

Complete Peri-orbital Rejuvenation with Fotona SMOOTH[®]

Carlos Gaspar Jr, MD

Introduction:

In my daily practice, whenever a patient presents with surgical indication for eyelid surgery, I combine Fotona laser rejuvenation right after the surgical procedure. One reason is because it is possible to enhance the power of laser treatment when the patient is under local anesthesia. Thus, it is possible to perform a complete peri-orbital rejuvenation combining surgical procedures with Fotona laser treatment. The surgical procedure will only eliminate the excess skin, or by repositioning orbital structures, provide a better aesthetic appearance. But the truth is, without laser skin rejuvenation, the results are always considered poor.

| Laser | SP Dynamis | |
|----------------------|--|-----------------------|
| | | |
| | Step 1 | Step 2 |
| Wavelength | 2940 nm | 2940 nm |
| Handpiece | PS03X | PS03X |
| Spot size/ Fiber tip | 7 mm | 7 mm |
| Fluence | 6.0 J/cm ² | 1.6 J/cm ² |
| Mode | SMOOTH | MSP |
| Frequency | 3.3 Hz | 2 Hz |
| Passes/ Repeats | 5-times OR until you deliver 200 J on each side | 3 passes, Turbo3 |
| Sessions | 1 session right after surgical procedure | |



Dr. Carlos Gaspar Jr. is specialized in General Surgery. His practice is based in Sao Paulo, Brazil. He has been certified as a Plastic Surgeon of the Brazilian Plastic Surgery Society and his profession also includes teaching Plastic Surgery at the Jundiaí College of Medicine. In recent years he has become a laser enthusiast and includes laser in his practice.

CLINICAL CASE:

The present case shows a woman 59 years of age, complaining about her entire peri-orbital aging. The main complaints were: upper and lower eyelid laxity, wrinkles, and hyperpigmentation of that area. The planning for her case: 1) upper eyelid surgery without fatremoval 2) complete Fotona peri-orbital rejuvenation (SMOOTH step + MSP step). To achieve full length skin rejuvenation and collagen stimulation, we chose the Dynamis SP equipment. NOTES: The patient went under local infiltration anesthesia, which I performed with a prepared solution that consisted of: 50 cc 0.9% saline solution + 20 cc Lidocaine without epinephrine + 1 cc epinephrine. This solution is then injected with 3 cc syringes and a small needle around the upper and the lower eyelids. The amount of solution should be enough for both sides, and with some solution left in case there is need for more. This anesthesia injection step is extremely comfortable when performed with small syringes and slowly. No water or air was used.

Before

3 months after session

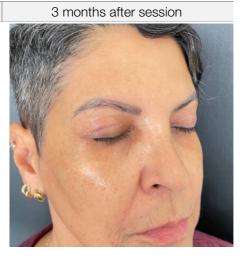
3 months after session

Before

3 months after session







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