

POPULAR TREATMENTS FOR 2011

A look in Dr. Beer's crystal ball suggests a higher rate of cosmetic procedures, most of which were already popular in 2010.

KENNETH BEER, MD



There are several treatments likely to be very popular in 2011. Most are already popular, so it is not difficult to read the tea leaves for them. Based on the procedures and products that are most requested in my practice, I think it is likely that 2011 will be a year that sees increased rates of cosmetic procedures. Whether the procedures are small and inexpensive or large and expensive, the year is shaping up to be one in which patients focus more on improving their appearance.

The most popular procedures in 2011 are likely to be: **injectables**, **resurfacing** — laser and peels — and **fat melting** procedures. However, be ready to field question about unproven procedures — such as the “vampire lift” — which are likely to be ineffective but may garner a lot of media attention. Fortunately, such flavors of the month tend to get a stake driven through their hearts when people realize that they don't work .

FAT MELTING

Fat melting has been popular for a few years, and I expect it to become even more so in 2011 for two reasons: First of all, thanks to the improving economy, people will have more money and will be better able to afford them. Second is that the procedures are much better than they were in the past.

A multitude of procedures exists and they include Zeltiq, Liposonix, Smoothshapes, liposuction, and Zerona (Disclosure: I am a paid consultant for Smoothshapes.)

Zeltiq has some beautiful science and histologic data backing up its procedure, which actually works, with the major limitation being that the area treated is relatively small, rendering treatment of a large area cumbersome. I think that the procedure is worthwhile and anticipate that there will be improvements in the ease with which the procedure is done.

Liposonix is awaiting FDA approval, and it is anyone's guess when that will come through. However, when it does, I think that it will be used by many physicians and that it will be a useful tool.

Smoothshapes has been integrated into the Syneron portfolio of products, and the newest generation of product is nice because it has a smaller handpiece that enables the user to treat areas including the arms and neck. As someone who does a lot of these procedures, I think that adding these to the areas that can be treated will increase the number of patients that come in.

Traditional liposuction has not really seen any change in how it is performed and I don't see anything in the pipeline. Thus, I predict that the number of procedures performed will be stagnant.

Zerona is a noninvasive device that utilizes a light source that does not contact the patient, so there's no pain, but also less gain than with liposuction.

What's ahead. From what I understand about the next generation of devices, the power for treating fat is likely to increase towards the end of the year.

INJECTABLES

Injectables remain the most common cosmetic procedure performed and I believe that in 2011 they will increase again. The economy is most likely the biggest driver of this, because the products are not likely to greatly change. Aside from the introduction of a new toxin, there are no major new additions in the pipeline for this year. However, the way we use existing products has changed and I think that as the patients and the physicians become more savvy, the ability to use existing products in new ways will create opportunities to really make dramatic differences.

New Approaches

For example, I no longer speak with patients in terms of filling lines but rather in terms of restoring proportions. When

I think that as the patients and the physicians mature, the ability to use existing products in new ways will create opportunities to really make dramatic differences.

I say this, I am referring to more youthful proportions, not to alien ones.

To upper and midface. My injections of fillers and PLLA are now largely to lift up the upper and middle face. Injections into the zygomatic arch are made posteriorly rather than anteriorly under the eyelids to lift the face upwards and outwards. Combining this with some PLLA will help to restore youthful proportions and volume. These are the types of injections that really make a difference to patients and they are the ones that generate the most patient-to-patient referrals.

To temporal fossa. The other area that



I think is worth filling is the temporal fossa. Using a variety of products, selected based on the thickness of the patient's skin, degree of atrophy and goals, can produce significant improvements. If you are not familiar with injections in these areas, learn how to inject them by spending time with someone who can, or attend technique workshops such as those offered at my Cosmetic Bootcamp meetings. (Disclosure: I am shamelessly shilling for this meeting in which I am a partner.)

RESURFACING

Resurfacing is the other area of growth. From simple peels to laser resurfacing, I am doing more of these procedures.

Peels such as salicylic acid and TCA are easy to perform, low-risk when done correctly and produce high patient satisfaction.

Laser procedures can be nonablative and done in a series of treatments for patients who don't want significant down time or can utilize the more invasive CO2 lasers. My own office will begin performing procedures with CO2 more frequently but using lower energies and experimenting with a few of them to try

to find the optimal way to stimulate collagen. Some of my colleagues are combining fractional resurfacing with peels to help not only the texture but the entire surface.

A VERY GOOD YEAR AHEAD

This year seems like it will be more fun and, hopefully, less stressful for our patients. If you have experience injecting the lower and middle third of the face, I would encourage you to consider injecting the upper third with fillers. If you have not added a fat treatment device, I would recommend watching the evolution of products released this year; they may surprise us. If you have not been doing a lot of resurfacing, now is a great time to rediscover what dermatologists have known for decades. In summary, 2011 is shaping up to be an interesting year to be a dermatologist and a great year to be a cosmetic dermatology patient. ■

Dr. Beer is in private practice in West Palm Beach, FL. He's also Volunteer Clinical Instructor in Dermatology at the University of Miami, a Consulting Associate in the Department of Medicine at Duke University, and Director of The Cosmetic Boot Camp meeting.

Disclosure: Dr. Beer is an owner of Theraplex LLC, and consults, speaks or performs clinical trials for Medicis, as well as 3M, Sanofi Aventis, Bioform Medical, Allergan and Stiefel. He is also a Director of the Cosmetic Boot Camp meeting.