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Impact of low volume and multiple levels filling for volumetric rejuvenation in Indian skin

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mpact of low volume and multiple levels filling for volumetric rejuvenation in Indian skin facial subcutaneous fat is 上 partitioned into multiple, independent anatomical compartments, which may age independently, resulting in abrupt contour changes between them. Separate fat compartments suggest the face does not age as a confluent mass. Indian face has a small bony framework. Width of the malar prominences and mandibular angles along with height are smaller. Indian's face tends to get fuller and tissue descends downwards and medially. Lower 1/3rd of the face is much shorter in comparison to the upper 1/3rd and the mid 1/3rd of the face. Deep supra-periosteal fat is lost first followed by loss of fat in superficial compartments. Thus volumetric repletion must roughly follow restoration in same pattern. Deep restoration first followed by superficial placements. Depth of injection placement is thus relocated from superficial to deeper planes. This creates a foundation for deep structural support and achieves volume repletion of subcutaneous fat compartments. The techniques described here in respect to Indian faces and their aging reflections highlights a pattern of repletion with fillers using less volume, high G prime, strategic placements of lateral to medial, superior to inferior and deep to superficial to create liquid lift. Each single compartment should be injected separately and major grooves of the face are treated indirectly by filling the anatomical compartments with moderate placements to prevent bulkiness of lower face. Injecting along the superficial compartments boundaries carries more risk of vascular damage, deep placements less vascular risks. The presentation also highlights impact of filling in an area on its effect in the adjacent fold, groove or feature with less volume of material thus economizing the entire filler experience for the patient. This is invaluable for patients who wish for volumetric rejuvenation but are restrained by economic constrains. Indian experience is elaborated with clinical examples of aging changes and volumetric outcomes post therapy.

Biography

Shehnaz Arsiwala is the Founder and Director of Renewderm Skin Hair Lasers Aesthetics Center. She is the Honorary Consultant at the Saifee Hospital and Prince Aly Khan Hospital Mumbai, India. She was awarded the Outstanding Dermatologist Award by Giants Group in 2000. She is also an Associate Editor of *Journal of Cutaneous and Aesthetic Surgery*. She is the past Coordinator of IADVL-SIG-LASERS and aesthetics. She is also the Coordinator of Focus Group Aesthetics-ACSI. She is the Co-Editor for case book of dermatology and psoriasis. She has about 25 articles, papers and book chapter publications in national and international journals.

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