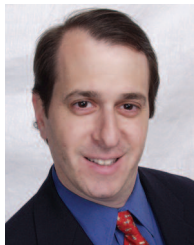


COSMETIC Clinic



Using Botox in an Area Once Deemed “Off-Limits”

BY KENNETH BEER, M.D.



As your experience progresses with injecting botulinum toxin type A (Botox Cosmetic), you may venture into an area of the face that many practitioners once deemed off-limits: the lower one-third of the face.

In order to attain balance and symmetry in the upper face, you consider injecting Botox into the lower one-third of the face. Treating the mentalis, depressor anguli oris, platysma and orbicularis oris can increase your repertoire and enhance patient satisfaction. Particularly when these injections are combined with the appropriate use of fillers, the effects of Botox may be synergistic and durable .

MENTALIS INJECTIONS

Injections into the mentalis are relatively simple to perform, and patient satisfaction is typically high. The chins of patients with hyperdynamic mentalis activity

often exhibit a “golfball” or “scrotal” appearance. Because the mentalis is a muscle that originates on the inferior aspect of the jaw and inserts into the skin, it is easily located and palpated during contraction.

To treat this muscle, a single injection of 3 to 5 units of Botox (based upon the estimated muscle mass of the individual) into the belly of the mentalis may be made. Having patients purse their lips activates the muscle and enhances uptake. Potential complications of this injection include asymmetry of the lower lip and mouth, which can occur as a result of inactivation of the depressor labii. In severe cases of asymmetry, the effect may be partially ameliorated by injecting the contralateral depressor labii so that both sides of the mouth are even. One study performed on this area demonstrated high patient satisfaction with the procedure.

DEPRESSOR ANGULI ORIS (DAO) INJECTIONS

The depressor anguli oris (DAO) acts to depress the lateral corners of the mouth. In many patients, fillers are used to buttress this area and restore a horizontal orientation to the corners of the mouth. However, some patients benefit from the injection of small amounts of Botox — either in isolation or in conjunction with soft tissue injections—to enable the elevators to re-position the corners of the mouth in a more cephalad position.

There are two methods of locating the injection site for the DAO. The first is to trace the line of the nasolabial crease inferiorly to the edge of the mandible, where the DAO originates. The second method involves a functional test and requires the patient to frown, an action that causes the muscles to activate and become more easily identified.

Once the origin of the DAO is identified, injections of 2 to 3 units of Botox on each side will serve to diminish its activity. This injection method is not for beginning injectors, as even in experienced hand, it may result in inadvertent treatment of depressor labii, causing lip asymmetry, which can be quite unsettling for patients. This possible complication should be discussed prior to injections, and the procedure should be avoided if the patient has reservations.



PLATYSMA INJECTIONS

The necks of many patients undergoing facial rejuvenation with toxins or fillers may also benefit from treatment with these agents because they also have platysmal banding. This muscle may be easily injected with 25 to 50 units of Botox to decrease the appearance of these bands. Injections should be made approximately 1.5 cm apart and they should either be placed directly into the muscle when it is prominent, or as a bleb when the muscle is diffuse. Care should be taken to avoid large doses of Botox in a single session because inadvertent treatment of the strap muscles of the neck may result.

ORBICULARIS ORIS INJECTIONS

The orbicularis oris muscle is a sphincter-like muscle that encircles the mouth. Its actions cause pursing of the lips and, over time, result in etched-in lines around the mouth. Ablative resurfacing using lasers or abrasion can reduce these rhytides, but the underlying actions of the orbicularis will cause them to reappear. Fillers, particularly the collagens and hyalurons, may be used to treat them. However one approaches these rhytides, small amounts of Botox injected in strategic locations will enhance the outcomes. In addition to the effect of decreasing the pursing actions, these injections will also create a slight eversion of the lips, resulting in lips that appear to have been augmented.

The technique of injecting Botox into the lip area is relatively simple. To visualize where to inject, first have patients purse their lips. This will cause

the muscle to contract the skin and demonstrate where the offending lines originate. Injecting 2 units of Botox into each quadrant of the lip will soften the lines. Insertion of the needle should be adjacent to the vermilion border in most patients. For patients

of a few units in the uninvolved muscles provides facial symmetry and patient satisfaction. One caveat when treating these patients is to proceed gradually as each person is truly different and there are no algorithmic approaches to help guide treatment.

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ADVANCED BOTOX INJECTION ADVANTAGES

Adding correctly performed advanced Botox injections to your practice will increase satisfaction among patients who might otherwise settle for injections in a setting where advanced techniques are not the norm. These advanced techniques also work synergistically with other techniques, including fillers and resurfacing, which are already part of your practice. Prior to attempting these injections, it is important to have a good understanding of the anatomy involved and to observe an advanced injector performing the types of injections you are considering. Injections of the lower third of the face can elevate your cosmetic practice to a new level and they are worth considering. ■

who rely on lip contraction for their occupation or avocation (for example, scuba divers or wind instrument players), this injection should probably be avoided. In addition, there are some patients that are not able to tolerate the inability to use a straw.

INJECTIONS FOR LOWER FACE ASYMMETRY

Less common indications for injecting Botox into the lower one-third of the face include patients with facial asymmetry due to strokes or Bell's palsy. These patients respond extremely well to Botox injections. A thorough understanding of the involved anatomy is critical for these injections, but placement

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

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