

# Training in facial rejuvenation and aesthetics

## Joe Sullivan spends a weekend with Med-fx

The image of the High Street dental clinic is undergoing profound changes. The rapid increase in private practice has broadened areas of interest for practitioners who now deal with a clientele who are prepared to pay for quality work. Television makeover programmes and targeted glossy advertising have created a demand for aesthetic dentistry. The public are now becoming very aware of what is available. Having gained a youthful smile, many are now demanding other treatments which enhance appearance. Botulinum Toxin, Dermal Fillers and Chemical Peels are growing in demand. The dentist and the dental surgery are ideal for the delivery of these procedures but questions will rightly be asked as to whether providing such treatments is the correct use of a highly trained dentist's time. Poor workforce management within the NHS – which has led to a large influx of dentists and competition for associate jobs – and financial uncertainties associated with the introduction of the new contract have caused a rush to private practice where the absence of any NHS work has created free time enabling practitioners to move

Joe Sullivan



towards facial aesthetics. There is little doubt that the demand for these treatments will grow.

Having little knowledge in this field I decided to explore the various treatments by attending training. The training was arranged through Med-FX which is an associated company with Dental Directory. I had seen them demonstrate at the BDTA exhibition at Birmingham. I arranged a series of three training days.

Facial aesthetics is a field which I did not feel could easily be incorporated into my practice. Working in a busy practice does not leave room to concentrate on new treatments such as these. However, like many dentists one likes to have the skills to match ones colleagues. Before I undertook training I spoke with my indemnity insurers to explore potential pitfalls. I was advised to proceed with great caution. There had been a significant number of claims against dentists by unhappy patients. Allergic reaction to fillers has been a serious risk.

The first of my three day weekend was on Dermal Fillers. Training took place at the headquarters of Q-Med in London. Q-Med produce a range of dermal filler products known as Restylane. I was relieved to learn that Restylane is a safe product with fewer than 1:20,000 transient hypersensitivity reactions. It is patented as NASHA – Non Animal Stabilized Hyaluronic Acid with 9,000,000 uses world-wide. It has been robustly clinically researched in anticipation of further controls on usage of these products and by whom they can be used. I found this a very interesting day. Training is never undertaken for more than 6 trainees in one session. There were three of us on the day I

attended. Each trainee may bring a model for the hands on session or a model can be arranged by the trainers. There were three trainers for what was a very full day. The morning was spent learning about the products; there are 6 variations of preparation of Restylane for working at different levels in the skin. The session covered the products, the anatomy of the skin and patient/client selection. Following a brief lunch break in which to welcome and prepare models, there was a lengthy session of demonstrations and hands-on instruction. Restylane is an easy product to use and there is no doubt that amazing results can be achieved even in the hands of first-time users.

Overall this was an excellent training session. Small numbers of trainees and one-to-one training on that session – it may be two-to-one on other days – made it interesting and gave a lot of hands-on experience. There is little doubt that the techniques are made much easier for the patients when small amounts of local anaesthetic, given in the labial sulcus as for dental infiltration, are used. Therapists other than doctors or dentists can only use topical anaesthetic. This seemed inadequate for some procedures, even for the most cooperative patient. There is a role for the dentist. The course materials provided by Q-Med are excellent. Further support and guidance following training are promised. A full range of patient paperwork, consent forms, medical history sheets, treatments cards and other clinical records are provided for use at the surgery. There is a full range of marketing material available free of charge also. It was a good day with a good product with a supportive company. I have yet to use Restylane in my surgery but am confident that with the promised support at my surgery, I could safely do so with very nice outcomes.



## DAY 2

At 9am the following morning, I moved on to a lecture room in Harley St where the training on the use of botulinum toxin, BTX, was to take place. My perception of this drug was rapidly changed. Here is a substance which has many important uses in medicine. By relaxing muscle spasm it can be used to treat spasms post stroke, help in tics, cerebral palsy and other spasticity. It has also been used to treat reflux and bladder sphincter problems. Treating the muscles of the forehead has also helped in relieving migraine headaches. In facial aesthetics BTX is used to soften active lines – lines which appear when one frowns or smiles. It will not help in lines which are permanently present or where the skin is sagging. It can be regarded as a hibernating treatment for muscles. Smiling and frowning do not produce the lining of the forehead or the crows-feet once the muscles are treated. The effect takes a few days to appear and lasts for up to 3 months. When someone is deprived of the movement, seen in a frown, for some time, they learn new methods of expression and therefore do not need retreatment after perhaps the 3rd treatment. The drug is very safe with no reported anaphylactic reactions. The lethal dose is estimated to be about 25 times the normal treatment dose. BTX is different from Dermal fillers, in that it is a prescription drug and therefore can not be advertised.

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This was once again a very full day. There were 5 trainees with at least one model per trainee. The morning session was packed with information on the toxin, anatomy, patient selection, indications for use and contraindications, treatment planning, consent and how to use the toxin. The course notes are comprehensive. A lengthy afternoon session followed, during which we experimented on each other with saline before demonstration and hands on practice with a variety of differing requirements of a large number of models. There was emphasis on meticulous note keeping. One could not have asked for more from the training.

## DAY 3

Then it was Sunday. After a little lie-in I returned to Harley St for 9.30am for training on the really horrible sounding Chemical Peels. I



Before



After

wasn't going to like this. Why was I here instead of my usual Sunday run in the countryside of Kent. But beauty knows no bounds. This was another well organised day. There were just 5 of us again. The instruction was detailed and interesting. This was more commonsense than the other two days in many ways. We did not peel anyone's face off. Nature does the peeling after treatment. Many women spend hours having very expensive facials to little avail because the materials can not do what can be achieved by the substances used for Peels in 90 seconds. Over the weekend I learned a lot about the skin and how to keep it subtle and young looking. The use of chemical peels with proper

follow-up treatment using the correct products can produce real rejuvenation of the skin quickly. Of the three days I came away with the feeling that this was something which could really help people with the very worrying problems of acne and pigmentation and

damage post acne. It is not an inexpensive treatment but can give lasting good results as long as clients change their lifestyles and use correct skincare creams and lotions afterwards. The training gave information on all aspects of care. Is this a treatment that dentists should be carrying out? It is certainly a treatment which can help a lot of people. I have changed my mind. Peels can be appealing.

The hands-on session was participated in enthusiastically by all. We had numerous models on whom we treated the face, arms and the upper chest and then we treated each other. There seemed to be a reluctance to stop. But before we went we had to do the test. Each day ended with a self assessment test which forced one to reproduce the information learned through the day. I passed all three!

After three days I was somewhat exhausted. I had started out with a number of questions of whether dentists should be doing these treatments, are the treatments safe and whether it is the right image for a dentist to be involved in facial aesthetics. I wondered also whether one could learn enough in a one day course to be proficient. Over the following days I pondered what I had seen and learned. Dentists will decide for themselves what they like to do. Poor workforce management may mean an over supply of dentists in the private market. This will allow for a broadening of services offered.

Eighteen solid, information packed, hours of Med-fx training gave me certification which is a requirement for indemnity insurance; [advice is given on the best value insurance]. One can not fault the training. What was encouraging also was that almost all of those attending the various days had some previous knowledge in each of the fields and were there to extend their knowledge. The small groups with a lot of hands on experience gave the additional opportunity to learn from the informed questioning of these participants. The offer for backup support gave confidence to the novice also.

I can recommend this training from Med-fx.

The repeated warning over the weekend was of the dangers of exposing the skin to sunlight, even on a cloudy day. I always find this hard to accept. There were no roofs on the planet when we arrived, nor was there sun-block. People look healthier and therefore more attractive with suntan. Balance this with the advice that to keep skin healthy looking one should use botulinum toxin from the age of 26, when collagen production starts its decline; another unnatural approach. However, the expert use of all three of all three techniques which I explored over the weekend will protect the skin from aging and help to repair damage caused by poor diet, habits such as smoking and other unhealthy lifestyle choices.

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