



R. SCOTT PETERSON, PhD

With age, skin becomes drier. Yet, dry skin brought on by aging is not the same as inherently dry skin. It is the result of disproportionate lipid depletion in the skin barrier, known as age-related lipid loss. This depletion of essential lipids in skin's barrier—ceramides, cholesterol, and fatty acids—can leave skin with a loss of radiance, uneven skin tone, rough texture, discoloration and fine lines and wrinkles.

Over the last decade especially, research has focused on the epidermal barrier, the ways it sustains damage, and the ways in which it can be repaired. Environmental insults, including damaging solar irradiation (UV, IRA) and exposure to air pollution (Ozone), contribute to epidermal barrier dysfunction. In concert with natural chronological changes in the epidermis, the result is visibly aged skin, sometimes accompanied by symptoms that include dryness, itching, peeling, and flaking.

By helping to restore the skin's epidermal barrier, topical application of formulas containing appropriate ratios of all three physiological barrier lipids (ceramides, cholesterol, free fatty acids) can help to promote barrier recovery in compromised skin. At a time when pharmacy shelves are cluttered with "barrier repair" creams and ointments, SkinCeuticals is pleased to once again innovate the skincare market by introducing Triple Lipid Restore 2:4:2, a high-quality, patient-friendly, science-based barrier repair formulation that is physician-dispensed and appropriate for aesthetic practices. This anti-aging treatment restores fullness, resurfaces texture, and improves overall radiance. As with all of our products, Triple Lipid Restore 2:4:2 was developed based on rigorous research and with quality ingredients intended to meet the needs of today's aesthetic patient.

Whether they are looking to improve skin texture and laxity, restore the skin's external barrier, or support natural repair, Triple Lipid Restore 2:4:2 appeals to a wide range of aesthetic patients and will no doubt become a key addition to your dispensing program.

BARRIER REPAIR IN THE COSMETIC CLINIC: THE ROLE OF TRIPLE LIPID RESTORE 2:4:2

WHAT DO WE KNOW ABOUT THE SCIENCE OF SKIN BARRIER FUNCTION AND BARRIER REPAIR? WHAT IS THE CLINICAL RELEVANCE?

Dr. Ingraham: Lipid bioactive substances produced within our skin epidermal layer are typically composed of ceramides, cholesterol, and free fatty acids, which provide the skin with its supple characteristics and structural integrity. These substances support barrier function and barrier repair and contribute to normal cell turnover and maturation of the skin. Most importantly, they're crucial to the maintenance of the skin's unique barrier qualities.

Healthy skin has a very complex and elegant barrier system that helps protect us from exposure to environmental pollutants, photodamage, and changes in temperature, climate, and humidity. A healthy lipid-rich barrier also supports the natural self-repair qualities of our skin.

As we age our skin cells renew more slowly. Normal cell turnover rates decline, and we see an overall decrease in lipid levels across-the-board in our skin. However, we know that chronologically aged skin displays a greater loss in cholesterol than other barrier lipids. In fact, we typically see a dramatic decrease in cholesterol production after age 40 on average. Dry skin can be characterized by ceramide depletion. If we add back these ceramides, specifically ceramide 1 and 3, they work together to support skin repair and proper hydration. Lipidomic analyses in both dry and aging skin shows that applying ceramides and cholesterol at certain ratios can improve skin barrier function and integrity required to maintain a more youthful appearance.

HOW DOES TRIPLE LIPID RESTORE DIFFER FROM OTHER "BARRIER REPAIR" PRODUCTS?

Dr. Ingraham: Typically, products that are developed to optimize barrier function are not cholesterol dominant. Rather, many are ceramide dominant products, which are ideal for dry skin but not necessarily chronically aged skin.

Lipidomic studies indicate that the ideal weight percent ratio of 1:2:1—ceramide to cholesterol to fatty acids is ideal for optimal barrier function. Triple Lipid Restore 2:4:2 was formulated using this ratio to deliver a maximized concentration of physiological barrier lipids. Beyond achieving this proper ratio, it is important to have skin identical ceramides, which is not something you necessarily find in over the counter products. Formulating with pure ceramide 1 and ceramide 3 is particularly important, because they work better synergistically than alone to accelerate barrier repair.

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DRY SPELL

Moisturization does not necessarily mean barrier benefit. Researchers have shown that:

- Reduction in the clinical signs of dryness does not necessarily correlate with improved barrier function.
- Transepidermal water loss (TEWL) can remain high or increase with use of certain moisturizers.
- In otherwise healthy skin, a poorly formulated moisturizer may induce epidermal barrier dysfunction.
- Properly formulated moisturizers support barrier function.

— *Lodén M. Clin Dermatol. 2012; 30(3):286-96.*

WHEN DO YOU RECOMMEND TRIPLE LIPID RESTORE 2:4:2?

Dr. Ingraham: Triple Lipid Restore 2:4:2 is a very moisturizing, fast-absorbing, emollient cream. Anyone who is near or over the age of 40 would benefit from this product. I like to think of it as a “clear coat” that goes on the skin over any other products patients use. Patients can apply Triple Lipid Restore 2:4:2 over another product in the morning to restore barrier function and minimize water loss throughout the day. In the evening, I recommend applying this product over a retinoid to relieve any dryness that may have developed.

I also recommend the product after treatments that disrupt the skin barrier. Applying a non-irritating product following such procedures can be very soothing to the skin. Typically, I apply an antioxidant-rich product like CE Ferulic serum or Phloretin CF serum immediately post-procedure and then apply Triple Lipid Restore 2:4:2 several times a day to help restore barrier function.

Without optimal skin barrier maintenance, we cannot maximize the benefits of any treatments we provide to our patients whether it be lasers, peels, or microneedling. We’re limited in our ability to achieve optimal results from the products we’re using if that barrier is not ideally maintained. Using Triple Lipid Restore 2:4:2 in conjunction with procedures can provide ideal conditions that allow patients to maximize and enjoy the benefits of the products in their regimen.

It’s worth noting that when the skin barrier is not optimally functioning, as with aging, environmental stress, or some of the medications we use, it can generate an inflammatory cascade. Normalizing the barrier can inhibit some of this irritation. A barrier restoring product may minimize the inflammatory cascade. This is relevant to patients who have skin that really can’t tolerate many products; Triple Lipid Restore 2:4:2 can optimize the skin barrier. ■



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TRIPLE LIPID RESTORE 2:4:2

Triple Lipid Restore 2:4:2 is an anti-aging treatment to refill cellular lipids, restore skin’s moisture barrier, and support natural repair while potentially nourishing aging skin. Lipidomic studies have proven that a treatment containing ceramides, cholesterol, and fatty acids at an optimally balanced weight percent ratio of 1:2:1 is ideal for addressing the needs of chronologically aged skin. Triple Lipid Restore 2:4:2 is formulated in a cholesterol-dominant ratio with a maximized concentration of lipids: 2% pure ceramides, 4% cholesterol, and 2% fatty acids. Triple Lipid Restore 2:4:2 has been clinically shown to improve skin’s smoothness, laxity, pore appearance, and overall radiance.

RESULTS DEMONSTRATE THREE KEY ACTIONS IN SKIN:

- **Refills essential skin lipids:** A 57% increase in ceramides, 50% increase in cholesterol, and 12% increase in fatty acids after 8 weeks.
- **Restores external skin barrier:** A 39% improvement in hydration at 24 hours.
- **Support skin’s natural repair:** Improvement in barrier quality (represented 2x increase in mature corneocytes) after 8 weeks.