

# NEWBEAUTY

THE BEAUTY AUTHORITY

SUMMER-FALL 2018

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HOLLYWOOD'S FAVORITE  
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**INSIDE:**

The Newest Lunchtime Laser  
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Amazing Makeovers

LASERS, IPL AND CHEMICAL PEELS

## THE HEAVY HITTERS

### INTENSE PULSED LIGHT (IPL)

**Best for: Sunspots, brown spots and freckles**

"IPL has been around forever and is still used for lifting away brown spots and freckles on the face," says Dr. Behr. Best as a first-line-of-defense treatment for lighter skin tones, IPL can take upwards of three to five monthly treatments to see a change. Because the effects are cumulative, it's important to be consistent with the light-based treatment (it's not a laser, although it gets grouped in the category). However, some doctors don't endorse IPL because it can potentially lead to the development of unwanted pigment, especially on the body.

### CHEMICAL PEELS

**Best for: PIH, epidermal melasma and sun damage**

Another long-standing option is budget-friendly chemical peels. "A series of salicylic acid chemical peels works really well to lighten superficial and deep sun damage on lighter skin tones," says Dr. Behr.

### LASERS

**Best for: Heavy sun damage (fractionated lasers), melasma (picosecond lasers) and brown spots (nonablative lasers)**

The mainstay for treating pigment at the doctor's office, lasers are sometimes "stacked" together for a one-two punch. Fractional lasers, like Fraxel repair and DUAL, and DeepFx, are still the gold standard for correcting heavy photodamage-induced pigment on light skin. Not only do lasers exfoliate skin to eliminate brown color and dullness, but some can also correct stubborn and hidden pigment. Some of the most favored nonablative, discoloration-lifting lasers include the Q-switched ruby and Nd:YAG lasers (some patients notice immediate brightening post-treatment, but settings that are too aggressive can cause a whitening of the skin) for spot-treating large brown spots. With lasers used for lightening, Dr. Behr says the skin should be pretreated with a bleaching cream like hydroquinone for four to six weeks to turn down melanin formation. Dr. Raskin adds, "Lasers can be useful for epidermal melasma, but they generally

won't penetrate deep enough for dermal melasma." As a bonus, most of these lasers work double-duty to boost collagen to some degree.

The challenge of how to treat melasma and diffuse hyperpigmentation in darker skin tones with lasers is the risk of creating additional unwanted color in the skin. The newest dark spot-annihilating treatments are fractionated picosecond lasers like PIQo4, PicoWay, PicoSure, and enlighten SR. "Originally, the picosecond technology was cleared for tattoo removal, but now it's also being used to help with melasma, too," says Dr. Narurkar. "These lasers create a wound in the dermis, but don't injure the outer layer of skin because they capitalize on the power of sound rather than heat." Short pulses of energy are absorbed into the skin, causing light to convert to acoustic sound waves that break up pigment. "With picosecond lasers, mechanical sound effects are dominant over light and heat, making them ideal for melasma," he adds.



### PIGMENT REBOUND

After a laser is used to lighten skin, discoloration, especially melasma, can rebound after treatment. "When we treat pigment with a laser, the pigment packets explode into the skin, causing thermal injury to the cells and some of the surrounding tissue," says New York dermatologist Macrene Alexiades, MD. "The skin is prone to PIH four weeks post-treatment—color can resurface in about a month—so it must be protected from the sun. Rebounds are known to occur, which is why I usually restrict using lasers to the fall and winter months."

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DOCTOR**  
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### SPOT MASTER

For raised seborrheic keratoses (SKs), the new FDA-approved ESKATA (a self-pay treatment not covered by insurance) is a proprietary solution boasting 40 percent pharmaceutical-grade hydrogen peroxide—the highest level in a topical product. "ESKATA lets us easily get rid of SKs on the face without the need to freeze, cut or burn them off with electrocautery, which can cause damage to the

surrounding skin," says Dr. Behr. "It's a very new application, and although it hasn't been studied on flat brown spots and other types of hyperpigmentation, I think that once dermatologists have a better understanding of it and start to play with it, some off-label uses will probably come about."



BEFORE



AFTER

To lighten this patient's melasma, Los Gatos, CA dermatologist Steven Swengel, MD performed two LaseMD treatments.

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