

Treatment Possibilities and Limitations

Treatment Success

- If you are prone to fever blisters / cold sores – it is generally recommended to use prophylactic antiviral agents 24hrs prior to resurfacing as description requires.
- Since this is an ablative effect on the treated area, patients with more moisture in their skin experience more redness and sensation with greater results in fewer treatments. Therefore, a patient with dry skin may require more treatments.

Number of Sessions and Intervals

For the most effective results, subsequent treatments should be re-booked at appropriate intervals that will be determined by your practitioner. Some clients may require more than one course of treatments sessions. NB!! Skin needs to properly heal before the next treatment.

- Skin Resurfacing: 1-6 sessions every 3-4 weeks
- Scarring: 3-6 sessions every 3-4 weeks
- Solar Keratosis / Skin Tags / Warts: 1-3 sessions every 4-6 weeks

Care and Recommended Guidelines

Prior to the Session

Sun Exposure

- To reduce the potential risk of post-skin resurfacing hyperpigmentation, ensure to prep the skin with topical products such as hydroquinone, mild tretinoin, and/or glycolic acids for at least 1 – 2 months prior the session.
- For an optimally effective and safe treatment, sun exposure is to be stopped at least 3-4 weeks prior to session. One month before the session, apply high SPF sun block on the area to treat every two hours.
- The intake of sun activators or the use of chemical self-tanning lotions is to be stopped 2 weeks prior to session.

Skin Preparation

- Prior session, the skin is to be thoroughly cleaned either with soapy water or with a mild cleansing agent. Neither make-up nor fragrance should remain. If you applied a preparation with essential oils, it is very important you mention it.
- The area to be treated should be ideally shaved the day before the treatment session. If not, it will be shaved on the same day, (only if dark pigmented hair is visible in the treatment area).

During the Session

- You will be asked to wear special goggles to protect your eyes. Never look directly into the handpiece.
- Numbing cream will be applied before the treatment.

Possible Risks and Side-Effects

- Heating sensation or pain – patient may experience a heating sensation during or just following the treatment, however, such pain is expected to be mild and to resolve within few minutes.
- Erythema / swelling / pain – may be present in the treated area and will likely disappear after 24 - 72hrs.
- Burns – might occur if the operator does not follow instructions, i.e., energy too high or staying too long with the applicator on the same spot. Should this occur, topical medication should be pre-scribed to accelerate healing.
- Dry skin / itching – may occur at the first 12 hours post-treatment. Usually, it will resolve spontaneously within 48 – 72hrs. Lubricate with moisturizing cream can be helpful.
- Muscle Tension/Pain – maybe present occasionally in the treated area and is expected to disappear within 24hrs.
- Bruising – may occur due to excessive pressure of the handpiece.
- Minimal transient scab formation after the treatment.
- Hyperpigmentation – Rarely observed. If adverse side effects occur (hyperpigmentation), sun protection and post-resurfacing depigmenting agents such as hydroquinone can be used to help obtain resolution.
- Not observing the guidelines especially related to sun exposure may lead to a transient but long-lasting hypo/hyperpigmentation that may last on the average 3 months.
- Reactivation of fever blisters is possible if a preventative prophylaxis was not used in patients that are prone.
- Infections / Scar formation can occur – inform your practitioner immediately if suspected.

After the Session / Homecare Guide

Recommendations:

- It is recommended to avoid excessive exercise, sweating, hot baths, or saunas for 3 – days after treatments.
- Drink plenty of water to flush any toxins out of the body (8-10 glasses daily).
- It's recommended to avoid consumption of alcoholic drinks for 3 – 5days after treatment (alcohol might drain water from the body & skin).
- Discontinue active serums / products containing active ingredients until day 7. Depending on the skin's integrity if the skin is still extremely sensitive and swollen, extend this period accordingly.
- If excess swelling and pain persist, cold compression can be used to relieve the swelling and heat sensation. Please follow cold compression technique as instructed.
- If you experience any discomfort, pain or inflammation non-steroidal medication may be used, and can be recommended by your medical practitioner.
- Sleep in an upright position to reduce swelling (especially around the eye area) manual lymph drainage can be done around the areas the persist with swelling.

Immediately After the Procedure:

- Rest for 10-15min after the initial treatment, if you experience any light-headedness or dizziness.
- Immediately after the treatment the area will experience intense heat / sunburn feeling, with redness (24-72hrs for aggressive treatments). Swelling in aggressive treatments can remain for 7 – 10 days after the treatment.
- Immediately after treatment, a wound healing / barrier repair product will be applied
- Do not wash the treatment area for at least 12hrs after the procedure.

12 – 24hrs After the Procedure:

- Wash the area daily with cold / lukewarm water with a mild cleansing agent (avoid any physical abrasive agents) gently massage the cleanser into the skin with circular movements which will help soften the scabs, pat-dry the skin with a cotton disc / surgical gauze. Do not rub vicariously.
- Apply a thick occlusive ointment on the area every 2 – 3hours.

24 – 72hrs (2 – 3days) After the Procedure:

- If the area that was treated is exposed to friction / clothing cover the wound with breathable gauze and tap to protect for shafting.
- The treated skin is especially fragile and needs to be protected from the sun. Broad-spectrum Sunscreen (at least SPF-30) must be applied religiously from day 2 - 3 onwards for at least 3-months after, if the treatment area is exposed to the sun! AVOID DIRECT SUN EXPOSURE TO THE TREATED AREA.
- From day 3 – 5 onwards, use a thinner/ normal moisturizer so that the ablative pixels can start forming scabs
- During the healing period the skin may become itchy (as the scabs start shedding), avoid picking or scratching the skin during this period. Pale (conservative treatment) to dark brown (aggressive treatment) pixel pattern and leathery feeling on day 3 – 5 with flaking and tight skin sensation.
- A subtle enzymatic exfoliator or micro-peel can be used 10 – 14 days after, to remove the remaining scabs, or gently use surgical gauze after cleansing the area with lukewarm water, do not rub vigorously.
- Make-up can be applied to minimize roller or pixel appearance on day 7 – 10. Mineral make-up can be applied from day 4 – 5, these include ingredients such as Zinc oxide, Titanium dioxide, Iron oxide (in red, yellow, and black), Ultramarines (such as ultramarine, blue), Carmine (a red colour).
- Patients should return to the clinic 3 – 7 days post-treatment for examination of the treatment site and for additional treatment, if necessary.
- Full recovery by days 7 – 10 (depending on the initial treatment approach). Down-time is decreased with subsequent treatments.
- If no additional treatment is necessary, the patient should return for an additional examination two months later.
- Avoid sun exposure during pre- and post-operative period. If adverse side effects occur (hyperpigmentation), sun protection and post-resurfacing depigmenting agents such as hydroquinone can be