

Aesthetic Medicine Symposium w/Botox Training Pre-work

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IAPAM Aesthetic Medicine Symposium

Pre-work

What is Botox?

There are many people out there who use Botox® to treat a variety of medical or cosmetic conditions. Conversely, there are those who have issues that could be improved by having Botox injections but are still hesitant about getting the procedure. People have their own reasons for hesitation but most of it is based on misconceptions. If you are considering having Botox injections and still have unanswered questions, the following article will provide some clarity.

Botox® has been used safely and successfully for decades. Today, a Botox® treatment is as ordinary as going to visit the dentist for bi-annual dental cleanings. Many people even schedule a quick session on their lunch breaks at work, and go back to the office without anyone knowing they had it done. It is fast, effective, and the side effects are usually barely noticeable and are gone within a few days.

What is Botox made of?

Botox® is a brand name product that uses a purified form of botulinum toxin A. The therapeutic use of this toxin has been used since the 1960s; and over following decades, many other conditions have been discovered to be treatable by this remarkable process. Tiny amounts the toxin are injected into pre-selected targets in a patient's muscles or other tissue.

How long does Botox last?

Depending on the patient and their reasons for the injections, Botox® will last between 3 and 6 months, or even slightly longer. If the patient would like to maintain the effects for longer than this, they can simply get further treatments once the initial injections start to wear off. The clinic will be able to answer questions about how long this treatment will typically last for any particular usage.

What does Botox do?

When Botox® is used cosmetically to treat wrinkles for example, an injection is done through the skin into the muscle beneath, causing the muscle to be temporarily relaxed by blocking the amount of impulses the nerve receives. These relaxed muscles allow the skin to have time to recover from the strain of being constantly stretched and contracted with regular facial movements in those areas.

Botox® can be used to treat much more than wrinkles, however. It is a very effective treatment for muscle spasms in the face, eyelids, or many other areas of the body. For those who have been diagnosed with cerebral palsy for example, Botox® injections prevent or reduce some of the muscle spasms associated with that condition. Some patients are able to find relief from chronic migraine headaches by getting Botox® injections. And it has also been successfully used to treat people who have over-active sweat glands, among other conditions.

After a patient receives a Botox® treatment, the full effect of the injection will not be apparent for several days, and at times can be up to 2 weeks. Botox® injections have been an effective treatment option for millions of people to date, and it continues to increase in popularity due to a more informed public perception.

Available Botox Alternatives

Botox injections have become the 'go-to' solution when it comes to getting rid of facial lines and wrinkles and improving one's appearance. Younger looking skin is no longer unattainable, and just a few injections once in a while can help achieve this in no time. Botox® injections are also extremely affordable, and the effects can be seen almost immediately.

Botox® refers to a trade name of the generic product botulinum toxin A. While Botox® is the most popular choice, alternative products and treatments are available as well. In this article, we take a look at some of the alternatives to Botox® that are available in the United States.

Xeomin and Dysport

These products also contain botulinum toxin, but other companies market them. They cannot really be considered 'alternatives' to Botox® as they contain the same components and produce the same effects, so they are sometimes used instead of Botox® to help clear fine lines and wrinkles.

There are procedures other than Botox® injections that can produce similar effects, including the following procedural alternatives:

Surgiwire procedure

The principle behind the surgiwire procedure is simple. Lines and furrows appear as a result of the attachment of skin to deeper structures. Releasing these attachments through the surgiwire technique loosens up skin and gets rid of furrows and lines. Similarly, muscle groups below the skin can produce furrows. Releasing these muscles through a surgical incision can help eliminate them, producing an effect that is similar to Botox®.

GFX Radiofrequency treatment

GFX is a radiofrequency treatment that targets the muscles responsible for the contraction of the glabella. It relaxes the muscles by stimulating the nerves and helps reduce lines and furrows in the forehead. The effects tend to last 1 to 2 years.

Pain Management for Botox and other Cosmetic Injectables

At the IAPAM's Aesthetic Medicine Symposium with Botox® training, we are often asked how to ensure patients keep coming back to your aesthetic practice? The answer is a painless experience. Patients do not want to experience pain when they are having aesthetic medicine procedures. Part of the IAPAM's Botox® injection training program covers the best practices in Botox® injection pain management.

Universally, experts agree that the critical factor in minimizing discomfort and bruising is technique. However, there are many physicians in the various camps on the issue of anesthesia and cosmetic injectables such as Botox®, Xeomin® and Dysport®.

The proponents of anesthesia and/or the use of ice assert that using ice around areas that are very vascular for a minute prior to injection (i.e. around the eyes) especially for patients with thinner skin will minimize bruising.

Other physicians choose to adopt the technique of using a topical anesthetic (and giving it enough time to work), and only afterward, begin the pre-injection consultation. Whether a repeat patient or a new patient, these physicians assert that pain is reduced by the application of a topical anesthetic that is left on for 15 minutes before injecting.

Some physicians will also ask the patient to move their muscles and then make an appropriate mark with a white pencil. Just prior to injecting, they will apply a small packet of ice for 15 seconds or so to each "marked" area. These doctors typically use iced gel packs which hold the low temperature well and don't melt. The iced gel packs have the capability to be chilled slightly colder than regular ice. One issue with the use of ice or iced gel packs is that if the physician or his assistant leaves the cold pack on long enough that the tissue chills very well, the patient may find the cold intolerable.

Interestingly, once the cold is intolerable is exactly the ideal time to quickly inject the Botox®, which should only take a few seconds to inject in small volumes. The ice chills the dermis and subcutaneous tissues, which topical anesthetics do not. The cold usually works well enough for 90% of patients, but physicians must be careful, as ice compresses put the tiny vessels into spasm and make them harder to inject properly, especially in the glabellar area.

Other proponents of anesthesia use topical BLT anesthetic (benocaine, lidocaine, tetracaine), with cold packs for those very few patients who are extremely intolerant of any discomfort, as it minimizes the discomfort of the 32-gauge needle at the skin level only.

In the other camp, are the physicians who do not use anesthetic creams or ice application. They have found that there are still a minority of patients who don't like the feeling of ice packs or anesthesia, and just take their Botox 'straight'.

For these patients, physicians are advised to be gentle with technique, and the patients will have a remarkably comfortable experience.

Also, “talkesthesia” works well, and keeps the patient comfortable and relaxed. For example, explain the procedure to the patient before doing anything, and apply pressure near the needle as a distraction. Most patients do well with cues for relaxed breathing, squeeze balls, coupled with tiny gauged needles and 2 cc dilution of Botox®.

Finally, the majority of physicians find they have patients who do well “in both camps” of practice.

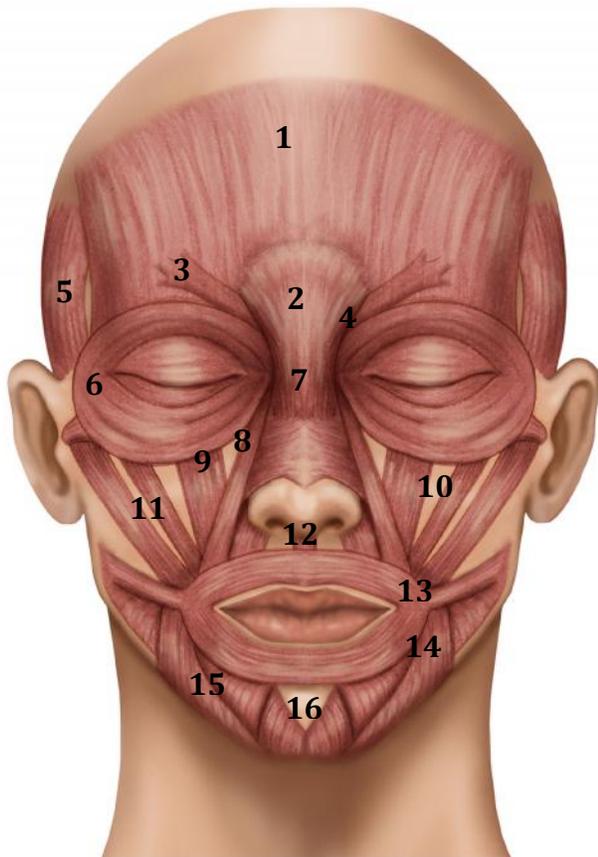
For these physicians, they offer their patients a variety of options. They use both a topical anesthesia and ice for more apprehensive patients; and for the average patient, they use ice. For example, one physician explained that he placed a single half moon shaped piece of ice into the finger of a glove and held it in place until the patient says ‘cold’. This gives targeted anesthesia and vessel spasm with minimal discomfort and perhaps less bruising as well.

Some patients have a higher tolerance to the needle coupled with a cold sensitivity to the ice, which they don’t like. Also, many busy people do not want to wait 20-40 minutes for the anesthetic cream to work.

A final recommendation from physicians in “both camps” is to use small needles: 32-gauge, which are tiny, and minimize discomfort significantly.

Facial Musculature

In order to be successful with facial aesthetics procedures, you need to understand the muscles of the face. Here is a review:



1. Frontalis
2. Procerus
3. Corrugator Supercili
4. Depressor Supercili
5. Temporalis
6. Orbicularis Oculi
7. Nasalis
8. Levator Labii Superioris Alaeque Nasi
9. Levator Labii
10. Zygomatic Minor
11. Zygomatic Major
12. Orbicularis oris
13. Moleolus
14. Depressor Anguli Oris
15. Depressor Labii
16. Mentalis

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Opposing Facial Muscles

Muscles that Lower	Response	Muscles that Elevate	Response
Corrugator Supercili	Pulls brows medially	Frontalis	Elevates brows
Procerus	Lowers brows	Frontalis	Elevates brows
Depressor Supercili	Lowers brows	Frontalis	Elevates brows
Depressor Anguli Oris	Lowers corners of mouth	Zygomaticus major	Elevates corners of mouth
Obicularis Oculi	Closes eyes	Levator; Superior tarsal	Raises upper eyelids
Obicularis Oris	Puckers the lips	Zygomaticus Major/Minor	Smile lines
Depressor Labii	Lowers the lower lip	Orbicularis oris	Raises lower lip
none		Nasalis	Smooth's nasalis
none		Mentalis	Smooth's chin dimples

For more information visit: http://en.wikipedia.org/wiki/Facial_muscles

The Top 5 Aesthetic Medicine Procedures

With the ever-advancing area of cosmetic medicine, it is hard to know what's hot and what's not. Newer procedures have now emerged that offer safe and effective treatments to individuals seeking them. But these procedures are not just aimed at improving the cosmetic appearance of the person; cosmetic procedures initially started as medical therapies that have now expanded their applications. Take, for example, the Botox® injection. Not only is it used in treating fine lines and wrinkles, it is an excellent treatment for a condition of the eye called blepharospasm.

Over the last 10 to 20 years, there have been numerous advances seen in the world of aesthetic medicine. The benefits are now well recognized, and affordability makes this a highly sought-after treatment. There are a variety of treatments offered these days – if you walk into a cosmetic surgery practice to have a few wrinkles on your face smoothed out, you will find that the choices are so many it can be hard to decide!

Having said that, however, there are only a few treatments that are popular among patients. While there is no specific list that details the most popular treatments, at the IAPAM, we feel that the following procedures are the top 5 that are currently in high demand.

Bonus – Fastest Growing: Laser Tattoo Removal

Many individuals who seek tattoos do so either in their young age, due to peer pressure or just because it was a part of societal culture at the time. However, as time passes, the same individuals regret getting them due to professional reasons. Having unsightly tattoos on exposed parts of the body are not looked upon as being professional, prompting the person to get them removed. In fact, even the military now frowns upon having tattoos.

For these very reasons, tattoo removals have become hugely popular in the recent years. The process is simple, and involves removal of the different colours using different wavelengths of light (laser). In 2013, tattoo removal procedures increased by 11% when more than 45,000 tattoos were removed from patients. This number is continuing to rise and will do so in 2015 as well.

#5 – Chemical peels

Chemical peels are a simple, non-invasive way of improving skin tone and texture. It is often offered as a treatment for hard to treat acne (and acne scars), liver spots and freckles. The procedure is fairly straightforward, and the results are reasonably good and depend on the type of skin peel. Deeper skin peels can take longer to heal, and patients can develop skin redness and irritation during that time. However, despite this, it still remains a sought after treatment, with an increase of 15.5% seen between 2011 and 2012 in the number of patients seeking this treatment.

#4 – Non Surgical fat reduction

Obesity is a common problem worldwide, and is accompanied by multiple health problems such as heart disease, stroke and diabetes. In this day and age where looks can sometimes define how we take care of ourselves, losing weight has become essential. Diet and exercise can help most of the time, but stubborn fat can be exactly that – stubborn.

Removing stubborn fat can be easily achieved through non-surgical fat removal techniques. CoolSculpting, QuantaShape, Liposonix are all new technologies that have emerged as safe and effective treatments in removing excess body fat. Radiofrequency wave treatments – called Vanquish RF, recently made news at the 2014 Aesthetics Meeting as an excellent procedure to remove fat without causing any discomfort to the patient. It is therefore no surprise that these new technologies have resulted in a 23.9% rise in the performance of non-surgical fat reduction procedures.

#3 – IPL Photo Rejuvenation

Intense photo rejuvenation is a process where light is used to rejuvenate skin. The results are stunning, and are comparable or even better than chemical peels and surgical treatments. Last year saw an increase in IPL procedures reaching 456,613 procedures – a whopping increase over 35%, which is a remarkable rise!

A primary reason for this rise is that people now realize the positive results that they can see with IPL treatments. With ease of access, great deal of safety and excellent outcomes; there is no doubt that IPL photo rejuvenation procedures will continue to remain popular in the year ahead.

#2 – Dermal Fillers (hyaluronic acid)

Over the years, hyaluronic acid dermal fillers have become more and more sought after. Since 2012, there has been a marked rise. The primary reason for this is the emerging awareness of the importance of one's external appearance, with unsightly crow's feet and forehead wrinkles possibly making one look older than they actually are.

Dermal fillers can offer an easy solution to looking younger, shaving off years in an individual's appearance just by giving them a more defined and smoother facial contour. One possible reason for this is that people now see more and more of themselves on online video chat windows. Along with this, an increased requirement to look good and professional at work can prompt one to seek hyaluronic acid fillers. Hyaluronic acid dermal fillers are close contenders in the race to being the top non-invasive cosmetic procedure in 2015.

#1 – Botox injections

Our face says a lot about us – our expressions (and even 'microexpressions'!) can say a lot about what we think and how we feel. Tiny imperfections can become more and more prominent as we get older, and nipping them in the bud can be the solution for preventing them from being a problem in the future.

Interestingly, and contrary to popular belief, men seem to be seeking Botox® injection procedures a lot more. In 2015, this trend is likely to rise even further. Statistics have shown that Botox® injections went up by 15.6% in 2013. There does not appear to be any predilection towards race in the trends; white Caucasian, Hispanics and African Americans all seem to be seeking these injections. Reasons are many, but mostly relate to dating, work/profession and just a need to feel and look young.

The Business of Botox®

At the IAPAM's Botox® training, physicians will learn the right Botox® injection techniques to give patients the results they desire. At the Aesthetic Medicine Symposium, we not only teach proper patient selection and technique, but we also cover the business aspects of running an aesthetic practice. You will learn the answers to questions like:

- How much to charge for Botox® and other aesthetic procedures?
- The best way to present aesthetic options to your patients?
- How to chart a cosmetic patient?

And you will also learn the best practices, like the importance of taking before and after photos and learning how to spot counterfeit Botox® vials.

Learning how to inject Botox® is only part of a successful aesthetic practice or medical spa. Offering Botox® is certainly the cornerstone of an aesthetic practice, but it's also important not to forget about the rest of your patients' desires. Often they will be looking for even, smooth skin, without any pigmentation. Botox® will certainly solve their desire to not have any wrinkles, but you'll soon find that other aesthetic procedures, like chemical peels, lasers and microdermabrasion, will give patients the overall results they truly desire.

I know we are on the right track when we get physician comments like this, "Hands on sessions were the best. Helped tackle the real logistics of application. Initially I felt [the Symposium] was expensive, but the quality of presentation was worth it. For physicians, it is the "pearls" of the experienced presenters that were the best part." T. Malyk, MD

In a recent article in Medical Economics, the "economics" of adding aesthetic medical treatments (such as Botox®) to a medical practice took center stage. While offering these services will meet an existing demand of your patients (who are likely looking for these services elsewhere if you are not providing them), the financial case to be made for engaging in Botox® training, adding these procedures and growing your business beyond its current patient base is irrefutable.

In discussing this topic with Jeff Russell, Executive Director of the IAPAM, Jeff notes that, "many primary care physicians (PCPs) have decided to address the demand for these services by gradually integrating these services into their practices, perhaps seeing aesthetic patients from 4 p.m. to 6 p.m. to start, and can leverage their existing overhead that way to see if they enjoy it. Also, you could start offering these procedures with relatively little upfront capital, especially if you launch with modalities such as injectables and medical grade chemical peels (these are the three most popular cosmetic procedures, according to the ASPS), as well as accompanying physician directed skin care.

Another benefit to offering these services at your existing practice is that 78% of women aged 21 to 60 shared that medical credentials were very important when choosing an aesthetic treatment provider. Although many "spas" offer these treatments, most of them are not owned by doctors, and physicians often do not provide most treatments themselves.

Finally, after doing the math, we see that while Botox® will get patients in the door, it is interesting to note that there is little profit in ONLY offering Botox®. You only make \$100-150 a patient and you typically see a Botox® patient 3 times a year, so for an entire year you would only make \$300-450. However, the cost to provide a chemical peel treatment is \$25 (\$20 labor, \$5 products) and the retail is typically around \$125, so the profit is \$100, and the patient typically returns once a month, so with a

chemical peel patient, you make \$1,200/year. Couple that with physician-directed skin care and the economics are clear: devoting a little time and a little space to non-surgical treatments at your practice can greatly increase your profits! This potential earning is the main reason we don't only cover Botox® training at the IAPAM's Aesthetic Medicine Symposium. We also include the other top 5 minimally invasive procedures, as incorporating them all is necessary for a financially successful aesthetic practice.

Steps to a Profitable Botox® Practice

Here are the 3 steps for a profitable Botox® practice:

1. Fully understand facial anatomy and musculature. You need to understand the location and depths of the muscles of the face. Get those old anatomy textbooks out, or visit a cadaver lab.
2. Learn the best practices from dermatologists, the true skin experts. Learn how they manage patient comfort, cross-promote complementary aesthetic procedures and the latest techniques.
3. Attend a hands-on training program where you have an opportunity to not only "see one," but where you also have an opportunity to inject live patients in a workshop environment.

By following these 3 simple steps, you will be on your way to a successful and more importantly, profitable Botox® practice!

For more information on aesthetic procedures, including Botox Cosmetic®, please visit the IAPAM's main website at www.iapam.com or their procedural training website at www.aestheticmedicinesymposium.com or call them at 1-800-210-5108 x704

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