



# PERMANENT FILLER

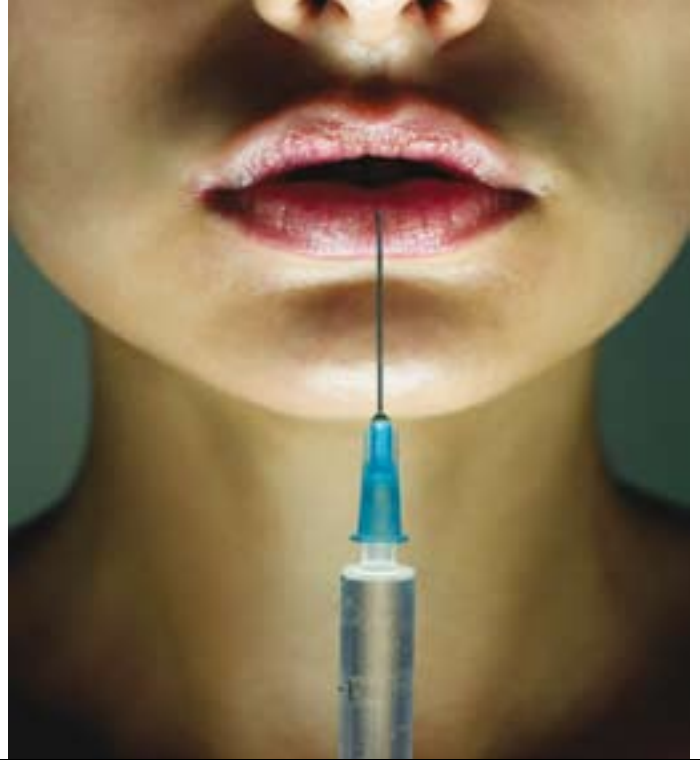
## Permanent Solution or Permanent Problems?

Permanent fillers; the word “permanent” seems to strike fear into the heart of many practitioners who choose to avoid such solutions at all costs. If a patient presents as a suitable candidate for a permanent solution, and it is within a practitioner’s power to provide such a solution rather than giving them a temporary solution that requires ongoing maintenance at considerable cost and discomfort for those patients who don’t like needles, is it not an ideal solution?

## FILLERS

**M**any in the “against” camp cite studies that suggest delayed reactions to permanent fillers, but on closer inspection these studies are hard to locate and often complications have occurred due to poor after-care (hygiene etc) or when a permanent filler has reacted against the remnants of another filler type which was previously in the site of injection.

Practitioners seem to fall into two camps, those for and those against a longer-lasting solution. Permanent fillers do come with their own set of considerations but with a skilled injector they can offer aesthetically beautiful results that last and last. Injection takes skill and often complications can occur due to a lack of skill and technique. As with all temporary solutions, not all permanent fillers are created equally and the US has reported its various share of complications with particular brands that aren't available in Australia. Unfortunately, when overseas practitioners cite these complications, they lump all permanent fillers together and often don't specify which formula caused the complication.



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Dr Alexander Rivkin, a U.S. non-surgical rhinoplasty pioneer, was one of the investigators in the US FDA trials. The study only involved injecting Aquamid into the nasolabial folds and says after his experience he is really looking forward to using it when it gets FDA approval for use in the US as a permanent non-surgical sculpting agent. “If that [Aquamid] exists and you are not offering it to them [patients], they'll go to somebody else and you will lose the most important element to a physician's practice – credibility.” Dr Rivkin adds, “Aquamid goes in easily and there is no need for multiple touch-up procedures.

It holds its volume very well and I think for the most part, only patients who have already had experience with fillers should have Aquamid injected, since it is not a filler that can be reversed with enzyme-like hyaluronic acids. I would personally hesitate to put it under the eyes or in the lips. However I would feel comfortable putting it in the nose, chin, cheeks, smile lines and marionette lines. The only serious complications reported with the filler are extremely rare infections, but these are easily treatable if the patient is placed on antibiotics without being given steroids first.”

Dr Joseph Hkeik has been using Aquamid in Australia for a while now and says he is happy to accede with this request for suitable candidates because in his experience Aquamid delivers a very high patient satisfaction rate. “Aquamid lasts longer than other dermal fillers, up to 10 years. It's an ideal solution for patients who are getting needle fatigue. I also like it because it's a soft gel that gives natural-looking results and is undetectable to the touch. It really is a product with an excellent safety profile that gives predictable results.” In fact, Aquamid is the only injectable dermal filler to have met with Australia's stringent safety standards. Dr Hkeik says he uses it to augment the lips, cheeks, and noses, or to correct the nasolabial fold, marionette lines, glabellar or frown lines and other facial folds. “I also use it for forehead reconstruction, to fill in dints or depressions that can give people a worried or angry look, and for midface recontouring for correction to sagging.” He says other indications include chin augmentation to improve the profile or create a stronger jawline and resculpting or lifting the tip of the nose. “Plus it can be used anywhere on the body to treat depressions caused by traumas such as accidents or tissue removal to treat skin cancers,” he adds. His extensive experience with using Aquamid puts Dr Hkeik in a perfect position to refute some common myths about permanent dermal fillers (see box). ♣

### MYTH 1: ALL PERMANENT FILLERS ARE THE SAME

*Dr Hkeik says:*

“That's not true. Because Aquamid contains no microparticles the body does not form a bio-film of bacteria around it, reducing the risk of infection. It's 97.5 per cent water and because it exchanges moisture, salts and organic molecules with the host tissue it is constantly being cleansed.”

### MYTH 2: THE RISKS ARE HIGHER

*Dr Hkeik says:*

“Not really. I have using Aquamid for the same duration as other fillers and there has been the same incidence of injection-related infection as with other injectable products.”

### MYTH 3: PERMANENT FILLERS CAUSE PERMANENT PROBLEMS

*Dr Hkeik says:*

“Permanent filler give longer lasting results, certainly not longer lasting problems. It's very rare for problems to occur at all, only 0.07 per cent of all injections result in an infection, due to a number of factors including simple bad luck.”

### MYTH 4: IT'S NOT REVERSIBLE

*Dr Hkeik says:*

“It is reversible; however, it may require surgical removal.” Dr Hkeik screens candidates very carefully to ensure they have no underlying risk factor conditions and says patients need to be familiar with the dermal filler concept and what can be achieved with temporary fillers before moving to a longer lasting option.

### MYTH 5: RESULTS WON'T INTEGRATE WITH CONTINUED FACIAL AGEING

*Dr Hkeik says:*

“Not true. Because Aquamid integrates itself into the skin, if the skin sags the product will move with it. Whatever the skin does, Aquamid behaves in the same way.”