolo Glúteos

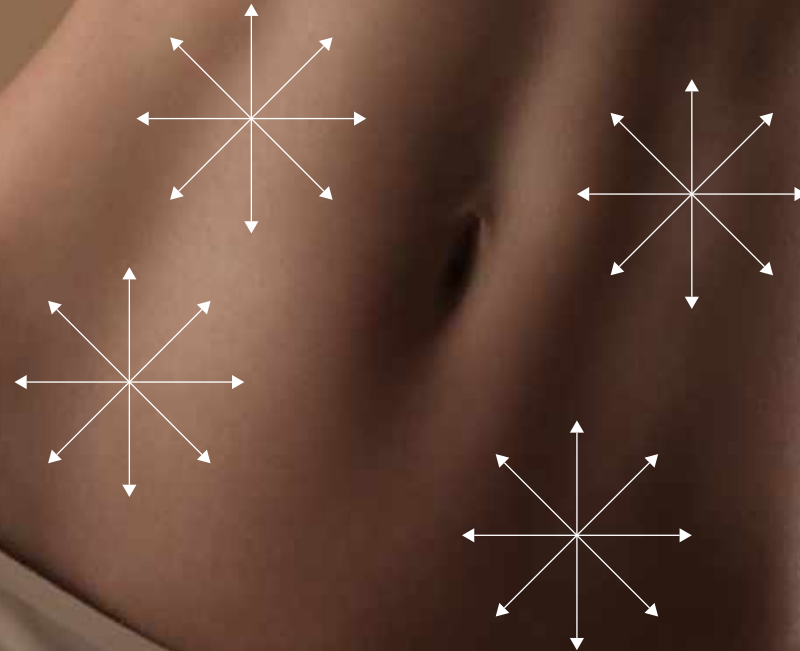
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Protocolo Barriga



skymedic

Protocolo Brazos

meso ox.



Protocolo Piernas



Protocolo Manos

