





Practice Advisor:

Finding the Right Fit for Any Office



The M22: Efficiency and Versatility for Any Cosmetic Practice

BY MITCHEL P. GOLDMAN, MD

ith the IPL field as large as it is today—and still growing—it's easy to forget the reluctance to embrace intense pulsed light technology when it debuted almost two decades ago. As one of the developers of the first IPL system for dermatologic cosmetic applications, I was convinced of the science behind IPL technology efficacy and safety, and I am not surprised that such devices are now the most widely used cosmetic devices in the world. With time, the market has grown to include over 20 competitive systems; but as with most technologies, all devices are not created equal.

For the cosmetic surgeon in aesthetic practice today, choosing the right IPL system from the many on the market—or deciding whether to acquire an IPL system at all—can be a daunting task. The physician must select a device that is versatile, effective, proven, and easy to incorporate into practice. For many practices, I believe, the M22 system (Lumenis) is a good fit.

THE SYSTEM

The M22 is a compact, multi-application system that is described as "plug and play." The system can be taken right from the box and be operational in about half an hour. I know, because that's what I did without even read-

In the case of the M22, the specific combination of applications and the modular aspect of the design allow for the highest levels of performance for all applications. As such, this system is just as appropriate for the newer as for the experienced cosmetic surgeon.

ing the directions (not recommended). There is no need for a technician to assist in assembly, and there is no calibration needed. The M22 is designed so that it can be easily upgraded with technological updates and system addons, allowing the system to evolve along with a practice. For example, there is a long-pulse 1064nm Nd:YAG laser module, and a non-ablative scanning fractional module is also available.

Unfortunately, as the device space has expanded, multiapplication systems have been introduced that sometimes have been associated with disappointing performance. Just as with other forms of technology, the combination of

ALSO IN THIS EDITION

Laser Hair Removal: Efficiency, Efficacy, and Comfort Are Key
In VASER Shape, UltraSound Treats Deeply for Contouring
UltraPulse: Expanding Options for Laser Scar Revision
AcuPulse MultiModes: Multiple Applications Offer Broad Appealp. 9

systems sometimes requires a trade-off in efficacy or convenience. The resulting system may be moderately effective for a variety of applications while not exceling in any given application to the degree of a standard system. In the case of the M22, the specific combination of applications and the modular aspect of the design allow for the highest levels of performance for all applications. As such, this system is just as appropriate for the newer as for the experienced cosmetic surgeon. In my practice, I have more than 30 laser and energy-based devices, including three IPLs, but the M22 is the light-based device that I use the most.

Anyone familiar with previous Lumenis IPL systems—including the very first one on the market—will recognize in the M22 a continued evolution of the company's well-known technologies, optimal pulse technology and multiple sequential pulsing. At about 88lbs. for the basic module, the M22 is a true table-top system that can be moved from room to room, if desired. Its small footprint belies the power of the system, easily one of the fastest on the market. A full-face treatment takes about seven minutes.

Perhaps more noteworthy than the system's compact design is its ease of use. It has two easily interchangeable handpieces, making treatment convenient and efficient and eliminating the need to have patients make multiple visits. A wide range of presets available on the system makes it easy to define parameters for any given patient. Importantly, however, the operator maintains control of all settings at all times. It is relatively simple to modify settings during the course of treatment. If, for example, the operator desires more energy during a given treatment session, he or she can simply enter the new settings and continue with the treatment. Of course, the operator can simply input his or her own settings, ignoring the presets, from the start.

In my practice, my nursing staff has grown so accustomed to my treatment approaches that they often have the system custom set to my usual parameters when I walk in the room. I simply need to confirm the settings or make minor modifications before starting the treatment. All parameter changes can be made on the system interface with no need to reboot the system or change treatment heads.

In addition to this efficiency and convenience, another practice benefit of the M22 is that it doesn't have any disposables, and the treatment heads are long-lasting and durable. I have not had the system break down since we took it out of the box over three years ago.

APPLICATIONS

The M22 is especially well-suited for the management of

EXPERT PERSPECTIVES:

"You can treat so many things right out of the box. You don't have to send people away."

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http://dermtube.com/series/lumenis/ j-matthew-knight-md-on-m22/



vascular and pigmented lesions, making it useful for blood vessels and telangiectases associated with rosacea or telangiectases and pigmentation associated with chronic photodamage. It is also useful for hemangiomas, port-wine stains, and warts. The addition of the long-pulse Nd:YAG module allows for hair removal and treatment of deeper vascular lesions, including leg veins unresponsive to sclerotherapy. Clearly, the M22 has multiple potential applications in practice and may be a good tool for either growing or maintaining a cosmetic patient base.

Beyond the range of potential applications for the system itself, I use the M22 frequently within combination aesthetic treatments. One of my most popular treatment protocols involves the use of full-face IPL in combination with injectable neuromodulators and fillers to achieve a natural, immediate rejuvenating effect. This full service can be provided in about 15 minutes and is what I call a "grand slam" for patients. This multi-modality approach is successful and cost-effective for the patient, efficient and profitable for the practice.

A PRACTICE- AND PHYSICIAN-FRIENDLY SOLUTION

Everyone knows that demand for cosmetic procedures continues to grow. Perhaps more interesting is the subtle shift in patients' treatment goals. As available treatments have emerged and/or become more precise and effective, the focus has clearly expanded from simple "wrinkle reduction." More patients are seeking treatment for pigmentation changes and vascular lesions associated with chronic photodamage. And younger patients are seeking treatments to target early signs of aging and prevent more noticeable changes. The M22 system allows a cosmetic surgeon to address many of these common patient concerns. It is versatile, powerful, and efficient. It is also modular and expandable, so it can be customized to an established practice or grow with an expanding practice.

Laser Hair Removal: Efficiency, Efficacy, and Comfort Are Key

BY GIRISH (GILLY) MUNAVALLI, MD

aser hair removal is one of the top three most popular aesthetic services requested by patients in the US, and is also among the highest-reimbursed procedures. Many established and growing dermatology practices may find that laser hair removal is an attractive addition to their service menu. Of course, due to patient considerations, laser hair removal is not a good fit for every practice (see the sidebar for some important considerations). Yet, some practices that would likely benefit from the inclusion of laser hair removal have been reluctant to embrace the service due to perceived limitations of the laser systems themselves. The LightSheer Duet system (Lumenis) is a two-in-one system that has streamlined laser hair removal treatment in my practice and allows for a patient-friendly, practice-enhancing experience.

THE SYSTEM

The LightSheer is a diode laser equipped with two handpieces. The smaller, 9x9mm spot size LightSheer ET handpiece with cooling head is ideal for application to small treatment areas, such as the face. The 22x35mm spot size LightSheer HS handpiece—the largest of any diode laser on the market—is ideal for rapid treatment of large treatment areas. Either handpiece can be easily connected to the same platform, so that either or both handpieces can be used to treat a given patient without the need to reboot the system.

The large 23x 35mm handpiece features vacuum—assist technology, which contributes to better outcomes and

EXPERT PERSPECTIVES:

"When you combine the vacuum machine and the diode system, the answer is safety, safety,"

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The LightSheer can efficiently target the follicle with less energy than is required by other systems.

This contributes to reduced heat and increased patient comfort and safety.

reduced discomfort associated with therapy. In fact, there is no need for use of topical anesthesia when using the LightSheer HS handpiece. This means that patients and physicians can avoid the significant time delays (45 minutes up to an hour) associated with waiting for anesthetic to take effect.

By drawing the skin up to the handpiece tip, the vacuum technology helps to reduce the distance between the laser source and the hair follicle that it targets. The handpiece also physically stretches the skin, which effectively reduces the pigment density in the treatment site and diminishes competition for the laser energy. As such, the LightSheer can efficiently target the follicle with less energy than is required by other systems. This contributes to reduced heat and increased patient comfort and safety.²

In most cases, the cooling handpiece of the LightSheet ET is sufficient to allow for comfortable patient treatment. In some cases, additional anesthetic may be used, if desired.

The LightSheer Duet has been demonstrated effective across all skin types.³ In my experience, I have used the laser in skin types I through IV with good results and no untoward effects.

WHY TWO?

There are several practical benefits to the availability of two handpieces on the LightSheer Duet. As noted, the smaller handpiece is generally ideal for small treatment areas, such as on the face, while the larger handpiece facilitates treatment of the back in about 15 minutes. This is exceptionally quick, and likely about two to three times faster than the speed of treatment with other available systems.

CONSIDERING LASER HAIR REMOVAL?

Assess local demand. Laser hair removal remains one of the most sought-after cosmetic services. Just be sure there is enough demand among your current and potential patients.

Know local regulations. Allow non-physicians to administer treatment only after a physician consultation and when the physician is on-site.

Educate patients. Patients must understand they will require four to six initial treatments and likely regular touchups. If patients tend to tan or spend a good deal of time outdoors, laser hair removal may be contraindicated.

Evaluate systems. Look for a system that offers efficacy, speed, and comfort.

Reserve space. It's best to have a dedicated, comfortable hair removal treatment area that patients will not mind visiting many times over the course of treatment.

Prepare the space. Be sure to have adequate ventilation and an air purification system.

Choose the right support. Consider a service contract with regular maintenance.

In clinical reality, the versatility of two handpieces is beneficial. With repeated treatments on larger areas, hair will become lighter, finer, and less dense.² At this point, patients will no longer require treatment of the entire back, for example. Instead, they simply need targeted application to these persistent areas. The smaller handpiece is particularly well suited to these treatments.

PATIENT SELECTION AND MANAGEMENT

Laser hair removal can be safely performed across virtually all skin types. However, it should not be performed when the skin is darkened due to melanin activation via UV exposure. Patients must be prepared to practice UV avoidance in advance of treatment; and treatment should be postponed for individuals with "a tan."

Proper expectation-building is also important. There has been some dialogue regarding permanent hair reduction versus permanent hair removal. In our practice, we advise patients that they will require four to six initial treatment sessions to achieve optimal hair removal. While there is a permanent reduction in the amount of hair at treatment sites, there will be some degree or regrowth of finer, lighter hairs over time. In most cases, touch-up treatments are provided at four to six month intervals.

It is also important in marketing and patient education initiatives to establish the skill of the practice and the merits of the device. Many spas and hair removal centers across the country offer laser hair removal, but these may be provided with older systems that take close to two hours to administer, including numbing and active treatment time, and these systems may offer reduced efficacy. Clear benefits of LightSheer treatment are the speed of treatment and patient comfort.

Local regulations will determine whether treatment must be administered by a physician or whether a PA/NP, nurse, or medical technician can administer treatments. Even in states where a non-physician can administer treatment, it is prudent to have the physician evaluate all patients and set treatment parameters and to allow non-physicians to administer treatments only when the physician is on-site. This is what I do in my practice, and it is a good way to distinguish care at the medical practice from that provided at a spa.

THE POWER OF TWO

With its two easily interchangeable handpieces, the LightSheer Duet allows for efficient and effective hair removal on various anatomic sites. The large 22x35mm spot size LightSheer HS handpiece allows for rapid treatment of larger body areas, while the vacuum assist feature is associated with increased comfort and efficacy.

Physicians who administer laser hair removal with the LightSheer diode laser in their practices can offer patients a comfortable experience, rapid treatment, consistent and dependable efficacy, and the assurance of physician supervised treatment. With its proven efficacy and speed of treatment, ¹⁻³ the LightSheer duet system ensures high levels of patient and physician satisfaction.

^{1.} Halachmi S, Lapidoth M. Low-fluence vs. standard fluence hair removal: a contralateral control non-inferiority study. J Cosmet Laser Ther. 2012 Feb;14(1):2-6.

^{2.} Ibrahimi OA, Kilmer SL. Long-term clinical evaluation of a 800-nm long-pulsed diode laser with a large spot size and vacuum-assisted suction for hair removal. Dermatol Surg. 2012 Jun;38(6):912-7.

^{3.} Zhou ZC, Guo LF, Gold MH. Hair removal utilizing the LightSheer Duet HS hand piece and the LightSheer ET: a comparative study of two diode laser systems in Chinese women. J Cosmet Laser Ther. 2011 Dec;13(6):283–90.

In VASER Shape, UltraSound Treats Deeply for Contouring

BY MICHAEL H. GOLD, MD

he body contouring field has expanded greatly over the past several years, with a plethora of radiofrequency devices recently introduced into the aesthetic field.¹ All of this has given us, the providers, more choices to offer our patients, but we need to make sure that the science behind these new devices actually translates into positive outcomes and clinical results. Time will still tell whether one RF pole, two, three, or more, and whether magnets, etc. actually improve outcomes.

We are still lacking that "magic" device that will work on every patient, in every area, every time. The VASER Shape (Sound Surgical Technologies/Lumenis) is a promising new contouring option that uses ultrasound, which penetrates deeply into the skin. The VASER Shape System includes a lymphatic drainage handpiece and an ultrasonic handpiece; the technology is described as dual transducers that emit a double beam of controlled, overlapping ultrasound energy to smooth and shape the body by heating the fatty tissue layer. With the contouring system we have in the VASER Shape, we have the opportunity to treat deeply, thereby allowing appropriate contouring and cellulite management. There is no pain or downtime associated with the treatment, and many patients see measurable improvements after the first session.²

VASER SHAPE IN MY PRACTICE

I am always looking for different and unique technologies to introduce into my practice. My RF devices have served my patient population well, but they do not work with every patient, and we need to have multiple modalities to effectively manage our contouring patient base. VASER Shape can be used on the abdomen, love handles, back, arms, thighs, and knees. I have found the system particularly adept at targeting specific body areas, such as the arms and legs, that other systems often have difficulty in treating in a consistent fashion.

The ultrasound technology in the VASER Shape gives me another option for my patients, and so far since introducing it into the practice the response has been all positive.

The treatments are not painful and have even been described as relaxing and "spa-like." While patients can see

As patients want non-invasive body contouring, we are able to offer them a new technology—ultrasound—that may allow them to avoid a more invasive liposuction procedure or another procedure that may not take care of their needs.

improvement following their first treatment, many require a series of treatments to achieve the desired results.² Although we initially proposed three to five brief treatment sessions, usually spaced at weekly intervals, the current trend is toward longer treatment sessions with results visible in two and perhaps one session.

We anticipate VASER Shape will add to the variety that we can provide to our patients who are interested in body contouring and cellulite management. We will be using it on patients interested in contouring and in time with continued use will determine where it bests fits in. As noted above, it is a suitable option for certain body sites, such as the legs and arms, and may be an ideal treatment for patients most concerned about those areas. As a new technology in our practice, it may also be a reasonable option for patients who aren't fully satisfied with the results of treatment with other types of devices.

As patients want non-invasive body contouring, we are able to offer them a new technology—ultrasound—that may allow them to avoid a more invasive liposuction procedure or another procedure that may not take care of their needs. Patients prefer a treatment, such as VASER Shape, that doesn't require anesthesia, and practices appreciate that there are no disposables with their associated costs. All devices take up space, and this one is no different. However, it is not a particularly large machine. Nonetheless, we need to always remember space when investing in new devices, and some practices may not fully consider this.

GROWTH THROUGH REDUCTION

Contouring treatments, such as with the VASER Shape, can serve as a gateway procedure for cosmetic patients, including patients who simply require more education about aesthetic treatment options. As such, contouring serves not only as its own revenue stream for the practice, but also a source for new patients for other procedures. The 45 minute to one hour VASER Shape treatment sessions are a great opportunity for staff to educate patients about gen-

eral skin health, proper skin care, our dispensed products, and additional cosmetic services available in our practice. Patients seeking contouring may also be interested in everything from hair removal to fillers to facial resurfacing.

1. Belenky I, Margulis A, Elman M, Bar-Yosef U, Paun SD. Exploring channeling optimized radiofrequency energy: a review of radiofrequency history and applications in esthetic fields. Adv Ther. 2012 Mar;29(3):249-66.

2. Atluri P, Barone F, et al. Clinical Effects of Noninvasive Ultrasound Therapy for Circumferential Reduction. Am J Cosmet Surg. 2012; 29:114-119.

UltraPulse: Expanding Options for Laser Scar Revision

BY JILL WAIBEL, MD

urn and traumatic scars are challenging to treat in laser medicine. Almost everybody has a scar, whether it is a surgical scar, an acne scar, or a traumatic scar, and it wasn't until our recent fractional technologies emerged that new hope was provided for patients. ^{1,2} The shifting paradigm for definitive scar reconstruction ends with recovery of optimal appearance and function. This is a multispecialty collaborative effort with lasers playing a significant role. Lasers are quickly becoming the gold standard for scar improvement. While dermatologists cannot make scars perfect, we can improve scars significantly to make them almost nonvisible, and change people's lives in the process. ^{1,2} With each treatment session the scar continues to improve.

SYMPTOMS AND FUNCTION

Emerging on the market, fractional ablatives not only give scar patients cosmetic improvement, but they also help improve some of the symptoms associated with scars, such as pain, burning, pruritus, and discomfort. For example, a three-year-old girl was brought into my office because of itching burn scars all over her body. Almost within hours of doing a single treatment, she reported no itching. It has been a year since her first treatment with no return of pruritus and with cosmetic improvement of scars (See photos). In addition to relieving symptoms, the laser can also provide functional improvement with range of motion and increase of activities of daily life. For example, in the case of contractures over a joint, the laser treatment can restore the tissue to a more nor-







Photos courtesy of Jill Waibel, ME

The patient far left had significant improvement of pruritus after a single treatment of her scar—so much so that she struck her "princess pose." The second patient is shown at baseline and after three UltraPulse treatments for a dog bite scar.

malized function and improve the patient's range of motion in the joint, improving daily functions of life.³ I have patients whose hands used to be frozen secondary to scar tissue that now can turn the key in their door and now can drive a car, giving a lot of hope where there used to be none.

When I address a scar, I always do so with combination therapy in mind. The mainstay of my therapy, though, is the fractional laser. Research has shown that the pulsed dye is an important part of improving the erythema of scars.^{2,4} Nonablative fractional lasers are also helpful in the scar story and in a few trials showed better efficacy in clinical trials for acne and surgical scars than the pulsed dye laser.² Most recent studies revealed that ablative fractional lasers give more efficacy in the treatment of scars than nonablative.²

The UltraPulse also permits for a "paintbrush technique" with the Active FX handpiece, allowing the operator to quickly feather over large body surface areas to treat a whole chest or abdomen in about 10 minutes.

CARBON DIOXIDE LASERS

Dermatologists have two choices for fractional ablative therapy—erbium and CO_2 —and they both work.; Based on the research that we do at University of Miami and our work on animal models, we think the CO_2 wound is a little different, and it creates a wound healing in the scar that we don't see with other lasers. Fractional ablative lasers are my mainstay for scar therapy, especially for hypertrophic burns and traumatic scars. I commonly use the UltraPulse Fractional CO_2 Laser (Lumenis).

EXPERT PERSPECTIVE:

"You can titrate that recovery to two days up to 10 days depending on how aggressive you are with the treatment setings."

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http://dermtube.com/series/lumenis/ e-victor-ross-md-on-ultrapulse-fractionallaser-treatments/



With ablative fractional lasers, the energy is directly related to the depth of the laser. For example, a laser at 12.5 mJ might only go 500 microns of ablation and thermal damage, whereas a laser at 20 mJ can go about 800 microns of ablation and thermal damage. Dermatologists absolutely need to go deep to treat scars. Therefore, a laser like the UltraPulse that is high energy is more effective than other lasers with lesser energy. Three of the attributes of this system that I like are the pulse duration, spot size, and speed.

The UltraPulse has a short pulse duration; once the heat is in, the scar tissue is vaporized and the heat leaves. We know from our continuous CO₂ lasers and lasers that have longer pulse durations that you can actually cause scars with too much thermal energy applied for too long, so having that very short pulse duration seems to be what the body needs in order to properly heal. The UltraPulse also has a small spot size. Having knowledge of fractional ablative devices on the



the UltraPulse.



Photos courtesy of Jill Waibel,

The patient above sustained a burn wound in infancy (left). She had significant improvement (right) after two treatments with

market through my own practice and research, I have noted a big cut off in efficacy if the spot size is greater than 200 microns for the Deep FX component. If it is greater than 200 microns, the coagulation zones seem to touch each other, which does not promote healing and actually can lead to complications.

The UltraPulse also permits a "paintbrush technique" with the Active FX handpiece, allowing the operator to quickly feather over large body surface areas to treat a whole chest or abdomen in about 10 minutes. If you were doing a stamping pattern, that may take 10 hours.

In addition to the ActiveFX mode for superficial fractional ablation, Lumenis also offers the DeepFX for deep fractional ablation, the TotalFX for combined superficial and deep fractional ablation, and the new SCAAR FX for synergistic coagulation and ablation for advanced resurfacing. The SCAAR FX provides 150 mJ per pulse; and by reaching up to 4.0mm into the dermis, this mode can treat all depths of complex, deep lesions effectively. Surgical and acne scars are best treated in this mode, providing improved patient quality of life, structure, skin appearance, and range of motion. We are currently using an ultrasound to measure the depth of scars before using the UltraPulse. We have found that scars are often much thicker than we anticipated. Current thinking is that to optimally treat a scar the laser ablative column needs to be full thickness through the scar. Having the SCAAR FX software enables us to treat as deep as we need to for thicker, severe burn and traumatic scars.

The majority of dermatologists tended to use the nonablative fractional lasers for atrophic scars, and almost-flat surgical scars, whereas the ablative fractionals seem to be preferred for hypertrophic scars that have thicker collagen and thicker tissue. Now we are able to use the ablative fractionals on atrophic scars as well.

PRACTICE DEVELOPMENT

From a practice perspective, scar revision is expanding to become an important menu item for both predominantly

cosmetic and mixed cosmetic and medical practices. The most important thing is helping patients, which is our number one goal as physicians. These lasers are giving hope to patients that have no other modalities. Secondly, the market for scars is bigger than any other market in lasers. Most everybody in the world has a scar, and most patients want those treated. Our biggest problem right now is most patients are not aware that lasers can help scars.

Scar revision can set you apart and augment your practice. In our practice, we added before and after photo slideshows in the rooms, which increased almost all of our cosmetic business by 50 percent within one month. It was really amazing to see how big of a difference such a small thing could make. The non-cosmetic patient successfully treated for scars will

become a loyal, long-term patient and an ambassador for your practice. Those who seek treatment for scars that may be deemed more cosmetic in nature are more likely to return to you when their cosmetic interests expand.

Unfortunately, as we see reimbursements in the insurance arena going down, we are rarely reimbursed for scar revisions, and most patients will pay out of pocket. Nonetheless, it is very rewarding work with very grateful patients.

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AcuPulse MultiModes: Multiple Applications Offer Broad Appeal

BY GIRISH (GILLY) MUNAVALLI, MD

If I were to describe the benefits of AcuPulse MultiMode technology in clinical practice, two words come to mind: versatility and power. The AcuPulse is a small form factor device that packs a powerful punch.

In looking for a multimode system, I wanted one that offered versatility and power with safety in a compact design. The AcuPulse MultiMode finally offered what I was looking for. I was pleasantly surprised that it is powerful enough to use in combo mode to treat with deep and active fractional resurfacing simultaneously and has enough finesse to gently heat nails to treat nail fungus.

MULTIMODE IN PRACTICE

AcuPulse with MultiMode offers four fractional modes and five ablative modes in a single system. There are benefits across the range of practice settings, from medical to surgical uses. Experienced surgeons can tweak each ablative mode for precision, while beginning users can utilize the combo mode for simultaneous deep and superficial fractional resurfacing.

Histologically, there is no significant difference in heating depth between the SuperPulse (AcuPulse) and UltraPulse, which assured me that AcuPulse would allow me to achieve

Most notably, the available applications appeal to a broad patient demographic, addressing concerns across various ages and skin types.

From its multiple potential applications to its intuitive and practice-friendly features, the MultiMode system is quickly becoming a workhorse tool in my practice.

the results I and my patients desired.

Both experienced cosmetic surgeons and recent adopters will find that the touchscreen interface of MultiMode is easy to use and a true benefit over some other systems. An important benefit of the touch screen is that it offers prompts that guide staff on what they need to do to switch modes and initiate various treatments.

Having a single handpiece is a big advantage; there is nothing to get lost and less risk of things getting damaged.

The scanner technology is a key feature that allows for targeted and efficient treatment of any part of the face.

Another attractive feature of the device is the lack of disposables and associated costs. The system is designed to ensure sterility and to allow for easy cleaning between treatments—meaning no downtime between patients.

MY EXPERIENCE

Of the four fractional modes—StretchTouch, ToeTouch, FineTouch, and Combo—currently we are performing a lot of Combo and StretchTouch procedures because of current patient demand. It is very useful to have one flexible, compact yet powerful device that doesn't have special voltage needs and can be used in any of our rooms.

Combo mode allows for targeting of superficial epidermal and mid-dermal levels to provide improvement in texture, tone, and laxity without having to switch handpieces. And treatment is rapid. The Combo mode eliminates a common challenge associated with the use of two different systems, namely that the first treatment can obscure landmarks that the laser surgeon wishes to target with the second treatment. When you apply both treatments simultaneously, you can follow the plan you've mapped out without losing landmarks.

Downtime for combination deep and superficial treatment ranges from four to seven days depending on how aggressive treatment is. Many patients consider this a reasonable trade-off for the degree of improvement they can achieve. I have found that many patients prefer to undergo one or two treatments with relatively more downtime but substantial results, versus undergoing numerous treatments that offer less improvement but less downtime.

To say that stretch marks are a popular complaint

amongst patients in my practice is something of an understatement. This treatment is bringing patients into the office. My experience has been positive, particularly for improvement in texture. More aggressive settings yield more substantial results in fewer treatment sessions. Since many stretch marks develop on body areas that can be hidden by clothing, patients will tolerate more intensive treatments and lingering erythema.

Fresher, very red stretch marks are best treated with a device like the M22 that can reduce erythema, but it will not improve texture. For older, less erythematous stretch marks, the StretchTouch will improve the texture.

Finally, treatment of onychomycosis remains relatively new, but our clinical experience with ToeTouch is assuring. As with all lasers that treat onchyomycosis of the toenail, improvement takes time and patience on the part of the patient and often multiple treatment sessions. Goal of treatment is to bulk heat the nail plate—to the point of mild patient discomfort—to destroy fungus. Two to three treatments are typically needed; all nails can be treated in about 10 minutes. Thickened, dystrophic nails should be avulsed prior to treatment to improve clinical results.

MARKETABLE VERSATILITY

The versatility of the AcuPulse MultiMode can benefit a range of dermatology practices. Importantly, the system offers the ability to effectively treat a number of the most common patient concerns—and to do so efficiently. Most notably, the available applications appeal to a broad patient demographic, addressing concerns across various ages and skin types. From its multiple potential applications to its intuitive and practice-friendly features, the MultiMode system is quickly becoming a workhorse tool in my practice.