

ICHKONZEPT®: THE KEY TO ATTRACTIVITY

Dirk Harald Gröne introduces the IchKonzept® and explains why they partner with Hyabell fillers to produce the most natural looking results



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THE PHILOSOPHY OF cosmetic medicine stays in a constant flow. Initially used for blending wounded people unnoticed into society, aesthetics later became an instrument of privilege. Plastic surgeons in the beginning were motivated to create heroic changes on their patients that would have been unmistakably identified.

Availability of hyaluronic acid (HA) fillers on the market changed all of that. Unlike all invasive treatments HA products offer a non-surgical treatment and provide accurate and predictable results with impressive safety records¹. Besides, using precise unit measurement made possible to set up studies and assess the results of

As skilled practitioners we have learned from behavioral science and substantial impression studies that mild, barely detectable changes in facial appearance may alter the first impression one makes and the personality one projects. The active improvement of our appearance seems to be more than simply a cosmetic indulgence as we launch a powerful domino effect: 'the more youthful the reflection in the mirror, the better we feel'. This affects our brain chemistry. Look better, feel better means success². Apparently a summary of subtleties and self-esteem may drive attractivity. This 'beauty code' consists of characteristics, such as smoothness, evenness, shadowless, which are supposed to be stable and synonymous across different cultures for an attractive face.

genetically determined chronology of ageing and identified structural component changes as skeletal loss (resorption of mandible, orbital rim, maxillary bone leading to hollow eyes), lipoatrophy, loss of collagen and elastic tissue, and skin redundancy, which can be seen in nasolabial folds and jowls as well as from other changes in phenotype. Many of these features can be measured (Calipers, Validated Grading Scales, OCT, Skin Physiology) and treated³.

A day in aesthetic medicine

As the number of products expanded, consumers became increasingly sophisticated and demanding. Data from the IMPACT STUDY 12/2012 European consumer market research on more than

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an aesthetic intervention with scientific standards. Today many patients seek for pleasing outcomes without anyone noticing that something had been done. Most of them would not accept a requisite healing period, visible bruising or swelling before being seen in public.

Subtleties and signs of beauty

Structural components of ageing

People learn to live with their appearance. Nevertheless, out of nothing we start judging things, finding changes and have an urgent wish to correct them. Sometimes it is imposed by the society, and sometimes it is just us. The science on facial ageing has been growing enormously. We learned the

12,000 women revealed that 40% of the treated patients were only partially satisfied. The treatment recommendations and results did not fully match their expectations. 41% of them even changed the aesthetic practice after the first treatment, and almost half gave as a reason of unmet customer service and procedure level. Even after the introduction of teaching concepts

such as the harmony programme or the emotional codes choosing the right injection technique and the right product out of the many, still remains a challenge⁴. Obviously each individual requires a personalized treatment plan depending on age, medical background, facial ageing type, anatomic peculiarities, personality and preferences. But the 'subliminal difference' is not limited to one type of procedure, rather it is a philosophy to alter ones appearance within our patient context to make the face naturally appear more attractive.

How to motivate the patient for the right treatment?

The typical sequence of 'ichKonzept'

A: The beauty consultation: hospitality

- Start a conversation. Patients should be welcomed by beauty consultants (BC) in a privileged and relaxing atmosphere where make-up is softly removed; 'Feel at home'
- Ask about motivation, expectations, timeline, budget and lifestyle. What external influences are at the forefront? Take anamnesis
- Show the patient the big picture. Behavioral sciences, neurophysiology, aesthetic medicine, and art have defined features of beauty that can be measured. Those characteristics can be illustrated by simply watching covers of magazines. The patient has to understand that this knowledge influences the work of the doctor
- After the big picture, narrow the

analysis to a close look in the mirror. Let the patient feel confident and talk. Transmit empathy and trust by highlighting their good features

- Explore the expectation and what to achieve in concrete terms. Is there a special demand for a change? The BC should list 2-3 items and name pathways for subtle, age appropriate and natural looking clinical outcomes.

B: Objectification of needs and limitations: credibility

- BC introduces the doctor, gives briefing, counseling and starts imaging the patient on a 3D device (e.g. Vectra XT, Canfield)
- Doctor supports the patient in the wish for improvement explaining the concept of 'Subliminal Difference' and the need for early intervention supported by photographic material of case reports, e.g. Binder's BoNT twins studies⁵.
- Doctor shares his thought on the patient's visible facial characteristics and objectifies his diagnosis stepwise. It is important to include the patient in the 3D Assessment. After, some cosmetics can be chosen for the first facial cosmetic treatment with Jet technology.

C: Tailor-made medical approach: professionalism

- The combination of 5 existing minimal invasive technologies for: 1. relaxation of hyperkinetic areas with neuromodulators; 2. enhancement of lost volume with fillers; 3. lifting and resuspending with resorbable

	Hyabell® Lips	Hyabell® Basic	Hyabell® Deep	Hyabell® Ultra
Composition	Sterile HA of non-animal origin			
Concentration HA	12 mg/ml	16 mg/ml	20 mg/ml	24 mg/ml
Cross linker	BDDE	BDDE	BDDE	BDDE
Lidocaine conc.	0.3%	0.3%	0.3%	0.3%
Elasticity G' at 0,1Hz	9 Pa	69 Pa	316 Pa	712 Pa
Viscosity G'' at 0,1Hz	15 Pa	54 Pa	169 Pa	270 Pa

Figure 1 Physical properties of Hyabell® range.



Figure 2 (A) Before and (B) after; Eyebrow HYABELL® Basic 0.5ml per side with needle; Chin 1ml HYABELL® Deep 1ml; and upper malar region 0.5ml per side with cannula, plus Jessner eye peeling

threads and RF; 4. skin resurfacing with energy based devices; and 5. skin toning with IPL/PDT – will provide an intelligent multifactorial approach for everybody

- Away from cosmetics, the doctor visualizes all aspects of the treatment to the patient using a simulation of the expected outcome. At this point it is important to go stepwise and to let the patient decide on the treatment. As a general rule the doctor gives the patient a financial plan, a personalized business media, and arranges a follow-up appointment.

First day of treatment:

deliver emotions

The fact that the patient has returned proves the motivation to follow up on the plan. Now it is on the doctor to deliver. On the first day we advise practitioners to create the socket for further action and boost confidence. In youth, the subcutaneous fullness of the forehead conceals the muscles responsible for facial expression in that region. As this fullness disappears with age, the intrinsic tone of the glabella, procerus and frontalis muscle gives rise to fixed wrinkles or folds. Immediately after a contraction (facial expression) the skin shrinks and creates wrinkles at the glabella, forehead, and crow's feet. Neuromodulators are safe, if appropriately done—with the right dosing, right area, and right way. Lower face intervention comprises prevention of chin dimpling in movement, lip corners turning downwards with movement, visible bands, horizontal neck lines, and oval facial shaping with a Mikro Botox (1:7) droplet technique⁶.

In the second step, fillers are introduced and can be performed the same day.

Tailor made filler for a tailor made treatment

We chose our fillers based on three parameters:

- Materials should be bioresorbable
- Clinically tested and safe
- Straight forward product line.

The combination of Hyabell® (Adoderm GmbH) hyaluronic acid dermal fillers with our ichKonzept® enable the creation of the most desirable natural face architecture. Combining treatments demands a particular filler to fit the treated area and expected outcome.



Hyabell® fillers have: limited water binding, easy to mold and massage that are prioritized to delicate areas like lips and the infraorbital region (HBLips & HBBasic); higher viscoelastic properties needed for immediate and lasting volume creation, face contouring, and harmonization (HBDeep & HBUltra); and are provide softer and homogenous injection for a precise injection technique with lower risk of adverse events (*Figure 2*).

Since 2005 Adoderm promotes the concept of different concentrations for facial treatments, which clearly goes with many doctors' recommendations and needs. 

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LIPS VOLUMIZATION WITH THE AID OF HA-LIDOCAINE FILLERS

Sebastian Torres defines a protocol of lip enhancement through HA fillers, based on patient goals that will affect product selection, technique and outcome analysis



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LIP TREATMENT WITH fillers is among the most requested procedures in aesthetic medicine. Nevertheless, the treatment has many intrinsic difficulties, being a highly exposed and sensitive area. Moreover, continuous muscular movements affect material duration, and may cause migration or aggregation. Added to the physical and anatomic difficulties, patient desires and expectations make this procedure even more challenging. Choosing the right hyaluronic (HA) dermal filler for the patient is a challenging task. Old patients and young patients are not looking for the same results and the same filler cannot be used on those patient profiles.

To sum up, lip treatments include a variety of patient goals and techniques to be considered before processing.

The objective of this article is to define a protocol of lip enhancement through HA fillers based on patient goals (rejuvenation vs recounturing) that will affect product selection, technique and outcome analysis.

Lip filler technique classically encompasses six steps:

- vermilion border
- columns definition
- Cupid's bow definition
- oral commissures
- inner commissures (Mona Lisa smile)
- volume definition.

Although not all these steps are

always necessary it is academically useful to be able to analyse them critically to obtain global aesthetically pleasing corrections.

Generally speaking, the first five steps are better achieved with needles, while the latter is obtained with cannulas. Needles allow a more precise distribution of the material, whereas cannulas permit an even flow of the syringe content and are associated with less pain and bruising. A common belief is that softer products are better for natural retouches, and higher concentration more viscous materials are preferred when more accentuated and long-lasting effects are expected. The former may indicate that not all patients can be treated with a single material or technique. Given this bias, it is difficult to evaluate lip filler techniques as a whole indistinct group.

Lip recounturing vs. lip rejuvenation

Regardless of cultural differences and beauty concept from one region to another, lip recounturing is defined as the procedure of giving volume to the lips. The typical patient going after this procedure are young female patients. However, in Arabic countries, South-America and Eastern-Europe, it is also preferred by older patients as volume is still a sign of beauty and status.

Lip recounturing techniques are delivered on younger individuals with high expectations and low tolerance to pain or complications. These sorts of treatments are

particularly challenging, more time-material consuming and are correlated with lower patient satisfaction and higher incidence of adverse events.

On the other hand, lip rejuvenation is defined as giving the lips a younger look, keeping the natural look and facial proportions. The typical patients are conservative women over 40 years of age seeking to maintain a younger and fit look, and male patients too.

Lip rejuvenation procedures are typically performed in older patients with lower expectations, higher tolerance to pain and complications. The former patient type is associated with lower material consumption, higher patient satisfaction, and lower incidence of adverse events.

Choosing the proper filler

As experienced practitioners, we have learned by publications, congresses and experience the necessity of choosing a filler that delivers safe results and patient satisfaction. The lip region is extremely sensitive and the same treatment can have different end results from patient to patient.

After we have defined our patient profile and needs, we prioritize a filler with the following characteristics:

- low hyaluronic acid concentration in order to avoid extreme swelling reaction due to hydrophilic capacity of hyaluronic acid
- low elasticity (G') providing the practitioner a malleable gel, easy

to spread in order to avoid the creation of granulomas

- lower extrusion force in order to proceed with a soft and homogenous injection impacting directly on the precision of our results and lip appearance.

HYABELL® (Adoderm GmbH) range of dermal fillers, offer two products adapted for lips treatments: Hyabell® Lips (12mg/ml) for lips rejuvenation and HYABELL® Basic (16mg/ml) for lip recountouring.

The advantages of those fillers with unique elastic and viscous features for sensible to inject areas is that it gives the practitioner the flexibility to better adapt injection techniques to meet patient expectations.

The techniques Lip rejuvenation

Lip rejuvenation is a return to pre-existent condition, without attempting to alter individual lip features.

Treated with Hyabell® Lips through no-touch lip technique, following the recommendations of Dr. Michael Weidmann (Augsburg) with 1ml syringe of HA attached to a 0.5, 30-G needle. The HA is deposited in the lip muscle using depots of 0.1ml, perpendicular to orbicularis oris muscle fibres, entering from the white lip to reach the mucosa through four entry points or segments for the upper lip (UL) and five segments for the lower lip (LL).

The key part of this technique is that after the depots are created, an even massage with aseptic gloves must be performed to spread the gel, smoothen the lips and ensure no bolus are left behind to avoid granulomas. When more volume is required, it is recommended to increase the number of entry points instead of increasing the volume

deposited. The total volume varies between 1ml and a maximum of 2ml.

Benefits of this approach are less pain and a subtle change, giving a natural look.

Lip recountouring

Lip recountouring is volume augmentation and achievement of a new lip appearance, which was never present before.

Treated with Hyabell® Basic, with 1mL syringe of HA attached to a 25G disposable blunt tip cannula. The HA is deposited in the superficial subcutaneous plane using a linear retrograde technique, parallel to orbicularis oris muscle fibres, from the oral commissures to the midline on each side. Gentle massage must be performed immediately after administration.

When the patient has higher lip volume expectations, we can apply HYABELL® combination and use of HYABELL® Lips and Hyabell® Basic.

As both products are smooth to inject and easy to mold after injection, with lower G' (elasticity) and low HA concentration, the recommended approach is to first create volume using HYABELL® Basic and then contoure the lips with HYABELL® Lips. It is recommended to proceed in 2 separate sessions in order to avoid an undesired swelling.

Conclusion

This differential approach to lip filler treatment may be useful for patients and physicians, identifying subgroups of individuals prone to a simpler procedure and others with more complex and higher risk requests. The differentiation of this reality may increase our patient satisfaction and reduce complications.



Figure 2 Women 39 years old. (A) Before and (B) After lip rejuvenation treatment, 1ml



Figure 2 Women 56 years old: (A) Before and (B) After lip rejuvenation treatment, 1ml



Figure 3 Women 28 years old (A) Before and (B) After lip recountouring treatment, 0.7ml.

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