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**THE
EXPERTS**

*Buyers beware:
common non-invasive
aesthetic procedures
could be a ticking
timebomb in the
hands of unskilled
and unqualified
practitioners.*

These days it seems that every second doctor is reaching for a cosmetic needle, irrespective of whether they are dermatologists, dentists, general practitioners, gynaecologists or other medical specialists.

With salon-based beauty therapists wielding laser guns and painting peels with abandon, one has to ask: how regulated is the industry for non-invasive cosmetic procedures in South Africa, and what can one do if and when things go horribly wrong?

**“REPUTABLE LOCAL
AESTHETIC DOCTORS
ARE CONSIDERED
SOME OF THE BEST
IN THE WORLD,
DEDICATED TO
CONTINUED
EDUCATION AND
TRAINING AT
INTERNATIONAL
AESTHETIC MEDICINE
WORKSHOPS AND
CONGRESSES”**

Dr Alistair Clarke, medical director and owner of the Sandton Aesthetic Institute, and lead KOL (key opinion leader) for Restylane/Galderma in South Africa **(AC)**

Dr Natasha Chapman, aesthetic medical practitioner, Laserderm Medical Aesthetic Centre, Sandton **(NC)**

Dr Maureen Allem, general practitioner with a special interest in aesthetic and integrative anti-aging medicine and procedures, and founder of Skin, Body & Health Renewal **(MA)**

Dr Anton Potgieter, plastic and reconstructive surgeon, Sandton Medi Clinic **(AP)**

Dr Anushka Reddy, aesthetic medical practitioner, Medisculpt Clinic, Ruimsig **(AR)**

Dr Chetan Patel, plastic surgeon, Laserderm Medical Aesthetic Centre, Parkhurst **(CP)**

Dr Sly Nedic, aesthetic medical practitioner, 8th Sense, Sandton **(SN)**



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ANTI-AGING INVESTIGATION

BY ELSA KRUGER

And things can go very wrong in the hands of the unqualified and inexperienced – from disfigurement to permanent burns, or even blindness.

Dr Alistair Clark, medical director and owner of the Sandton Aesthetic Institute, is the lead key opinion leader for Restylane/Galderma in South Africa. He dedicates a large amount of his time to training doctors in cosmetic procedures, and is an internationally acknowledged authority in the field. He explains: “Until 2000 there was no control of the industry and problems were common. Since then, a professional association was formed and qualifications were put into place, resulting in a decrease in complications. However, in the last two years, huge numbers of doctors and unqualified people have jumped on the bandwagon, and complications have increased exponentially. I see cases of complications on a daily basis.”

He adds: “The controls put into place by responsible doctors to clean up the industry need to be urgently gazetted by the Department of Health, so that we can have teeth. Responsible doctors want and need controls and good products to create a safe practice with good results. It is counterproductive for all of us if there are loose canons damaging the reputation of our industry.”

He mentions, for example, some sobering numbers in terms of fillers: this year alone, 74 cases of filler-related blindness (irreversible) were reported worldwide, compared to only one case in 2007 and 23 in 2010. The reason for this, he speculates, is the advent of filler placements by cannula, which is blunt and makes doctors feel misguidedly safer, going where they would not have risked with a sharp needle. Wrong placement in the four areas above the mouth (nasal labial fold, tear trough, glabella [between eyes] and at the temples) can compress a blood vessel, leading to swelling, which in turn, can cause blindness.

The attraction of relatively “easy money” is an irresistible lure for the untrained and unqualified. There are no formal South African statistics, but cosmetic doctor and founder of Skin, Body & Health Renewal, Dr Maureen Allem, says the number of non-surgical procedures performed in South Africa per year is approximately two million per annum, at an estimated value of R2 billion.

The flipside of the coin is that reputable local aesthetic doctors are considered some of the best in the world, dedicated to continued education and training at international aesthetic medicine workshops and congresses.

“TO DISCOUNT BOTULINUM TOXIN IS HIGHLY ILLEGAL, AS IT IS A SCHEDULED PHARMACEUTICAL. SO IF YOU SEE A GROUPON DEAL, RUN!”

– DR ANUSHKA REDDY

“NON-INVASIVE” EQUALS “EASY AND SAFE”.
TRUE OR FALSE?

AC: False. The word non-invasive merely means “not open surgery”. It does, however, involve needles and cannulas passed below the skin, through deep tissue. This carries an inherent risk. People have a vision of a needle as a magic wand, making them look better instantly, without bruising and downtime. Yet that depends entirely on the skills and experience of the aesthetic practitioner.

AR: False. Non-invasive indicates non-surgical and, in that case, should mean less downtime and fewer complications. However, non-invasive does not mean easy and safe. No aesthetic procedure can be considered easy. The product and technique are of paramount importance. If you are visiting an untrained doctor or a doctor using a substandard product, the chances of complications are radically increased.

NC: False. Nowadays, non-invasive treatments are very effective and successful, but many can have serious side effects or complications if done incorrectly, or by someone without adequate training.



HOW DO YOU CHOOSE AN AESTHETIC PRACTITIONER?

AR: Training and reputation are critical. You have to ascertain if the doctor is on a basic, beginner or advanced level of training in a particular skill. Do they attend local and international congresses where the latest techniques and products are launched, taught and evaluated? All workshops and congresses provide doctors with certificates, which should be on display. If there are no certificates on display, perhaps your doctor is not paying attention to technique training. Also consider reputation; people talk about poor aesthetic results. Do your research. Top doctors work only with top products, because they know that their reputation depends on achieving fantastic results. Below-par products offer greater complications and increased risk.

NC: Always go for an initial consultation. See if the doctor makes you feel comfortable and inspires confidence. Listen to what he or she suggests, and see if you agree with this assessment. Go home and research the treatments suggested. Go back for a second consultation, or a second opinion if you need more information. Start slowly; proceed cautiously. You will very quickly realise whether the doctor you have chosen is able to give you what you are looking for.

- Rejuvenation Packages
- Wrinkles
- Pores
- Acne scarring
- Pigmentation
- Laser Face Lift
- Volume loss
- Eye Bags / Circles
- Double Chin
- Sagging Jowls
- Medical Consultation
- Botox
- Pearl Laser
- Chemical peels
- PDT/LED
- Pearl Fractional
- Dermapen
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IN INEXPERIENCED HANDS, WHAT CAN GO WRONG WITH:

BOTOX

NC: Improperly assessed patients, or poorly placed Botox injections, can lead to a number of complications. Even experienced injectors need to get to know how each individual patient will respond to Botox, and they document each treatment and the results, so that they can adapt the next treatment accordingly. This is why most doctors ask patients to return for a two-week follow-up after having a Botox treatment.

AC: Botox is an extremely safe drug with the highest sales of any drug on the planet. Problems arise in the hands of inexperienced injectors. The most common problems are asymmetry and muscle imbalances, either cosmetic and visual or functional – it can look as if one had a stroke.

MA: If Botox is injected in the wrong area and to the wrong depth, a patient can have rather undesirable temporary results, such as dropped brows, if the incorrect muscle is relaxed too much; lateral brow ptosis/drop, if too much is injected laterally on the brow (this may result in a heavy sensation on the brow with extra upper-eyelid folds); eyelid ptosis/hanging eyelids, if injected too deeply in the brow above the mid-pupil; lower-eyelid ptosis, if Botox is given under the eyelid in a patient with decreased elasticity in the eyelid area. The eyes themselves can also be affected: double vision, if Botox is injected too closely and too deeply around the eye area; abnormal smile, if Botox is given too deeply into the muscles around the eyes. Botox injections injected too low on the cheek area can result in the appearance of Bell's palsy. Botox incorrectly placed around the mouth can result in an asymmetrical mouth, while too much Botox on the top or lower lip (to relax smoker's lines) can result in the inability to purse one's mouth normally and not being able to drink properly.

LASERS

MA: The things that can potentially go wrong include surface skin burns, scarring and pigment changes. One has to distinguish between ablative and the newer fractional laser treatments. Some laser treatments, such as ablative CO2 and erbium YAG lasers, are designed to remove the top layer of the epidermis and dermis to treat deeper wrinkles and severe acne scars. These ablative laser treatments should be done only by experienced plastic surgeons, as treatments result in wounds that will ooze and weep during the healing process, which will take two to three weeks. Newer technologies, such as ablative fractionated laser treatments, including the Pearl and CO2 fractional, should be done only under the supervision of an experienced aesthetic doctor. The downtime with these procedures is around seven days, as only a "fraction" of the skin is treated. IPL treatments should not be done on skin type 5 and 6 (dark) and tanned skin, as it will lead to serious burns with permanent scars. Only very experienced therapists, under the supervision of an experienced medical doctor, should do these. To avoid any mishaps from laser treatments, make sure you choose aesthetic clinics with medical doctors who have experience in laser/light treatments and who have professionally trained therapists. FDA-approved, medical-grade laser machines should be used, and not cheap copies.

NC: A proper laser is a very powerful machine, and is able to cause significant improvement, as well as significant side effects, if not properly operated. All lasers need to be calibrated to give an effective treatment, and need to be used by someone who has had proper training in the use of that particular laser. Lasers can easily lead to burns, scarring and disfigurement if used improperly. Laser hair removal is a wonderful treatment, but needs to be carried out by an experienced therapist. Settings which are too low lead to a sub-optimal result. Settings which are too high can lead to burns and even scarring. An experienced therapist knows how to adjust the settings to suit a patient's skin type. Likewise, CoolSculpting is a phenomenal body-sculpting treatment, but the FDA-approved machine has built-in safety mechanisms, which ensure a safe treatment. Cheaper, imitation machines are present in South Africa, and a few patients have had frostbite injuries which required surgical excision and have led to scarring. IPL (Intense Pulsed Light) treatments can give a remarkable result in removing sun spots. Unfortunately, in the wrong hands, patients can be scarred for life.

AC: Problems occur with cheap machines and inexperienced people. Ask your practitioner what he or she paid for their laser machine – if it sounds too cheap (good machines cost around R1m), walk away.



FILLERS

NC: Fillers can be injected too superficially, creating unnatural lumps or bulges, or the Tindle effect – a pale, grey line of filler that is visible just under the surface of the skin. Fillers injected too superficially can also lead to ulceration and granuloma formation. Poor antiseptic techniques can lead to infection and abscess formation. A thorough knowledge of the facial anatomy is essential. Fillers injected into the glabellar region (frown) have led to a few cases of blindness, due to swelling after hitting a blood vessel. Fillers injected too deeply will have very little visible effect, and will cost the patient lots of money for very little improvement. Choosing the appropriate and the correct amount of filler is very important, as is making sure that changes are age-appropriate for a patient. Giving a 50-year-old woman the lips of a 20-year-old looks ridiculous. Unfortunately, there are many doctors who fail to see this, and the prevalence of the dreadful “trout pout” is testimony to this.

MA: A filler in the upper-brow area, in inexperienced hands, can lead to blindness if it is accidentally injected into one of the two arteries on the brow that lead back to the ophthalmic artery. A filler on the upper brow can also lead to necrosis/dead tissue if the filler is injected into one of the numerous arteries on the brow. Inadvertently injecting into an artery could result in a loss of circulation. Only very experienced injectors, using the correct brand of filler for this area, should undertake fillers injected into the tear-trough area. Certain brands can “stain” the skin in this area with the passing of time. If the filler is incorrectly placed in the tear-trough area, the filler can “float” up and cause puffiness. Fillers injected incorrectly for cheek volume can aggravate malar bags and puffiness under the eye area. Too much filler injected incorrectly to give volume to the cheeks could result in a “pillow” look.

PEELS

MA: Any alpha hydroxy acid peel placed on the skin, if not properly neutralised, may result in serious burns, blisters or permanent damage. In addition, aggravation of pigmentation (hyperpigmentation) can occur if clear pre- and post-treatment instructions and preparation have not been done. Hypopigmentation, swelling and inflammation can occur if peels are incorrectly done. A proper medical history and assessment must be done to exclude contra-indications such as retinoids or Roaccutane. Peeling makes the skin more vulnerable to sun exposure and can aggravate any pigmentation if the correct pre-treatment routine isn't followed. If a patient has a history of herpes/cold sores, it can result in a serious attack. Certain deep dermal peels, such as a phenol peel, should be done with ECG monitoring and by an experienced plastic surgeon, as it can have an effect on the heart.

NC: Regular, light peels help to improve the appearance, make skin appear radiant and healthy, reduce acne breakouts, and help to remove sun spots. All chemical peels have risks associated with them. Any peel that is too deep or too aggressive can cause chemical burns, ulceration, and may lead to scarring. Aggressive peels on darker skins often cause pigmentation. A patient having a chemical peel may react differently from one month to the next, depending on the hydration levels of their skin. Deep peels can result in a dramatic improvement, but can also lead to pink, shiny, sensitive skin that can persist for months afterwards. Chemical peels should always be done by an experienced doctor or therapist. Usually, lighter peels carried out more often are safer.



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ANTI-AGING INVESTIGATION

AT A GLANCE

Dr Maureen Allem suggests the following when it comes to choosing the right specialist for you:

1. Research the different anti-aging, non-surgical doctors and clinics online. Their websites will give you an indication of their professionalism, experience and procedures they offer.
2. Visit the Aesthetic and Anti-ageing Medicine Society of South Africa (AAMSSA), www.aestheticdoctors.co.za.
3. Call the practice to find out how many patients are seen per month and how long it has been established. The receptionist should be able to answer all of your questions.
4. Ask your friends if they have had a good experience with this clinic/doctor.
5. Find a doctor with a special interest and expertise in anti-aging procedures and who does these procedures every day. To be classified as an expert with experience, one needs to have done at least 10 000 hours.
6. Make sure that only a qualified medical doctor experienced in anti-aging procedures injects your Botox or dermal fillers, not a therapist or beauty consultant. A qualified doctor has an in-depth knowledge of facial muscles, arteries and veins, which is crucial for these procedures. A proficient injector will have performed injections on at least 2 000 patients.
7. The aesthetic doctor should be able to give you a full evaluation and a plan of what non-surgical procedures need to be done over the year. This should include an assessment of your skin and non-surgical treatments besides Botox and fillers.
8. Avoid "gypsy injectors" – doctors who rotate to different beauty clinics or spas. These doctors have no fixed clinics of their own, no dedicated back-up staff, website or fixed-line contact numbers. Should anything go wrong at the time of treatment (such as infiltration of a blood vessel or an anaphylaxis), they may not be adequately equipped to deal with this. It will also be more difficult to return on short notice for a corrective treatment.

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- Choose a clinic that has a variety of anti-aging devices, and not just one laser device to treat all problems.
 - Investigate whether the lasers that the clinic uses are original, and not cheap, less effective copycats.
 - Choose a clinic that is not biased to skincare products. If you want balanced advice, choose a clinic that stocks a wide range of products.
 - Check that the doctor's qualifications are in plain view.
 - Are the clinic premises situated in good areas, scrupulously clean, with all the latest technology and professionally trained therapists?
 - Do these clinics have the correct facilities to dispose of medical waste/bloody swabs and used syringes?
 - Ask the doctor for the clinic's own before-and-after pictures. Do not rely on pictures obtained from a brochure from an overseas clinic.
 - Get quotes for your desired procedures. There should be no pressure tactics to proceed. Go away and think about it. If you are pressured into any procedure by a doctor or anyone in their practice, walk away.
 - Make sure that you fill out the necessary forms to obtain your full medical history. If you are not asked for a medical history and do not receive an informed-consent form explaining the possible side effects of procedures, do not proceed.

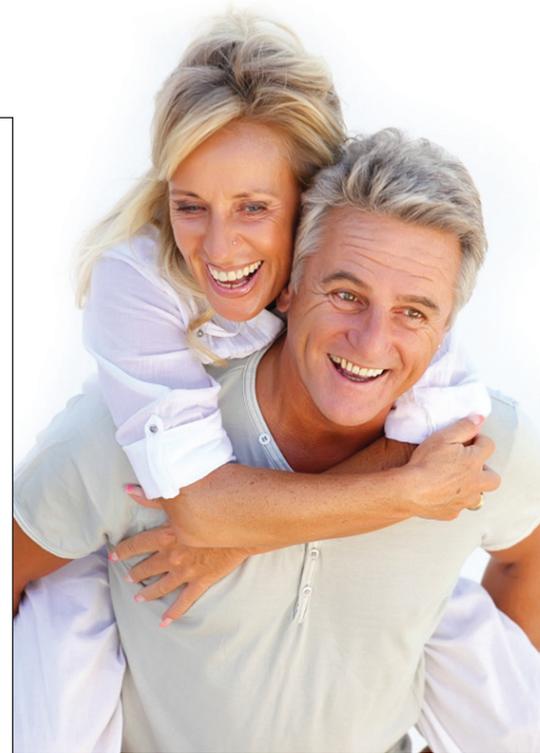


HOW PREVALENT IS THE PROBLEM IN SA?

AR: Botulinum toxin and dermal fillers can be supplied only to a qualified medical doctor. That said, there are a few instances where non-qualified doctors have started injecting. This is obviously risky. Within the qualified fraternity, most doctors are educated by weekend workshops. There is no official qualification to become an aesthetic doctor. We do have extremely talented training doctors with international reputations in South Africa. They run extensive training workshops to ensure the quality of treatment is up to international standards.

AP: The HPCSA (Health Professions Council of South Africa) should have the best answer to this question. It seems that there are a large number of medical professionals involved in aesthetics. The HPCSA (to which all health professionals pay annual fees) should guide (and discipline, if necessary) medical professionals, as well as protect the rights and healthcare needs of all South Africans. Unfortunately, this body has shown very little leadership in recent times. At present, any medical professional can perform aesthetic treatments. A misconception arises when “non-medical” practitioners do treatments. All practices should be under the supervision of a qualified medical professional.

CP: Statistics for aesthetic non-surgical and surgical procedures in SA are grossly lacking, due to the lack of overseeing bodies with which all doctors practising any type of aesthetics should be registered. Despite repeated attempts from the Association of Plastic and Reconstructive Surgeons (APRSSA) to get statistics from its own members, there is a poor response rate, and therefore vague statistics exist about the number of surgical procedures as well. Accreditation and the determination of competency are cause for concern, as there are no statutes dictating levels at which practitioners are fit to practise. As aesthetic medicine straddles the line between medicine and the beauty business, these boundaries are difficult to define, let alone enforce.



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– *DR SLY NEDIC*



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WHEN SHOULD YOU MAKE A QUICK EXIT?

AC: Never take part in Botox parties and cosmetic doctors' visits at non-medical establishments such as salons and spas. Ask the doctor how long he has been doing these procedures and what his qualifications are. If he refuses to discuss it, walk out.

Always ask what product he uses, whether he gets complications, and how he manages them. If he denies ever having had complications, grab your bag and get out. He either lies or is not doing any work. Every experienced doctor has complications – what is important is how he manages them. Do your homework; do not get pushed into a procedure within five minutes of discussing it.

NC: Beware of any doctor or therapist who promises you the world. Realistically, changing the skin or making improvements takes a series of treatments, each of which causes a small change, and the sum of these small changes is what gives the overall impressive result. Ask about the treatment, what it entails and what the expected outcome will be. Ask about side effects, adverse reactions and ultimate outcomes. Any practitioner with adequate experience should be able to answer your questions honestly and with authority.

CAN A WEEKEND COURSE EQUIP SOMEONE WITH THE KNOWLEDGE TO PERFORM THESE PROCEDURES?

AP: As a fully qualified plastic and reconstructive surgeon, I spent 15 years continuously working at getting my degrees and qualifications. It took me years in practice before I was comfortable with the nuances of minimally invasive aesthetic treatments, and I still learn new things every day. I think a short course can add to, and build up, the knowledge of practitioners, but I do believe that "Outlier Theory" applies to medical practice – it takes 8 000 to 10 000 hours in pursuit of a vocation before anyone can become exceptional at it.

SN: A weekend course is definitely not enough. Aesthetic procedures (especially fillers) are not without risk. Serious complications can happen, especially for inexperienced injectors. Aesthetic facial 3D recontouring is becoming much more complex to perform, compared to the old-fashioned way of just "filling up" visible wrinkles. It requires additional training on cadavers, and live demonstrations done in workshops and congresses by international experts. The most crowded workshops at international congresses are the ones presenting on complications. An experienced injector and aesthetic practitioner will take part in continuous aesthetic medical education to ensure adequate expertise to prevent or manage complications.

AR: A multitude of weekend courses can provide sufficient knowledge to perform safe and effective treatments. A single training workshop will not provide sufficient know-how to offer all the treatment protocols. Training courses begin with introductory techniques and work through to advanced techniques and facial sculpting. They do cost money to attend, so doctors who are serious about aesthetic medicine will proudly display their workshop qualifications and congress attendances. ■