J Clin Exp Dermatol Res 2017, 8:5(Suppl) DOI: 10.4172/2155-9554-C1-063

## 12<sup>th</sup> Global Dermatologists Congress &

2<sup>nd</sup> Euro-Global Congress on

## Melanoma and Skin Diseases

August 31-September 01, 2017 London, UK

## Tissue repositioning and rejuvenation of the face and neck by chemical myoplasty and myopexy

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Background: Until now, the concept of facial rejuvenation was based only on volume augmentation concept (fillers). This concept can be seen in a different way, by projecting a chosen facial area without any volume augmentation, keeping the same tissular mass as volume, just by repositioning the muscles by chemical myoplasty and myopexy.

Aim: To achieve the projection on a facial area without volume augmentation, a 3D muscles repositioning is needed to lift, tighten, and project muscular viscoelastic units considered as elastomers.

Methods: A patented mixture of carbolic acid and peanut oil acid (arachidonic acid) is used. Concentration of carbolic acid is 5%. The basic technique consists in injecting perpendicular to the plan of the muscle (vector) 0.05 ml of this mixture each cm and same in the perpendicular plan (tensor) to the precedent following the direction and the sense to obtain the wished deformation of the muscle using criss cross-technique. Syringes 1 ml Luer Lok as needles 30 g - 1/2 is used.

Results: Over the last 16 years, I have treated hundreds of patients in this way. Results are satisfactory for patients and physicians. Concerning 1/3 medium of the face, the Naso labial furrow is less deep and shorter. The malar area is more projected and the tightening effect is evident. Concerning the 1/3 inferior of the face, static: the mandible contour gets a better definition – the infra mandibular area gets concave – the saddy low jowls disappear dynamically: the in aesthetics of mouth depressors as marionette lines become quite invisible without any muscular paralysis. The effectiveness of this treatment increases with the number or the repetition of the procedures because the basic muscular tone will be thus increasingly high on the scale of the tension of this last. The treatment can be ineffective in 8% of the cases (bad technique). The only complications met are only transitory, like oedema and ecchymosis which never exceeds 10 days in worst cases without medications. The advantages of these techniques are important for the patients: the immediate effect, the absence of scars, the absence of down time, the absence of social eviction. All treatments performed have given an improvement in terms of cellular rejuvenation so that the appearance is more healthy and steady regarding the recovery in timing of biological ageing.

Conclusion: The techniques of chemical myoplasty and myopexy open possibilities to facial plastic surgeons as cosmetic dermatologists enabling them to complete and/or maintain a face lift and to propose an alternative to the surgery. Such techniques are too an alternative to fillers and botulinum for facial rejuvenation using projection without paralysis without volume augmentation.

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