

upcoming Valentine display. Jenny truly is an artist and her displays always get rave reviews. She is also collecting information on the latest and greatest products and skin-care treatments. Find out what's in and what's out for 2005! Hint: Skin Is In!

Both Dr. Cox and Dr. Finn were keynote speakers and live injectors in a Live Injector Botox Training meeting in New York City on Dec.4, 2004. They trained over 70 physicians in the proper Botox injection techniques. They took two of our super nurses, **Kim** and **Krista** with them to assist them during the training. The Drs. treated them to an awesome NYC experience taking them to dinner and showing them all around. They went to Times Square and saw a woman get proposed to and experienced a true NYC cab ride after "the best meal they've ever had" at Blue Water Grill in SoHo.

Rachel has been super busy with home renovations. She is in the finishing stages of completing the 2nd level of her home with a new master bedroom and huge bathroom. She says



this will be her own special get away from the family. Her girls, Amber and Madison, are very excited because they will get their very own rooms to decorate.



left to right starting with back row - Rachel, April, Jenny J., Jenny S., Jill, Shannon, Kim, Karlee, Stacie, Dr. Finn, Dr. Cox, Krista, Julie

Stacie and **Shannon** will be moving to new homes early this year. Stacie has worked hard to sell her home in Roxboro and she plans on building a new home closer to work in Hillsborough. Shannon is also moving to Hillsborough in February. Several of us already live in this cute town and can't wait to have friends close by.



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face facts

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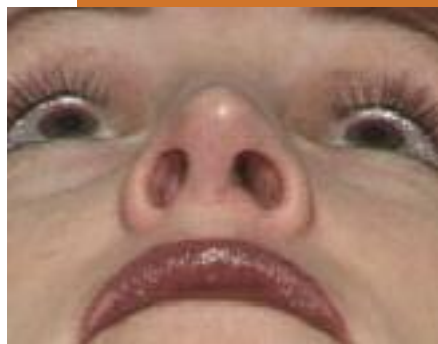
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Spring 2005

FACIAL PLASTIC SURGERY



*Before
revision
nasal
surgery*



*After
revision
nasal
surgery*

Nasal surgery is one of the most common surgeries for both cosmetic and functional reasons. The nose is the defining characteristic of the face and even a slight disproportion or irregularity may greatly detract from one's appearance. Deformities may be a familial trait or may be the result of trauma, previous surgery, or abnormal development. Significant breathing problems and recurring sinus infections can accompany nasal deformity. Rhinoplasty may improve not only the aesthetics of the face but also the function of the nose.

The experienced surgeon performs procedures to improve both form and function. It is very important for your physician to be a specialist in nasal airway function as well as facial plastic surgery. For any patient having nasal surgery efficient breathing should be as high a priority as appearance.

Otolaryngologists or ENT physicians are trained in the medical and surgical treatment of patient with diseases and disorders of the ears, nose, throat, head and neck. Facial plastic surgeons specialize in performing cosmetic and reconstructive surgery on the face, head and neck. Dr. Charlie Finn is board certified in both otolaryngology and facial plastic and reconstructive surgery and has authored the chapter "Rhinoplasty, Broad Nasal Tip" in the online textbook, Otolaryngology and Facial Plastic Surgery. As well as several other publications and chapters.

The cosmetic rhinoplasty can reshape the nose, improving facial balance proportions. There are several characteristics that determine what is the right nose for you. Symmetry, facial proportion, shape and stature all contribute to the aesthetics of the nose. Changing the width

of the nose, reshaping the bridge or tip, or changing the angle of the nose may dramatically improve facial harmony. Dr. Finn is experienced in all facets of both primary and revision rhinoplasty.

At Aesthetic Solutions, you may have a detailed discussion with Dr. Finn to best determine your goals and realistic outcome of the surgery. Sophisticated computer imaging, allow us to modify your nose on the computer screen and come to a better understanding of your needs and desires. More importantly, we can demonstrate the limitations of surgery to ensure realistic expectations. Only with careful considerate discussion and education about the procedure may one be adequately prepared to achieve a satisfactory outcome. Dr. Finn's special combinations of training both in the aesthetics and in the function of the nose may help insure optimal results.

Just as each nose is different, each rhinoplasty is different as well. There should be no "cookie cutter" rhinoplasty. As various techniques will be adapted to your special circumstances to achieve your best possible result. Dr. Finn's years of experience and specialty training will help you achieve your goals.

on the inside

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Now's the time to get serious about getting rid of those leg veins...for good!

Many women develop leg spider veins as they age. Vein therapy using either lasers or injections is an excellent solution and the fall and winter is the best time of year for these types of treatments. The use of compression hose to collapse the veins is required for days to weeks after treatment and wearing the support hose is more comfortable in the colder months. The veins take four to six weeks to reabsorb into the body. You'll be ready for short skirts and bathing suits by the spring and summer.

No one is totally sure what causes spider veins. Family history predisposes to this condition, particularly female relatives. Certain things make spider veins worse: estrogens, pregnancy, and birth control pills, increased weight, and trauma. Spider veins are formed by the dilation of a small group of

blood vessels located close to the surface of the skin. Spider veins are most commonly found on the legs but another common area is the face. Sclerotherapy and/or laser therapy are the treatments of choice.

(discoloration of the skin) along the treated vein, new spider vein formation, temporary stinging, reddening and itching after injections. Several sessions may be necessary for maximum results.



Before Sclerotherapy



After Sclerotherapy



Before Gentle Yag Laser

After Gentle Yag Laser

Sclerotherapy is a technique used to treat veins by injecting the vein with an agent called sclerosant. The sclerosant is injected with a very small needle into the vein affecting the vein lining, causing its destruction. The vein hardens and is absorbed by the body. Sclerotherapy generally requires multiple treatment sessions. Treatment sessions take 15 to 30 minutes. Patients are required to wear compression hose for 1-3 weeks following treatment. Patients may experience bruising and inflammation. Walking is encouraged to help the solution travel evenly through the affected vein.

The most frequent side effects of sclerotherapy include bruising, pigmentation

Vein therapy using lasers is a great option for those veins that are too small for the injection method. The **GentleYag laser** is the laser of choice for **very small veins on the legs** and also targets blue veins. The lasers deliver an intense but gentle burst of light energy that is absorbed by the targeted blood vessels, not by the surrounding tissue. These blood vessels are coagulated and then reabsorbed by the body during the healing process.

The GentleYag laser is also commonly used for laser hair removal for patients with darker skin tone (see accompanying article.)

News Flash!

Aesthetic Solutions

Aesthetic Solutions presents complimentary seminars to inform you more about holding back the hands of time. Join us every few months in a comfortable, casual atmosphere to discuss safe, effective, tried and true rejuvenation procedures. If you would like us to speak to your group, please call Julie or Jill, (919) 403-6200.

Winter 2004 Seminars: On Nov. 11, 2004 at the UNC Wellness Center, Dr. Sue Ellen Cox and Dr. Charlie Finn gave a Preventative Skin Care Discussion on fighting pre-mature aging and the many restorative techniques for already sun-damaged skin. On Dec. 7, 2004 we held our Holiday Mineral Make-up Seminar with Glo Minerals Cosmetics. See article in this newsletter for safe make-up tips.



Dr. Sue Ellen Cox spoke at the American Society for Dermatologic Surgery 2004 Annual Meeting, was the course director for **"Practical Botox and Fillers,"**

lecturer for **"Tips for Starting a Cosmetic/Dermatologic Surgery Practice,"** and the moderator for **"Botulinum Toxin"** and **"Headaches"** in San Diego, CA on September 29-October 2, 2004. Both Dr. Cox and Dr. Finn were keynote speakers and live injectors in a Live Injector Botox Training meeting in New York City on Dec. 4, 2004. They trained over 70 physicians in the proper Botox injection techniques.

Dr. J. Charles Finn presented **"Non-Endoscopic Forehead and Browlift,"** lecture and technique demonstration and **"Botulinum Toxin-Anatomical Variations"** An Interactive Audience Polling Session at the American Society for Dermatologic Surgery



annual meeting in San Diego, CA. Sept. 29-Oct 2, 2004. Dr. Finn also presented at Tulane University in New Orleans, LA on October 9, 2004: **"Emerging Trends in "mini" Surgical Procedures in Plastic Surgery,"** and **"Sculpting the Forehead and Brow: Botulinum Type A vs. Surgery,"** Combined Approaches for the Treatment of the Aging Face: The Role of Botulinum A Toxin, Photorejuvenation, Fillers and Cosmeceuticals.

In February 2005, we are enrolling in another Botox study with Allergan. It is a shorter term study with just 20 participants. If interested, please contact our nurses.

In 2004 Aesthetic Solutions contributed to the Central Children's Home in Oxford again. We appreciate the donations that also came from patients! We forwarded your funds directly to the home. We also made charitable donations to the St. Thomas More School, Durham Academy's Annual Auction, Fearington Cooks for Care Auction, Duke Children's Hospital Teddy Bear Ball, the Women's Center art show and the American Society for Dermatologic Surgery Research and Education fund.

Staff News

We have a new nurse!
Welcome Jennifer Smithwick, R.N.! Jenny S. moved to Chapel Hill from Greenville this fall. Jenny worked at the Aesthetic Plastic Surgery office in Greenville for 10 years, so she is well-versed in lasers and many of the surgical procedures we perform here. Jenny S. is professional, a hard-worker, and also fun to be around. We welcome her to our group.

Some new arrivals are expected next spring. Yes, you guessed it: we've been drinking the water again! **Karlee** and husband **Cleve** are expecting a little girl (just one this time!) near the end of March 2005. And, **Jill** and

Rick are right behind them, due on tax day! Co-workers enjoy catering to the lunch requests and chocolate cravings of these pregnant ladies. The offspring are officially outnumbering the staff!



Kim, Julie, Dr. Cox, and April

On October 2, 2004, Jill and Julie staffed the **Women's Distance Festival 5K run** for the 6th year. As a sponsor for the past 6 years, we hope to increase community awareness of reconstructive options available to victims of domestic abuse. Both Dr. Cox and Dr. Finn provide pro bono dermatologic and facial plastic/reconstructive services to people who participate in the S.C.O.R.E.S. and Face to Face programs. Please contact Julie for more information about these programs.

This upcoming spring, **April**, one of our front office coordinators, will pursue her education in Esthetics! Yes, April will be working part-time at our office while attending the Miller-Motte Technical College Esthetics Program. We are proud of April and feel confident her ambitious, caring nature will be put to good use in this program.



Shannon and Jenny S.

Julie ran another marathon in January! This time she convinced her husband, **Robb** to join her. They have trained all year for the Disney marathon. We all admire her unbelievable willpower and strength and we are all very proud of her.

Jenny J. has been very busy dazzling everyone with her Christmas displays. She is already getting ready for the New Year and

Pseudofolliculitis Barbae (PFB): Those Pesky Razor Bumps!

Pseudofolliculitis barbae, also known as PFB, is a common condition of the cheeks, chin and necks of predominantly African-American and Hispanic men and women. This condition occurs when curved hairs grow back into the skin causing bumps that tend to be red and itching. Shaving can exacerbate PFB, also known as razor bumps, and over time, unsightly dark marks may result.

Pseudofolliculitis barbae commonly affects the facial and neck areas of dark-skinned people with thick curly hair. The body treats ingrown hairs as it would a splinter by producing an inflammatory pimple-like bump. If the condition occurs over an extended amount of time, unsightly dark spots will occur. Fading of these dark spots may take many months. Over time, PFB can also cause keloidal scarring which looks like hard bumps of the beard area and neck.

In most cases, laser hair removal provides the best cure for this problem. In the past, lasers have presented considerable risk for treating dark skin and particularly tanned skin. Hypopigmentation, white discoloration, and hyperpigmentation, brown discoloration, have occurred after laser treatment to darker-skinned areas. Recently new lasers have been developed that provide safety and efficacy for dark and even tanned skin. An American

Academy of Dermatology study showed that patients with PFB who underwent monthly laser treatments over a three-month period showed an overall improvement in their condition. Others who preferred a less aggressive approach participated in another study in which they were treated with a topical retinoid gel. During this study, men



Complications of PFB resulting in keloid formation

and women who had at least 50 bumps on their face and neck applied the gel to one side of their face and an inactive gel was applied to the other side of the face. After 90 days, patients had a greater overall improvement in PFB, including a significantly lower number of ingrown hairs, on the sides of the faces that applied the retinoid gel.

We have the GentleYag and GentleLase lasers. The laser's energy is transformed into heat, which damages the hair follicle, leaving the surrounding skin unchanged. The more pigment in a hair follicle, the more light is absorbed, the more heat generated, and the more destruction of the hair follicle. The GentleYag laser uses a longer wavelength that effectively treats darker skin because it has less absorption in the skin's pigment called melanin. Larger spot sizes can reach deeper into skin tissue. Regardless of the laser used, light based hair removal is not effective for very light or gray hair. Hair must be pigmented for effective treatment.

Generally, the neck areas require relatively fewer laser hair removal treatments to eliminate or substantially reduce hair growth. Facial (beard) areas tend to be more persistent in growing new hair and usually require more laser treatments to achieve a "hair-free" state. After a few laser hair removal treatments, new hair growth will tend to be finer (thinner) and much less irritating to the skin. The key to controlling PFB is to minimize hair re-entry back into the skin. The best therapy is to avoid shaving, by either letting the beard grow (if possible!) or by pursuing laser hair removal. Laser hair removal is an easy solution to rid faces and necks of those troublesome bumpy, dark patches.

Restylane Special to Perfect your Pout for Valentines Day!

The days of February 1st, 2nd and 3rd we will be having a **patient appreciation week** for patients who receive Restylane. We will be offering your first syringe of Restylane at the regular cost, the second syringe at HALF off!

There's no better time than now to try this great injectable filler, especially at this savings! Please call now to schedule your appointment, (919) 403-6200.

NEW PRODUCT

PREVAGE ANTI-OXIDANT CREAM

From Allergan, the makers of Botox Cosmetic™ comes an exciting new breakthrough product in anti-aging skin care, **Prevage**.

Prevage contains a revolutionary new ingredient called Idebenone (pronounced "eedy b known"). This newly discovered ingredient has been found to effectively combat the signs of aging brought on by factors such as age, sun damage, and smoking.

Idebenone is an antioxidant. Antioxidants protect cells from environmental damage, improve the appearance of fine lines, reduce dryness, and smooth skin texture. Studies show that Idebenone is more powerful in preventing cell damage than 5 other popular antioxidants- Vitamin C, Vitamin E, Coenzyme Q10, Kinetin, and alpha lipoic acid.

Prevage is available at our office for \$100.

Tri-Luma® Cream CAN FADE THOSE BROWN SPOTS!

Melasma is a natural darkening of the skin on the face caused by excessive production of melanin — the pigment that causes skin to tan. Melasma only occurs on the areas of the skin that are exposed to the sun, such as the face and forearms. Exposure to the sun and heat, even during normal daily activities, can further darken and worsen melasma.

Melasma is a common skin condition that occurs predominantly in women and individuals with skin of color. In fact, about 6 million women are estimated to have melasma. Melasma is usually caused by normal hormonal changes in women — during pregnancy or when taking birth control pills or hormone replacement therapy. Because of the way melasma looks when it occurs, melasma is sometimes called the “mask of pregnancy.” Men can also develop

melasma, although it is rare. Anyone can be affected by melasma, though it seems to be more common in people with light brown skin, especially Hispanics and Asians. Melasma may also be associated with the use of certain anti-epileptic drugs.

Melasma can cause negative, emotional effects on patients' quality of life. Fortunately, there are different prescription products that can be used alone or in combination to treat melasma. Microdermabrasion and chemical peels may enhance these product's results and speed improvement of pigmentation, tone, and skin texture.

Tri-Luma® Cream (fluocinolone acetonide 0.01%, hydroquinone 4%, tretinoin 0.05%) is a triple-action cream for the short-term and intermittent long-term treatment of

moderate to severe melasma of the face. Tri-Luma® Cream can help reduce or eliminate the discoloration.

Exposure to sunlight, sunlamps or UV light and extreme heat, wind or cold should be avoided! Use of a broad-spectrum sunscreen with SPF of 30 or higher is required. Physical sunscreens containing zinc oxide or titanium dioxide are ideal because they reflect and scatter UV radiation. Wear protective clothing and change to non-hormonal forms of birth control if hormonal methods are used. Dermatologists and patients must both recognize that achieving acceptable results takes time. A minimum of three months of therapy should be expected before significant improvement becomes evident.

KERATOSIS Pilaris

The colder winter months usually bring dry and itchy skin. For some people this means a time when their Keratosis pilaris tends to be worse.

Keratosis pilaris (commonly dubbed “KP”) is a skin condition commonly seen on the upper, backs of the arms, buttocks and thighs, usually in teenagers on the upper arms or in babies on the cheeks. 50 to 80% of children have KP as well as 4 out of every 10 adults. Women are slightly more prone to developing KP.

Keratosis pilaris is caused by skin cells that do not flake off causing retained skin cells to plug up the hair follicles. They appear as small pimples that have a dry “sandpaper” feeling. They are usually white but sometimes

rather red and they usually don't itch or hurt. Keratosis pilaris may remain for years but generally gradually disappears usually before age 30. KP often accompanies atopic dermatitis and ichthyosis vulgaris so patients may also at times find themselves dealing with eczema, dry scaly skin, asthma or hayfever.

Keratosis pilaris is aesthetically displeasing but medically harmless. And while it may become more exaggerated at puberty, it frequently improves with age. Most people with KP are unaware that not only is there a designated medical term for the condition, but that treatment exists. Moisturizing washes and lotions, especially those containing exfoliating agents, are often

soothing and help reduce the number of KP papules.

One safe and effective treatment for KP is the **Glytone Kit**. We sell this kit in our office for \$45.00. It includes the Glytone Exfoliating Body Wash, Glytone Body Lotion and a scrub puff. Glytone Exfoliating Body Wash is very effective in removing dead skin cells. You can use the body wash in the shower or bath. The Glytone Body Lotion contains distinctive emollients and glycolic acid to smooth and hydrate the skin.

Technology Update

The Smoothbeam laser was FDA approved for treatment of sebaceous hyperplasia on December 2, 2004 adding to the previously cleared treatments of facial acne, back acne, acne scars and wrinkles.

Sebaceous hyperplasia is a very common skin condition most often seen in middle-aged to older adults. This benign proliferation of the sebaceous gland appears on the skin as small, soft, yellowish papules. Most often, these lesions are located near the nose, cheeks, forehead, and also on the chest.

The Smoothbeam laser targets overactive sebaceous glands in the skin. Visible clearing of sebaceous hyperplasia lesions occurs in a couple weeks following the procedure. We recommend a series of treatments over the course of several months to achieve optimal results.

The Smoothbeam treatments are relatively simple and take about 30 minutes. A topical numbing gel is applied 1 hour prior to the treatment to reduce discomfort. Patients can return to school or work immediately after treatment. Mild side effects may include

redness and slight changes in skin tone.

Smoothbeam emits a wavelength of light that is strongly absorbed by water in the skin. As the laser penetrates into the skin, heat is generated in and around the sebaceous glands in the upper layers of the skin which result in the heat-induced destruction of the sebaceous glands. The integrated dynamic cooling device (DCD) also emits a cooling spray, which allows preservation of the skin, thus minimizing treatment side effects.

LIPOSUCTION - for men, too

Both men and women can accumulate excess fat, which is not easily removed by exercise and diet. Liposuction, for both men and women, can be highly effective on many parts of the body. However, where fat typically accumulates differs between the sexes.

Women have a genetic predisposition to fat accumulation of the hips, outer thighs, and buttocks. This is commonly described as the "violin" shape because the back view mimics the shape of a violin. Women with the typical violin shape usually have a slim upper body with fullness of the hips, buttocks, and thighs leaving women looking disproportioned. Women are designed to have more fat on their bodies than men. Fat is essential for reproduction and therefore fat is stored and maintained on the female body in case of pregnancy. Fat deposits on the lower portion

of the body are usually areas that are often highly resistant to diet and exercise. Liposuction is an excellent solution to restore aesthetic balance and even out the mismatched portions of the body.

Men have a genetic predisposition to accumulate fat in the abdomen area and the love-handles. More and more men are realizing that they too can benefit from body-sculpting. According to the American Society for Aesthetic Plastic Surgery, in 2003, men had 13% of the nearly 8.3 million cosmetic procedures in the USA. The most popular procedure for men was liposuction! We've had great results trimming tummies of these fit men with stubborn localized areas of fat.

Liposuction is a surgical technique that improves the body's contour by removing

unwanted deposits of fat located between the skin and the muscle. Tumescant liposuction is the safest form of liposuction, offering the quickest recovery time. The word "tumescant" refers to swelling of the skin with local anesthetic. Liposuction involves the use of small, straw-like instruments called cannulas that are attached to a suction machine. The cannula is inserted through tiny skin incisions. A network of tunnels is created and the unwanted fatty deposits are suctioned.

A support garment is then worn for compression during healing. Patients report very little postoperative discomfort, they recuperate rapidly, and typically resume their normal activities within a day or two of the procedure. The result is a more balanced, attractive contour!



Before Liposuction

After Liposuction

Rosacea Flares Influenced by Skin Care Product Usage

For most people, a flushed face is a typical reaction to emotions ranging from excitement to embarrassment and sometimes even anger. Yet for an estimated 14 million Americans, facial redness and swelling are characteristics of rosacea. Rosacea is a chronic and often progressive skin disease that causes redness and swelling on the face. Most people affected by the condition are fair-skinned between the ages of 30 and 50. Rosacea often runs in families, with women being affected more than men. Men, however, often suffer from more severe forms of rosacea.

Rosacea can be socially and emotionally distressing. While the cause is unknown, the good news is that this condition can be controlled if people know and look for the symptoms, as well as follow a supervised treatment plan.

Standard medical therapies for rosacea include topical and oral anti-inflammatory and antibiotic medications. Newer approaches to rosacea treatment include laser and light therapies that treat persistent redness and dilated blood vessels following initial topical therapy. Laser and light treatments have been known to achieve longer-lasting improvements. According to a new study published in the October 2004 issue of the Journal of the American Academy of Dermatology (JAAD), pulsed dye laser (PDL)

therapy such as the **VBeam** in particular was found to be a safe and effective treatment for the symptoms of rosacea and resulted in a significant improvement in facial appearance and quality of life.

The **VBeam** laser emits specific wavelengths of light that target the tiny visible blood vessels just under the skin. Heat from the laser's energy builds in the vessels, causing them to collapse. **Intense-pulsed light (IPL)** therapy uses multiple wavelengths of light to treat dilated blood vessels in the face. Vbeam treatment and intense-pulsed light therapy take approximately 15 to 30 minutes and are performed at six- to 12-week intervals. Patients may require several initial treatments and then return annually for treatment of new blood vessels.

The best prevention for rosacea may be to avoid "triggers," or things that make the face red or flushed. Common triggers include hot or spicy foods, alcohol, sun exposure, physical exertion, extremes of emotion, rubbing the face and using irritating topical products and cosmetics. Menopause also has been known to be a trigger for rosacea. In addition, it is important for rosacea patients to care for their skin by using gentle facial products that do not cause excessive dryness or contain additives such as glycolic acid or alcohol that may further irritate the skin.



Before Rosacea



After Rosacea

Rosacea flare-ups also can be minimized by protecting the skin from the sun. Dermatologists strongly recommend the daily use of a broad-spectrum (UVA and UVB protective) sunscreen with a Sun Protection Factor (SPF) of 15 or higher, seeking shade when possible and wearing protective clothing such as a long-sleeved shirt and wide-brimmed hat.

Current treatment options for Rosacea focus on the lessening of inflammatory lesions. By using products that maintain the structural integrity of the skin layer that interfaces with the patient's environment, called the stratum corneum, itching, burning, or pain may be alleviated. The outermost skin layers are significantly affected by skin care products, cosmetics and sunscreens.

Aesthetic Solutions hosted its **Holiday Glo' Minerals Make-up Seminar on December 7, 2004**. This was a great opportunity to select cosmetics formulated for sensitive skin. Call us at (919) 403-6200 to schedule a private consultation with our esthetician Jenny Jahoo.

Some skin care products guidelines for people who suffer from rosacea:

Do	Do Not
Use powder make-up with a matte finish	Use cream/ liquid make-up
Buy new cosmetics	Use old cosmetics
Wear light earth tones for eye shadow (tan, salmon)	Wear deep color eye shadows (blue, purple, green)
Apply a separate sunblock after topical medication and before make-up	Use make-up containing sunscreen
Avoid cosmetics containing formaldehyde, propylene glycol, alcohol, toners, and palmitic and oleic acids	Buy products containing over 10 ingredients
Use a brush applicator	Apply with sponge or fingers
Use facial foundations of the powder/cream variety with a matte finish	Use light-reflective powders containing mica
Wear only black mascara	Use nail polish
Use pencil forms of eyeliner	

Check your products! Discard old cosmetics in the "Do Not" list above.