

7th International Conference on 09-10 November



Plastic, Aesthetic,
Reconstructive &
Cosmetic Surgery



DUBAI,
UNITED ARAB
EMIRATES

PROCEEDINGS



“ADVANCES IN SURGICAL
TECHNIQUES ALONG WITH
PATIENT SAFETY AND ETHICAL
CONSIDERATIONS”

DUBAI, UAE
09-10 NOV 2023



Editors

Dr. Alain Tenenbaum,
M.D.; PhD; D.Sc-Facial Plastic Surgeon,
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Dr. Mohan Thomas,
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Thomas Aesthetics, India

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DAY 1

Thursday, 09 November, 09am -5pm

Hall: Meeting Room -02

OPENING CEREMONY

KEYNOTE PRESENTATIONS

09:00 - 11:50

Dr. Alain Tenenbaum
Dr. Mohan Thomas
Dr. Philippe Bellity

Networking &
Refreshment break :
10:35 - 10:50 @ Foyer

WORKSHOP PRESENTATION

11:50-12:20

Dr. Harleen Oberoi

SPEAKER PRESENTATIONS

Session Introduction

Facial Plastic & Reconstructive Surgery

12:25 -17:00

Dr. Norayr Mikayelyan
Dr. Mohammed Faisal Ebrahim Kahawash
Dr. Fabiano Arruda
Dr. Regina Rodman
Dr. Preetinder Kaur
Dr. Ashish Kumar Singh
Dr. Hussein Mohamed Ghanem
Dr. Nejat Can
Dr. George Titovets
Dr. Mykola Boiko
Dr. Christeen Youssef

17:00 - 17:10

Certificates distribution

17:10

End of Day 1 Program

Networking &
Refreshment break :
15:05 - 15:20 @ Foyer





D A Y 1



09 NOVEMBER 2023 | DUBAI, UAE

KEYNOTE FORUM

PARCS 2023

Male and female immediate isovolumetric gluteoplasty

Dr. Alain Tenenbaum, M.D.; PhD; D.Sc–Facial Plastic Surgeon
Inventor of Endopeel, Facial plastic surgeon, Switzerland

BUTTS RESHAPING BY 3D ISOVOLUMETRIC CHEMICAL MYOPLASTY AND MYOPEXY

WHAT DELEGATES WILL LEARN/TAKE AWAY FROM THIS PRESENTATION:

Delegates will learn that with minimum material, low investment, with some techniques better than fillers, mesotherapy, apparatology, an alternative to surgery is proposed to reshape male and female body, giving more appearance to existing muscles or more projection to the hidden muscles. Movies presented in the presentation will show how easy techniques are.

INTRODUCTION:

The immediate chemical and medical Gluteopexy is a new weapon for dermatologists, plastic surgeons by using the techniques called Endopeel, which have like mechanism of action a myotension, a myoplasty and a myopexy which duration does not exceed 6 months.

OBJECTIVES:

These techniques can be proposed to patients who wish to get a gluteoplasty, to patients who are not candidates for a surgical Gluteoplasty, to patients which refuse suspension threads, to surgeons who want to complete their operation of Gluteoplasty.

The advantages of these techniques are important for the patients, because of

- the immediate effect,
- the shape following the wishes,
- the absence of scar,
- the absence of down time,
- the absence of social eviction,
- the transitory complications which are limited only to short duration ecchymosis.

PATIENTS' SELECTION:

All patients who desire a surgical or non-surgical gluteoplasty can be candidates, as those not being candidate for any kind of filler (the fillers are too often sources of complications like granulomas, necrosis, migration, nodules etc.), and those wanting to complete or to maintain the benefits of suspension threads.

Cont...

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Our Criteria of Exclusion: Alcoholic patients, smokers, pregnant women, subjects under 18 years, patients using recently steroid anabolisants.

CONCLUSIONS:

Until now, the concept of Gluteoplasty was based only on volume augmentation concept, without taking care of an isovolumetric 3D deformations. With Endopeel techniques one acts not only on the myotension by preserving the muscular mass and without affecting the muscular contraction but also on the myoplasty and the myopexy. With this fact, the indications of the fillers become more restricted and will apply only to the depressions which remain after tissue tension of the selected area. Indications of sutures will be too more restricted as they are not only painful but it is rare that a patient submits 2 times to sutures gluteal lift.

Finally chemical Gluteoplasty with a handing-over in tension of tissues with tightening effect like the Endopeel techniques give a better shape of the gluteal area, project a nice convexity of the new gluteal shape, which is tighten too, with redraping of the oranges skin due to cellulitis (which gets the, iron effect, with Endopeel). Also the eventual stretch marks will only optically disappear, being as well redraped through the, iron effect, of Endopeel.

The technique Endopeel is a new strategic weapon for the Dermatologists and Plastic Surgeons enabling them to complete and/or maintain a Gluteoplasty which is an alternative to the surgery.

BIOGRAPHY:

Dr. Alain Tenenbaum is the President of Swiss Academy of Cosmetic Dermatology and Aesthetic Medicine and President of International Peeling Society. He is a specialist in (ENT) Oto Rhino Laryngology and Facial, Plastic, Reconstructive and Cosmetic Surgery. Also, he is an inventor of Endopeel and many other peelings like Peeling de Luxe. He is known as a worldwide trainer of Aesthetic Medicine and Cosmetic Dermatology. He is an expert in SEO- Search Engines Optimization, for Aesthetic Medicine, Anti-Aging Medicine, Cosmetic Dermatology and Aesthetic Plastic Surgery.

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Body Contouring after massive weight loss

Dr. Mohan Thomas, M.D. FACS

Dr. Mohan Thomas Aesthetics, India

Massive weight loss causes the skin to become very loose and ptotic in the abdomen, arms, breasts, thighs and buttocks. The ptotic skin is also associated with the drop of the gluteus muscles in the gluteal region which needs to be lifted as well. The treatment plan has to be drawn up based on the clinical finding as well as safety factors which will be discussed in detail in this presentation.

Patients who underwent a combination of procedures which included all or a combination of abdominoplasty, posterior body lift, chest surgery, thighplasty and / or armplasty were reviewed for the study. The extent of loose skin, fat deposits, and muscle ptosis were studied in detail and recorded. The results were reviewed with a minimum follow up of 6 months. 92% of patients were very happy and satisfied with the improvement seen after the procedures. Only 8% patients needed some touchup to improve certain areas.

A combination of Body contouring procedures in different body parts included liposuction to address residual fat deposits, removal of loose skin and repositioning of the ptotic muscle in the gluteal area achieved a well contoured body which is sustained for a long time.

BIOGRAPHY:

Prof. Dr. Mohan Thomas is a highly esteemed triple board-certified cosmetic and facial plastic surgeon with extensive American training and an impressive career. Notably, he has served as a Clinical Professor of Surgery at D Y Patil University in Mumbai. Dr. Thomas is a Fellow of the American College of Surgeons and a Member of Honour in the French Society of Aesthetic Surgery, solidifying his international reputation. His commitment to education is evident through his role on the Editorial Board of the Journal of the American Academy of Cosmetic Surgery and mentorship at D Y Patil University. He has held Trustee positions in esteemed organizations like the American Academy of Cosmetic Surgery and the World Academy of Cosmetic Surgery. As the Founder President and Trustee of the International Society of Cosmetic Surgery (ISCS), Dr. Mohan Thomas's career and contributions have left an enduring mark on the field, establishing him as a leader in cosmetic surgery.

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FRENCHLIFT° A New Concept in Face Lifting: Experience of 1100 Cases

Dr. Bellity Philippe

FRENCHLIFT° CLINIC Paris, France

FRENCH LIFT° is a new concept of face lift technique developed by the author in the last 13 years. More than 1100 cases have been performed and were able to confirm very effective results on beauty and rejuvenation, compared to different SMAS techniques performed before. The principal cause of the aging face is a sliding down of the mobile anterior face: The nasolabial and jowl fat compartments. And the most challenging goal is to replace those structure at their original place. The main concept is to consider that a direct approach is possible to elevate vertically the anterior face and strongly fix them at their original position giving to the patient his former anatomy and a very natural look. The undermining is extended more anteriorly thus exposing the compartments and allows a direct mobilization of these structures, resulting of a complete repositioning of the jowl fat pad, strongly improving the nasolabial fold, reconstructing a nice and full cheek, and giving a perfect oval line. The technique is safe and reproducible especially for young surgeons without the need to deal with the deep structures proving that the problem is strictly superficial. The Rohrich work on fat compartment anatomy were useful to confirm by this experience that the concerned compartment is different in their position and also their lobular structure and do not belong underlying SMAS.

TECHNIQUE:

A regular lift incision is done and a strict subcutaneous and extended undermining expose the different superficial fat pads. Vertical traction with forceps allows to correct the prominent jowl and nasolabial fat pads and fixation with running suture to the SMAS. The excess of skin is naturally moved back by this procedure and the redraping is made without tension. The neck is treated or not with a regular retro auricular incision. Of the 1100 FRENCH LIFT* performed by the author, were 91% female and 9% male with an average age of 63 years old. There were 5 hematomas occurred, increasing the recovery time and inducing asymmetrical results for up to 3 months. The time of social inactivity was approximatively 1 to 2 weeks. We observed 5 neuropraxia involving the buccal branch with spontaneous recovery between 15 days to 3 months, most of those cases were due to the buccal fat pad direct removal.

Cont...

FRENCHLIFT® A New Concept in Face Lifting: Experience of 1100 Cases

Dr. Bellity Philippe

FRENCHLIFT® CLINIC Paris, France

5 infections occurred with the necessity of surgery evacuation. 15 patients needed a surgical revision for residual skin excess explain by different quality of skin in patient. The French lift is a rejuvenation concept that is based on putting back the anterior superficial fat compartments of the face into their initial place. After operating 1100 patients, we can say that our technique can be indicated for any patient requiring a facial rejuvenation. Natural looking results are the rule. Most patients reported that they regained their "former" face. No patient complained of a very tense appearance.

BIOGRAPHY:

Dr Bellity Philippe did his Medical School in Paris Cochin Port Royal, Fellowship + Research Assistant for a project of tissue culture at University of Illinois Chicago. His qualifications in General Surgery, Ear Nose and Throat in France Nice University Hospitals, Plastic and Reconstructive Surgery in France Foch Hospital former department Paul Teissier). He is doing private practice in exclusive Aesthetic Surgery since 1992 in Paris. He is the Head and Founder of Humanitary organization "les enfants du Noma" for children face reconstruction in Africa sine 2001 (6000 operations, 8 missions per year).

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The “Amazz Facelift”– Hybrid Deep plane Facelift

Dr. Mohan Thomas, M.D. FACS

Dr. Mohan Thomas Aesthetics, India

The “deep plane facelift” is the term used to describe a radical facelift procedure which involves tightening the structures deep to the SMAS so that the dissection is in the anatomic plane that exists between the SMAS-platysma complex (which is muscle and fascia) and the deeper layer of muscles responsible for facial expression. This procedure focuses on the release and movement of muscle and fat layers instead of skin pull and removal.

The hybrid deep plane facelift technique incorporates the release of the ligaments tethering the deep plane layer to the superficial SMAS-skin complex to achieve tension-free movement of the superficial tissues so that no tightness can be created by the facelift procedure. Dr. Thomas releases ligaments which prevents the tissue from moving superiorly, thus getting a natural lifting throughout the face and neck.

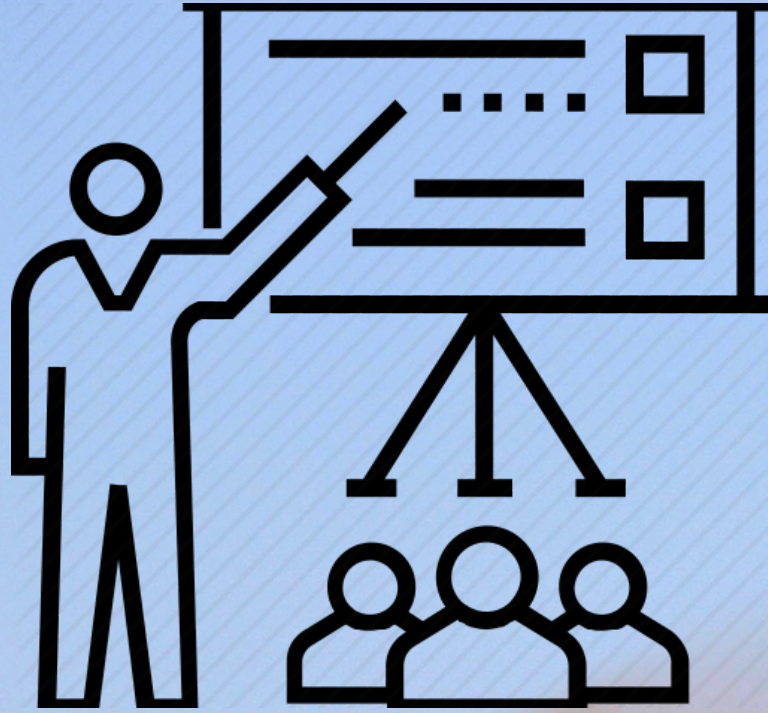
The ligaments released include the zygomatic ligaments, the orbital septum and the mandibular ligament along with the incision or excision of the Platysma that tether the cheek and the neck skin so that drooping cheeks, the jowls and the neck bands can be elevated. This restores the cheek shape and volume and the definition of the lower face, recreating the heart-shaped face of youth avoiding the need to add filler, fat, or cheek implants to the face. It also will improve the nasolabial folds (the creases from the nose to the corner of the mouth), and any hollowing and shadowing seen under the lower eyelids by restoring volume that is lost by gravitational descent associated with aging. Significant volume loss in the under eye areas is addressed by autologous fat grafting undertaken at the same time.

BIOGRAPHY:

Prof. Dr. Mohan Thomas is a highly esteemed triple board-certified cosmetic and facial plastic surgeon with extensive American training and an impressive career. Notably, he has served as a Clinical Professor of Surgery at D Y Patil University in Mumbai. Dr. Thomas is a Fellow of the American College of Surgeons and a Member of Honour in the French Society of Aesthetic Surgery, solidifying his international reputation. His commitment to education is evident through his role on the Editorial Board of the Journal of the American Academy of Cosmetic Surgery and mentorship at D Y Patil University. He has held Trustee positions in esteemed organizations like the American Academy of Cosmetic Surgery and the World Academy of Cosmetic Surgery. As the Founder President and Trustee of the International Society of Cosmetic Surgery (ISCS), Dr. Mohan Thomas's career and contributions have left an enduring mark on the field, establishing him as a leader in cosmetic surgery.

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DAY 1



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WORKSHOP

PARCS 2023



Role of neuromodulators in dentistry & facial aesthetics

Dr. Harleen Oberoi

Cosmics n Smiles, India

INTRODUCTION:

Botox commonly known as Dysport or Xeomin, commonly used to relax muscles & treating fine lines, wrinkles, crows feet, forehead creases, and advanced indications like sweating & Migraine. The only FDA approved prescription, treatment takes seconds which is painless & minimally invasive.

MECHANISM OF ACTION:

The ingredients present in Botox block signals from nerves to muscles by inhibiting the release of acetylcholine. This inhibition occurs as neurotoxin cleaves SNAP25 protein, which is responsible for successful docking and release of acetylcholine. This in turn relaxes muscles and nerves.

BIOGRAPHY:

Dr. Harleen Oberoi has graduated from Himachal University Shimla in the year 2005. She did her Master in Hospital Administration from Chennai. She did her certifications in Cosmetic Dentistry and Oral Implantology from New York University, USA. Then she did her Mastership course in Facial Aesthetics in Athens, Greece. She is a Diplomate in the American Academy of Aesthetic Medicine and Surgery USA. She is a National and International speaker, won various accolades and awards including "Famdent Award Winner" multiple times. She is co-author of the book "Facial Aesthetics Book by Celebrity Dentistry India". She maintains a successful dental & facial aesthetics practice in Chandigarh for the past 13 years.

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DAY 1



THE SPEAKERS PRESENT

SCIENTIFIC TRACKS

ABSTRACTS

09 November 2023 | Dubai, UAE

PARCS 2023

Body Contouring, Face Lift, Facial Plastic & Reconstructive Surgery, Rhinoplasty-Genioplasty-Profiloplasty, Toxin-Threads-Fillers-PRP

SESSION CHAIR

DR. LARS RASMUSSEN

The Sahlgrenska Academy, University of Gothenburg, Sweden

CO- CHAIR

DR. PHILIPPE BELLITY

FRENCHLIFT® Clinic, France

• **NORAYR MIKAYELIAN**

3D FACIAL RECONSTRUCTIONS AFTER SHRAPNEL INJURIES WITH NEW-GENERATION PERSONALIZED TITANIUM IMPLANTS

Medical Center after Vladimir Avagyan, Armenia

• **MOHAMMED FAISAL EBRAHIM KAHAWASH**

FACIAL DOG BITES

Alborj Consultant Hospital, Yemen

• **FABIANO ARRUDA**

THE TIP IN RHINOPLASTY

Médico Cir. Plástica, Brazil

• **REGINA RODMAN**

GENIOPLASTY: 3 METHODS TO CHANGE THE SHAPE, SIZE, AND POSITION OF THE CHIN

Face Forward Houston, USA

• **PREETINDER KAUR**

ROLE OF NONINVASIVE COSMETICS IN FACIAL AESTHETICS

Dental Affairs, India

• **ASHISH KUMAR SINGH**

NON-SURGICAL FACELIFT

DENTOMAX International Academy, India

• **HUSSEIN GHANEM**

GEOMETRIC BOTULINUM TOXIN INJECTIONS: A SIMPLIFIED REPRODUCIBLE APPROACH FOR SYMMETRIC FACE REJUVENATION

Cairo University & DermaHealth Clinics, Egypt

• **NEJAT CAN**

DOUBLE NEEDLE THREAD METHODS OF THE GHOST LIFT DOUBLE NEEDLE INVISIBLE THREAD METHODS OF FACE LIFTING MINIMALLY INVASIVE APPROACH FOR NON-SURGICAL FACE LIFT

Este-Su Academy of Aesthetic Medicine, Turkey

• **GEORGE TITOVETS**

THE SOFT PERINEOPLASTY COMBINED WITH VOLUMETRIC CORRECTION OF THE LABIA MAJORA

The St. Sophia International Institute of Beauty and Health, Cyprus

• **MYKOLA BOIKO**

PENILE ENLARGEMENT

Clinic "Androcentr", Ukrain

• **CHRISTEEN YOUSSEF**

STROMAL VASCULAR FRACTION IN WOUND HEALING

Everlast Wellness, United Arab Emirates

• **CHRISTEEN YOUSSEF**

STROMAL VASCULAR FRACTION IN WOUND HEALING

Everlast Wellness, United Arab Emirates

3D Facial Reconstructions After Shrapnel Injuries with New-Generation Personalized Titanium Implants

Dr. Norayr Atanesovich Mikayelyan^{1, 2}

Medical Center after Vladimir Avagyan, Armenia

Hybrid Technologies, Armenia

INTRODUCTION:

My experience is quite different due to the needs that my patients have had and have. I am a maxillofacial surgeon from Armenia. As you know, in the last few years, there have been several wars in Armenia, and due to the use of modern fragmentation weapons, the injuries of frontline boys were out of the norm and standards. There were quite serious consequences for the boys who were injured by shrapnel in the maxillary region (broken bones in the face, under the eyes, the front wall of Haymore bay, and other areas, etc.).

During the war days of 2020 and 2022, as a doctor, I considered it my duty to be on the front line and provide the boys with the first necessary medical care. and after the war, I operated on the same patients, performing complete reconstruction of one half of the face and registering a 97% result. I performed the surgeries with the use of new-generation 3D implants, which were provided by the Hybrid Technologies company operating in Armenia. I will be happy to share with you some results during the seminar, presenting the preliminary image of the operations, 3D simulations, as well as pre-operative and post-operative CT examinations.

METHODOLOGY:

In the field of 3D reconstructions of the face (with implantation), I could not somehow find any material that would be possible to study and according to them do what I did and specialize in that field. So, all I will present will be methods, materials based on my own experience, because this is really an experience gained from severe cases, which can save lives or improve the quality of life for people who have suffered a serious injury in the maxillofacial region in various ways. as a result of disasters.

RESULTS:

- From Severe Injury To Final Treatment - Video (CT before / 3D modeling / CT after)
- A New Level in Maxillofacial Surgery - Read the blog and see presented photos of previous and real-time implants
- Exclusive Maxillofacial Surgery with 3D Implantation - Read the blog and watch video with ENG subtitles
- Life To Me Not Only Continues, But Is Complete Now

cont...

3D Facial Reconstructions After Shrapnel Injuries with New-Generation Personalized Titanium Implants

CONCLUSIONS:

Will do during the Conference.

BIOGRAPHY:

Dr. Norayr A. Mikaelyan is a renowned Maxillofacial Surgeon and a pioneer in the field of 3D facial reconstruction. As the Head of Maxillofacial Surgery Services at a prestigious institution, he has made significant contributions to cranio-maxillofacial (CMF) and oral surgery. Dr. Mikaelyan's groundbreaking work in 3D reconstructive surgery has set new standards, offering hope and transformation to patients with complex facial deformities and injuries. He is also a trusted CMF consultant for surgical planning, guiding fellow surgeons to achieve optimal outcomes. Dr. Mikaelyan's dedication to his craft and his commitment to improving lives make him a leading figure in the world of maxillofacial surgery.

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Facial Dog Bites

Dr. Mohammed Faisal Ebrahim Kahawash

Alborj Consultant Hospital, Yemen

Dog bites are a frequent occurrence, impacting individuals across various age groups, ranging from children to the elderly. These injuries can manifest in various parts of the body, often involving the head and face. The preferred course of treatment for these injuries typically involves suturing the wound, along with administering antibiotics, tetanus prophylaxis, and anti-rabies vaccination. Direct repair and reconstruction of facial dog bite injuries at the earliest opportunity resulted in good outcomes as evidenced by the satisfaction survey data and low complication rate. So, the aim of immediate surgical repair is to obtain better cosmetic results and to avoid infections. 2010-2022 about seven cases, all of them are at childhood except one patient is young male. Five cases were done with immediate repair except two patients were rejected the immediate repair. One patient was died because not given the anti-rabies vaccination. All of patients are soft tissue injuries except one patient is complex of soft tissue wounds and facial bone fractures. In my presentation two cases one is a child and one is young male.

BIOGRAPHY:

Mohammed Faisal Ebrahim Kahawash was the Arab Board Resident (5 years) in Cranio-Maxillofacial & Plastic Surgery Department, Faculty of Dentistry and University Hospital Alexandria University (2004-2010). Participated in many international conferences and courses, Specialist of Department of Dentistry and Maxillofacial Surgery, Yemen International Hospital (2010-2015) and Head of Department (2014-2015), Taiz, Yemen. He was the Lecturer in many Dentistry Colleges of Yemen from 2013-2019, Head of Department of Oral and Maxillofacial Surgery, Almaner Hospital, Ibb, Yemen (2017-2022), Head Department of Dentistry College of Malaysian International University (2018-2019). Ibb, Yemen. He is currently a Specialist of Alborg Dental Surgery, Department of Alborj Consultant Hospital, Hadermout, Mukalla, Yemen.

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cont...

The tip in rhinoplasty

Dr. Fabiano Calixto Fortes de Arruda

Médico Cir. Plástica, Brazil

INTRODUCTION:

Rhinoplasty is one of most plastic surgeries in the world according to ISAPS (1,2). Obtaining an aesthetically pleasing yet structurally sound nasal tip is one of the most challenging aspects of primary and revision Rhinoplasty. As the major tip support mechanisms of the nose and management of the nasal tip and tripod complex centers around the lower lateral cartilages, proper understanding of surgical anatomy and techniques involving the lower lateral cartilages is essential for optimal cosmetic and functional results. Tip Rhinoplasty is a key component in Rhinoplasty, understanding the correlation between tip surface and anatomic structures is essential to create lines, shadows and specific proportions of the tip and nose goal of this study is present techniques to put better tip nose.

MATERIALS:

Patients who underwent a Rhinoplasty July 2019 to July 2023 were studied. All patients had some type of alteration in the nasal tip. Patients over 18 years of age, with no history of diseases such as Wegner's granulomatosis, fissures and leprosy, were selected. Data on age, sex, type of suture at the tip, treatment of the alar region and projection were collected.

RESULTS:

350 patients are evaluated, the mean age was 37,3 years old, mainly female 78%, 96% used intercrural and intra crural suture, 83% used resection alar , 18 % used alar to support and reinforce alar cartilage, 8% used mattress suture in alar cartilage, 37% used alar rim, 8% used alar cartilage graft, 21% used alar articulated graft, 5% used sheen cartilage, 2% a umblela tip, 80% used septal extension graft, 2% a tongue in groove, 18%

CONCLUSION:

The tip nose is an essential time to threat in Rhinoplasty. Have the knowledge about the techniques help in improve the results.

References:

- ISAPS Global mundial statistics 2018.
<https://www.isaps.org/wpcontent/uploads/2019/12/ISAPS-Global-Survey-Results-2018-new.pdf> 2.

cont...

The tip in Rhinoplasty

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BIOGRAPHY:

Dr. Fabiano Arruda is a highly accomplished plastic surgeon with a lifelong passion for medicine. He earned his medical degree from the Federal University of Goiás and pursued further specialization in General Surgery and Plastic Surgery at the Federal University of Uberlândia.

Committed to continuous improvement, Dr. Arruda honed his skills through international studies in Miami and Atlanta, working with top surgeons in the world. He holds a master's degree in Health Sciences, an MBA in Health Management and Auditing, and a doctorate in the same field.

Dr. Arruda practices Plastic Surgery in Goiânia and holds prominent positions in leading medical societies. He is an award-winning surgeon, recognized with the Antônio Pinheiro award at the Brazilian Congress of Plastic Surgery. With numerous publications and global lecture invitations, he contributes significantly to the field of plastic surgery.

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Genioplasty: 3 methods to change the shape, size, and position of the chin

Dr. Regina Rodman, M.D.

Face Forward Houston (private practice), USA

Genioplasty surgically alters the position, size, and shape of the chin. Genioplasty has many medical and cosmetic benefits over chin implants and is the preferred method of augmentation in patients with microgenia. In advancement genioplasty, the soft tissue of the digastric muscles, floor of mouth, and base of tongue are also advanced, creating space in the airway and more definition at the cervical mental angle. Genioplasty is the only method to reduce the size of the chin.

In this presentation, 3 different methods of genioplasty will be discussed. The speaker has named these 1, 2, and 3 piece genioplasty. The different methods are used to treat different chin shapes and different aesthetic goals. 1 piece genioplasty reduces the chin, while 2 piece is primarily used for augmentation. 3 piece narrows the chin, and can be used for advancement, reduction or narrowing only with no horizontal movement. In this presentation, the surgical techniques will be reviewed in tandem with an explanation of how/when to choose each technique based on the patient's aesthetic goals.

BIOGRAPHY:

Regina Rodman M.D. owns Face Forward Houston, a private facial plastics practice in Houston Texas, USA. She specializes in bony cosmetic work such as chin and jaw augmentation and reduction, forehead reduction, and facial feminization. She went to medical school at Rush University in Chicago, then otolaryngology residency which was completed at University of Texas Houston. She then went on to study facial plastic surgery and craniofacial surgery at SUNY Upstate in Syracuse New York. She combines her knowledge of aesthetic surgery and craniofacial surgery to perform a unique set of procedures that alter the facial skeleton to improve the balance and harmony of the face.

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Role of non invasive cosmetics in facial aesthetics

Dr. Preetinder Kaur

Dental Affairz, India

In classic sense, aesthetics is the science that deals with the condition of perception of things by senses. These are the subjective feelings of an observer. The field of cosmetology has steadily progressed over the past decade and cosmetic procedures are moving towards a new era. People are turning towards medical and dental professionals to improve their appearance.

When considering facial rejuvenation, one may choose non-invasive treatments like Botox & Fillers instead of facial plastic surgery. Botulinum toxin was approved by USA Food and Drug Administration (FDA). This led to a revolution in treating aging skin. We lose approx 1% of dermal collagen per year especially over the age of 50. Fillers add fullness to the areas that have thinned due to aging. Continued maintenance is crucial.

Non-invasive techniques offer a variety of benefits like improved skin textures, reduced appearances of fine lines and wrinkles, reduced appearances of hyper pigmentation and age spots and improved overall skin health.

With advancements in knowledge of genetics and understanding the individual, these treatments have become more personalized and targeted, based on age, skin type, genetic composition etc. Use of combination non-invasive treatment procedures delivers better results than using a single treatment alone. Judicious use of the non-invasive cosmetic procedures can therefore deliver good results.

BIOGRAPHY:

Dr Preetinder Kaur, a dental surgeon from New Delhi, India who has been practicing since last 26 years. She has passed out from SPDC Wardha, Maharashtra in 1996 and is having an independent practice since then. Her main areas of work are aesthetic dentistry and implants. She is a keen learner and believes in updating her knowledge. She also believes in sharing her knowledge and expertise. She is a person who works ethically and treats her patients with a genuine heart and does full justice to her patients.

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Non-surgical facelift

Dr. Ashish Kumar Singh; Dr. Gaurav Tiwari

DENTOMAX International Academy, India

A non-surgical facelift procedure has emerged as a revolutionary method to rejuvenate and revitalize the facial appearance without the need for extensive incisions or sutures. This innovative approach blends minimally invasive and non-surgical techniques, employing an array of cutting-edge tools such as neuromodulators, fillers, threads, lasers, and radiofrequency plasma therapy. The primary objective of this non-surgical facelift is to temporarily refresh, firm, and plump the face, offering a youthful and natural-looking result.

Neuromodulators, like Botox, are used to relax facial muscles, reducing the appearance of wrinkles and fine lines. Fillers are employed to restore volume and contour, addressing areas of sagging or hollowness. Threads, delicately inserted beneath the skin's surface, provide structural support and lift. Laser and radiofrequency treatments stimulate collagen production and tighten the skin, contributing to a firmer and more youthful complexion.

These non-surgical facelift procedures are becoming increasingly popular due to their effectiveness, minimal downtime, and natural outcomes. They empower individuals to achieve a refreshed and rejuvenated appearance without the need for extensive surgery, making them an appealing choice for those seeking a non-invasive path to facial revitalization.

BIOGRAPHY:

Dr. Ashish Kumar Singh is a distinguished professional with a wide range of accomplishments. He holds a Diplomate in Stem Cell, a Fellowship in Maxillofacial Aesthetics, and a Master's in Trichology. Currently pursuing a PhD in Regenerative Dentistry, Dr. Singh has also made his mark as an inventor, with patented instruments for perioplastic surgery and tooth reimplant modification procedures. He was nominated for the Padmashree in 2018 for his campaign to combat gingival recession and gum diseases. As the CEO of Dentomax International Academy and cosmetic centres, he manages 12 cosmetic centres across India. Additionally, he serves as the Director of ADENCOSP INDIA PVT LTD, a pharmaceutical company with a product portfolio of 20 items. Dr. Singh is also actively involved in politics as the head of Chikitsa Prakoshtha Mathura BJP. He has trained over 2,000 doctors, including dentists, dermatologists, and plastic surgeons, and has conducted numerous workshops both in India and internationally, including in Nepal, China, and Korea. His remarkable contributions have earned him a national award and recognition in the field of healthcare and aesthetics.

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Geometric Botulinum toxin injections: A simplified reproducible approach for symmetric face rejuvenation

Dr. Ghanem, H. 1

Darwish, H. 2

1Cairo University & DermaHealth Clinics, Egypt

2DermaHealth Clinics, Egypt

INTRODUCTION:

Since its introduction in 1989, Botulinum toxin (BTX-A) has become a fundamental component of cosmetic medicine. Various techniques have been developed to improve outcomes and minimize the risk of adverse effects. Many of these approaches rely on the expertise and learning curve of the administering physician (1-3). However, imprecise injection of BTX-A may lead to unnatural or asymmetric results or even potential complications e.g., Brow ptosis or eyelid ptosis.

In this context, we present a simplified approach aimed at preventing asymmetry or complications associated with the injection technique and achieving consistent and accurate results, suitable for physicians of various levels of experience.

METHODOLOGY:

This case series comprises 760 patients who received BTX-A injections to rejuvenate their faces. The injection sites were determined using tape measurements and were based on the specific requirements of each patient, such as the desired position of their eyebrows (4). The primary indications for the upper face included addressing forehead lines, glabellar lines, crow's feet, and elevating the brow. For the lower face and neck, the indications included treating marionette lines, elevating the mouth angle, addressing a dimpled chin, and reducing neck bands. Precise measurements were used to achieve symmetry in terms of eyebrow position and the angles of the mouth.

RESULTS:

Satisfactory muscle relaxation was achieved to attain the desired aesthetic outcome in 714 patients (94%), while 46 patients (6%) needed additional touch-up treatments. The degree of muscular response varied among individuals. The injections were administered with emphasis on safety, utilizing conservative doses and measured injection sites. Among the patients, 14 (1.8%) experienced excessive elevation of lateral eyebrows, necessitating a touch-up treatment to lower them through the lateral frontalis, while 32 (4.2%) patients required further treatment to address persistent lines.

Notably, there were no instances of eyelid ptosis following glabellar injection. This can likely be attributed to the use of a small volume with a higher concentration of botulinum toxin in this area, which limited its diffusion into the levator palpebrae superioris muscle. Bottom of Form

Cont...

Geometric Botulinum toxin injections: A simplified reproducible approach for symmetric face rejuvenation

CONCLUSIONS:

The geometric BTX-A injection technique is a simplified and structured approach that prioritizes safety and strives to achieve symmetric results.

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- Gadhia K, Walmsley AD. Facial aesthetics: is Botulinum toxin treatment effective and safe? A systematic review of randomized controlled trials. Br Dent J. 2009;207(5): E9.
- Ghanem H and Darwish H. Geometric Botulinum Toxin Injections: A Simplified Reproducible Approach for Symmetric Face Rejuvenation. J Dermatol Res Ther 2016, 2:016 Volume 2 | Issue 1

BIOGRAPHY:

Prof. Hussein Ghanem, Consultant Dermatologist and founder of DermaHealth clinics, has 35 years of experience in Dermatology and cosmetic procedures. He received several awards in laser treatments and injectables and holds the position of Professor Emeritus at Cairo University. He published over 50 research papers and book chapters.

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Double Needle Thread Methods of the Ghost Lift Double Needle Invisible Thread Methods of Face Lifting Minimally Invasive Approach for Non-Surgical Face Lift

Dr. Nejat Can

Este-Su Academy of Aesthetic Medicine, Istanbul, Turkey

INTRODUCTION:

Although the results of surgically performed SMAS lift facelift operations often require revision, the difficulties in post-operative care make patients nervous. The delay of patients from their social life may affect job loss and interpersonal relationships. Patients are now more interested in short procedures under local anesthesia and in an outpatient setting with low cost, low risk and fast recovery time. Double needle invisible thread a minimally invasive face lift procedure, is a good choice to achieve long-lasting, satisfactory results in selected patients with a sagging face position and a more v shape face appearance. The significance of this technique lies in the fact that it is one of very few office-based minimally invasive alternatives for aesthetic surgery, with a recovery period of two to three days.

PATIENTS AND METHODS:

The author successfully performed a minimally invasive invisible thread with the double needle technique in 158 carefully selected patients. Between September 2019 and April 2023, with a twelve-to-eighteen months follow-up. Patient ages ranged from 35 to 55 years. All of the patients elected not to undergo any aesthetic surgery but were requesting an improvement of their face lift and v shape.

RESULTS:

The results were satisfactory in all but 18 of the 158 cases based on patient satisfaction surveys. 12 patients did not find the result satisfactory and the procedure was repeated after 6 months. Five patients found the results inadequate and those patients underwent normal face lift surgery afterward. Double needle invisible thread a minimally invasive face lift procedure was also extraordinarily effective in young patients. The operation duration was under 30 minutes in all of the cases. Our longest follow-up was 12 months, during which we observed that the final outcome appeared after the third month and did not undergo any change afterward. We have not seen any complications related to the absorbable thread, such as palpability or visibility through the skin.

CONT...

Double Needle Thread Methods of the Ghost Lift Double Needle Invisible Thread Methods of Face Lifting Minimally Invasive Approach for Non-Surgical Face Lift

Conclusion:

Double needle invisible thread a minimally invasive face lift procedure described herein is one of very few minimally invasive alternatives for aesthetic SMAS face lift surgery. For selected patients, our method can be used as a simple, office-based procedure that can be performed under local anesthesia without any significant morbidity, a very high patient satisfaction, and a recovery period of only two to three days. The absorbable thread serves as an internal splint, and the permanent result is attributable to tissue fibrosis. The reversibility of the result, at least for a short period of time, is also appealing to patients who are uncertain about the outcome of SMAS face lift surgery.

BIOGRAPHY:

Dr Nejat Can, born in 1970 Urumqi, China. He graduated as a General Practitioner from Xinjiang University, People's Republic of China. He has also specialized in Cosmetic Surgery at Beijing Medical University and Xinjiang Medical School. He then completed his studies on practical Cosmetic Surgery and Medical Aesthetic Medicine in Taiwan, Thailand, South Korea, Singapore, France, Italy and Spain. In the Society of Aesthetic Medicine Singapore, he completed all his training on Face and Body Aesthetics with Organic Thread Lifting Threads on "All About THREADS". Dr Nejat Can is an Official Member of the American Academy of Aesthetic Medicine. Also completed Issued by the American Academy of Aesthetic Medicine: "Korean Advanced Facial & Body Techniques Master Class" "Fat Grafting Asia Master Class" "Facial Aesthetic Surgery Master Class".

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The soft Perineoplasty combined with volumetric correction of the Labia Majora

Dr. George Titovets MD, PhD

The St. Sophia International Institute of Beauty and Health, Cyprus

INTRODUCTION:

The goal of aesthetic gynecology, like aesthetic medicine in general, is to influence the patient's body, which:

- Normalizes the functional activity of the genitals
- Improves the aesthetic appearance
- Provides life satisfaction
- Creates a feeling of happiness

Patients in aesthetic gynecology are interested in obtaining the maximum effect in a short period of time and with a minimum rehabilitation time.

Clinical statistics confirm that after 40 years, almost all patients with the initial stages of genital prolapse and with incompetence of the posterior vaginal adhesion also have aesthetic problems of the labia majora:

- Increased pigmentation
- Loss of adipose tissue
- Sagging skin
- Fine wrinkles
- Large folds

METHODOLOGY:

For a comprehensive solution to these problems, I use the method soft threads perineoplasty combined with volumetric correction of the labia majora. For the procedure, we use P (LA/CL) barbed threads with specially designed needles to insert the threads. This is our author's technique, which provides strengthening of the muscles of the lower level of the small pelvis and also volumetric correction of the labia majora when the fat layer is reduced. The procedure, which lasts up to 60 minutes, is performed under local anesthesia.

RESULTS:

This procedure provides the opportunity to get:

- Fixation of the muscles of the lower level of the small pelvis:
- Fixation of the posterior vaginal adhesions
- Narrowing of the vaginal opening
- Tightening and narrowing of the genital gap
- Replenishment of the volume of the labia majora
- The formation of the original shape and appearance of the vulva
- Smoothing of folds and wrinkles of the skin of the labia majora
- Increasing the elasticity and turgor of the skin of the vulva area
- Lightening of the skin of the intimate area

CONT...

The soft Perineoplasty combined with volumetric correction of the Labia Majora

Few cases:

Before and after 1 month



As a result of these improvements, which recover quickly and have a long-term effect, our patients report:

- -Resumption of normal functions of the female genital area
- -Improvement of sexual sensations
- -Increased vitality
- -A feeling of happiness.

CONCLUSIONS:

Following my own medical experience in gynecology since 1985 has always been based on the main criteria:

- Minimal trauma
- Painless
- Fast procedure
- Fast recovery
- Significant and long-term result
- Complex solution

All these criteria are met by the method proposed by me. The procedure showed high results and reliability in 237 patients over 5 years, so it can be recommended for use in medical practice.

BIOGRAPHY:

Dr. George Titovets, MD, PhD, is a distinguished Obstetrician-Gynecologist and Medical Geneticist with expertise in Aesthetic and Anti-Ageing Medicine. He is a prolific author featured in leading medical publications and holds the position of Professor at St. Sophia International Institute of Beauty and Health in Nicosia, Cyprus. Dr. Titovets is also an International Certified Trainer in Thread Lifting and Intimate Aesthetics, an Honorary Professor at the Academic Union in Oxford, UK, and leads the Chair of Anti-Ageing and Aesthetic Medicine at the same institution. In addition, he serves as the European Medical Association (EMA) Representative to Cyprus and is a respected board member of the European Society of Preventive, Regenerative, and Anti-Aging Medicine (ESAAM).

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Penile Enlargement

Dr. Mykola Boiko

Clinic "Androcentr", Ukraine

The primary aim of intimate male surgery is to improve the genital aesthetic. In the last few years, the terms "Small penis syndrome" and "Penile dysmorphophobia" has been used in sexology to refer to a man's excessive concern about the size and/or shape of his completely-normal penis. For men the size of flaccid penis is much more important than the size of erected penis. The correction methods can be divided into invasive and non-invasive procedures. The psychological method involves convincing the patient to be happy with the size and shape of their penis as it is, instead of making it bigger. The stretching method involves using special devices such as the penis extender or penis pump. Intimate masculine surgery includes various modern, invasive techniques. There are various surgical and non-surgical methods for lengthening and thickening of the penis. More popular for lengthening penis is ligamentolysis with plastic of pubis skin to increase the penis girth, we use not only surgical techniques but also injection procedures. Injectable fat, poly-L-Lactic Acid (PLLA) and Hyaluronic Acid (HA) has been used for soft tissue augmentation for more than a decade in the world.

BIOGRAPHY:

Prof. Mykola Boiko Andrologist, Sexologist, Urologist, Aesthetic and Anti-Aging Practitioner and Male Genital Aesthetic and Plastic Surgeon, has 30 years' experience in Andrology, 15 years' experience in penile augmentation by surgical and nonsurgical methods. The President of the Ukrainian Association for Andrology and Sexual Medicine. Member of International and European Societies for Sexual Medicine (ISSM, ESSM). The author of 15 inventions, 9 monographs, textbooks.

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Stromal Vascular Fraction in wound healing

Dr. Christeen Youssef, MBBS, MD

Everlast Wellnes Medical Center, United Arab Emirates

BACKGROUND:

Stromal vascular fraction (SVF), derived enzymatically or mechanically from adipose tissue, contains a heterogeneous population of cells and stroma, including multipotent stem cells. The regenerative capacity of SVF may potentially be adapted for a broad range of clinical applications, including the healing of wounds.

OBJECTIVE:

To evaluate the available literature on the efficacy and safety of autologous adipose derived stromal vascular fraction (SVF) for the treatment of wounds in humans.

METHODS:

Human fat tissue is composed of mature adipocytes constituting about 90% of the tissue volume, and a stromal vascular fraction (SVF) including fibroblasts, endothelial cells, pre-adipocytes, vascular smooth muscle cells, lymphocytes, resident monocytes/macrophages, and adipose derived stem cells (ADSCs).

RESULTS:

(SVF) has demonstrated the presence of numerous growth factors that aid in tissue regeneration and suggest the potential for scar treatment. Adding stem cells can improve the surgical outcomes of scar formation. Many types of growth factors in SVF are involved in all three phases of wound healing and may affect the outcomes of cutaneous scarring. In the inflammatory phase, SVF reduces the levels of mast cells and myofibroblasts. In the proliferation phase, the differentiation of adipose-derived stem cells and numerous growth factors contained in SVF is favourable for wound healing. In the maturation phase, excessive synthesis is suppressed and remodelling of collagen is induced.

CONCLUSION:

The presence of key growth factors accelerates wound healing and is generally favourable for scar formation. SVF may be a useful treatment for acute cutaneous wounds in humans.

BIOGRAPHY:

Dr. Christeen Youssef is a respected Aesthetic and Dermatology Specialist known for her commitment to safe, evidence-based medical practice. She founded the Everlast Wellness Medical Center, is an Associate Professor of Dermatology, and an international speaker and trainer. Dr. Youssef is also an author and reviewer for international journals. She heads the Everlast Academy, focusing on Aesthetic Medicine education, and leads humanitarian outreach programs. Locally, she established the Everlast Foundation to support those with Facial Asymmetry.

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7th International Conference on Plastic, Aesthetics, Reconstructive & Cosmetic Surgery 09-10 November 2023 | Dubai, UAE

Stromal Vascular Fraction in wound healing

BIOGRAPHY:

A well-respected Aesthetic and Dermatology Specialist in the UAE and abroad, Dr. Christeen Youssef is an advocate of true clinical results through safe and scientifically proven medical practice. An innate leader and passionate mover, she founded Everlast Wellness Medical Center; a holistic community of wellbeing, anti-aging, Dermatology, Plastic Surgery and Aesthetics, and established an organization where Science serves beauty. She graduated with a degree of Bachelor of Medicine and Surgery and subsequently taken her Master of Science in Dermatology and Venereology from the reputable Zagazig University in Egypt.

Her dedication to Dermatology and Aesthetic Medicine continuously inspires young doctors as she shares her expertise as an Associate Professor of Dermatology in the same institution since 2005 till present.

She's a sought-after subject matter expert, an international trainer and an in-demand key note speaker that has been representing prestigious brands and esteemed organizations globally. An author and a clinical reviewer, she's published her works through many International Journals. All these and more while gracefully managing several scientific commitments for international conferences like WCD, EADV, IMCAS, ILDS, AMWC, and DASIL among others.

Being a well-known physician and an academician at the same time, she upholds to her core motivation of sharing her expertise and the industry's latest trends through Continuous Medical Education. This quest for competence is realized as she heads the critically acclaimed Everlast Academy; a center of excellence, multi-discipline school of Aesthetic Medicine.

A naturally empathetic physician, she furthers her practice outside the medical vicinity as she leads humanitarian outreach programs in Europe and Africa to extend genuine and selfless service to the less privileged. Locally, she has established the Everlast Foundation where they cater all kinds of Facial Asymmetry cases with the main goal of bringing back the confidence to its beneficiaries and promote a culture of beauty and beyond.

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DAY 2

Thursday, 10 November, 09am -5pm
Hall: Meeting Room -02

KEYNOTE PRESENTATION 1

09:30 - 10:00

Dr. Alain Tenenbaum

KEYNOTE PRESENTATION 2

11:30-12:30

Dr. Sachin Dev Sachdeva

Dr. Lars Rasmusson

Networking & Refreshment
break :

10:35 - 10:50 @ Foyer

WORKSHOP PRESENTATION

11:00-11:25

Dr. Alain Tenenbaum

SPEAKER PRESENTATIONS 1

Session: Maxillo Facial Surgery & Facial Plastic Surgery

10:00 -10:40

Dr. Marcia Maria Barros Moreira

Dr. Fabiano Arruda

SPEAKER PRESENTATIONS 2

12:30 -13:30

Dr. Regina Rodman

Dr. Laouar Yasmina

Dr. Rudhee Sehgal

SPEAKER PRESENTATIONS 3

14:20--17:00

Dr. Pedro C. Brandaon

Dr. Jie Ding

Dr. George Titovets

Dr. Federica Giuzio

Dr. Konstantinos P. Giotis

Dr. Fouad Reda

Dr. Zaman Ummay Humayra

17:00 - 17:10

Group Photo and Certificates
Distribution

17:10

End of Day 2 Program

Networking &
Refreshment break :
15:45 - 16:00 @ Foyer



DAY 2



10 NOVEMBER 2023 | DUBAI, UAE

KEYNOTE FORUM

PARCS 2023

Pectoroplasty by Chemical Myoplasty and Myopexy

Dr. Alain Tenenbaum, M.D.; PhD; D.Sc- Facial Plastic Surgeon

Inventor of Endopeel, Facial plastic surgeon, Switzerland

WHAT DELEGATES WILL LEARN/TAKE AWAY FROM THIS PRESENTATION:

Delegates will learn with safe techniques an alternative to surgery here proposed to reshape male body, giving more appearance to existing muscles or more projection to the hidden muscles.

Movies and/or live demo shown in this presentation will prove the scar less immediate chemical isovolumetric myoplasty applied to male or female pectoroplasty.

INTRODUCTION:

The immediate chemical and medical Pectoroplasty is a new weapon for dermatologists, plastic surgeons by using the techniques called Endopeel, which have like mechanism of action a myotension, an isovolumetric myoplasty and myopexy which duration does not exceed 6 months.

OBJECTIVES:

These techniques can be proposed to patients who wish to get a pectoroplasty, to patients who are not candidates for a surgical Pectoroplasty, to patients which refuse fillers (It is known that most fillers in this area look obvious and lead to many complications.), threads (more invasive, painful with less effects). The advantages of these techniques are important for the patients, because of

- the immediate effect,
- the absence of scar,
- the absence of down time,
- the absence of social eviction,
- as the transitory short time complications which are limited only to ecchymosis.

CONCLUSIONS:

Until now, the concept of Pectoroplasty was based only on volume augmentation concept, without taking care of the shape of the area. With Endopeel techniques one acts not only on the myotension by preserving the muscular mass and without affecting the muscular contraction but also on the myoplasty and the myopexy. With this fact the indications of the fillers become more restricted and will apply only to the depressions which remain after tissue tension of the selected area. Finally chemical pectoroplasty with a handing-over in tension of tissues with tightening effect like the Endopeel techniques give a better shape of the pectoral area, project a nice convexity of the new pectoral shape. The technique Endopeel is a new strategic weapon for the Dermatologists and Plastic Surgeons enabling them to complete and/or maintain a Pectoroplasty which is an alternative to the surgery.

cont...

Pectoroplasty by Chemical Myoplasty and Myopexy

Dr. Alain Tenenbaum, M.D.; PhD; D.Sc- Facial Plastic Surgeon

Inventor of Endopeel, Facial plastic surgeon, Switzerland

BIOGRAPHY:

Dr. Alain Tenenbaum is the President of Swiss Academy of Cosmetic Dermatology and Aesthetic Medicine and President of International Peeling Society. He is a specialist in (ENT) Oto Rhino Laryngology and Facial, Plastic, Reconstructive and Cosmetic Surgery. Also, he is an inventor of Endopeel and many other peelings like Peeling de Luxe. He is known as a worldwide trainer of Aesthetic Medicine and Cosmetic Dermatology. He is an expert in SEO- Search Engines Optimization, for Aesthetic Medicine, Anti-Aging Medicine, Cosmetic Dermatology and Aesthetic Plastic Surgery.

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Advancements in maxillo-facial surgery: Transforming lives

Dr. Sachin Dev Sachdeva

International Medical and Dental Centre, India

Maxillo-facial surgery, a dynamic branch of Surgery, serves as a beacon of hope for those facing craniofacial anomalies, traumatic injuries, Aesthetics and congenital deformities. Surgeons adeptly blend art and science, reshaping the face and jaw to not only restore function but also instil newfound confidence. From cleft lip repairs in infants to complex adult reconstructions, these skilled practitioners employ cutting-edge techniques like orthognathic surgery, dental implants, Facial Plastic Surgeries, Hair and tissue grafting. Remarkably, this transformative surgery not only mends physical disfigurements but also rekindles self-esteem and social integration. With each procedure, maxillo-facial surgery vividly illustrates its ability to rejuvenate lives, fostering both physical and emotional well-being.

BIOGRAPHY:

Prof. Dr. Sachin Dev Sachdeva, a renowned Cranio Maxillo Facial Surgeon and Implantologist with 20 years of experience, leads Speciality Aesthetics at Walk-In International Medical and Dental Centre, Delhi. He holds numerous impressive qualifications, including an MDS, MS, DNB, PhD, and various international distinctions. He specializes in Cranio Facial Surgery, Oral Surgery, Implantology, Hair Transplants, and Facial Aesthetics. He is also an Hon. Dean at Delhi Institute of Healthcare and Research, a Professor of Surgery at PDM University, and a PhD supervisor at SG University, India. He's a respected guest speaker at institutions like AIIMS and DMIMS and serves as HOD in the Dept of Facial Trauma and Reconstruction at Pushpanjali Trauma Center. Notably, he is a nominee for the prestigious PADMA SHREE AWARDS 2023 by the Government of India. His long list of accolades includes awards for mentorship, excellence in Head & Neck Oncology, and outstanding research contributions. He holds patents in the field of Implantology and has mentored over 1800 students while publishing over 200 scientific articles and authoring 14 books.

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Beyond Surgery First – Just Surgery! Aesthetic Considerations in Modern Orthognathic Surgery

Dr. Lars Rasmusson

The Sahlgrenska Academy, University of Gothenburg, Sweden

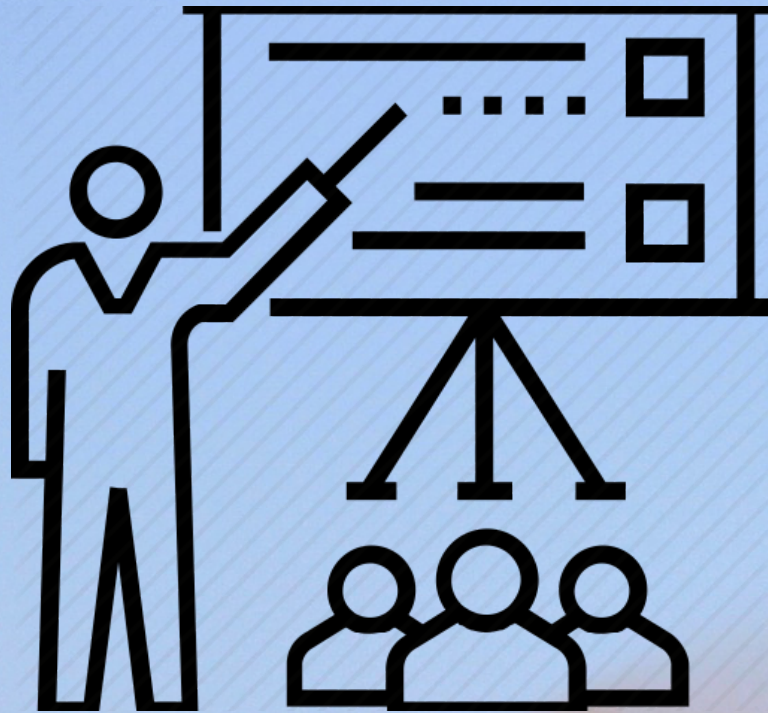
From a rather strict protocol in maxillary correction of dento-facial anomalies with a stepwise treatment including pre-surgical orthodontic therapy and surgery always starting in the maxilla, things are now being challenged. It started with “Mandible first” and moved on to “Surgery first” in selected cases. We have since a couple of years operated a number of cases without orthodontic treatment – to improve facial aesthetics as well as breathing and function. We call this “Just Surgery”. Preliminary data will be presented showing promising results regarding aesthetics, short over all treatment time and postoperative stability of the bone segments. But selection of cases is demanding and not all cases are suitable for this treatment protocol.

BIOGRAPHY:

Professor Lars Rasmusson has a medical degree from Barts and The London, School of Medicine and Dentistry, QMUL, London, UK. He has a PhD/Dr Med from the Faculty of Medicine, University of Gothenburg, Sweden. In 2007, he was appointed Professor of Maxillofacial Surgery and since 2008 he is Head of the Department of Oral and Maxillofacial Surgery, Sahlgrenska Academy, University of Gothenburg. He has published more than 100 papers and book chapters in the fields of oral and maxillofacial surgery and biomaterials. He holds an additional position as Consultant Maxillofacial Surgeon at the Sahlgrenska University Hospital in Gothenburg and the clinical work is concentrated to orthognathic and reconstructive surgery. Since 2019 he is also Adjunct Professor at the Maxillofacial Unit, Linköping University Hospital. He is a Fellow of the Swedish, the Scandinavian and the British Associations of Oral and Maxillofacial Surgery as well as the European Association of Cranio-maxillofacial Surgery and European Academy of Facial Plastic Surgery. He runs a private practice focusing on facial plastic surgery.

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DAY 2



10 NOVEMBER 2023 | DUBAI, UAE

WORKSHOP

PARCS 2023



Social Medias vs. App in 2023 Using SEO and AI in Plastic Surgery, Cosmetic Dermatology and Aesthetic Medicine

Dr. Alain Tenenbaum, M.D. PhD.

Inventor of Endopeel, Facial plastic surgeon, Switzerland

INTRODUCTION:

Artificial intelligence or AI begins to change the ways to use social medias, apps, websites and to adapt the SEO (Search Engine Optimization) for all kind of search engines, even in the fields of plastic surgery, cosmetic dermatology and aesthetic medicine.

BEFORE AI:

Physicians were used to make their advertisement on social medias like Instagram, Facebook, Tik Tok ...as most patients are used to search for information about procedures or their doctors on such social medias.

Unfortunately, most clinics as physicians doesn't have any websites and if they own a website, they didn't give any importance to the SEO.

Also, less than 1% of physicians or clinics own an app, even if it is the best way to increase the number of patients, to make them informed and to update information.

IS AI DANGEROUS?

AI can be a powerful tool in medical advertisement, but like any technology, it comes with potential risks and challenges. Here are some considerations regarding the potential dangers of using AI in medical advertising:

1. **Misleading Claims:** AI-generated content can inadvertently make false or exaggerated claims about medical products or services, leading to misinformation among consumers. This can be dangerous if patients are misled into believing certain treatments or medications are more effective than they actually are.
2. **Bias and Discrimination:** If AI algorithms are trained on biased data, they can perpetuate and amplify existing biases in medical advertising. This could lead to targeted advertising that is unfair or discriminatory, potentially excluding certain patient populations from accessing appropriate healthcare resources.
3. **Ethical Concerns:** The use of AI to target vulnerable populations or exploit people's health concerns purely for-profit motives raises ethical questions about the intentions and impacts of medical advertisements.
4. **Lack of Human Oversight:** Relying solely on AI systems to create and disseminate medical advertisements without human oversight could lead to the promotion of unverified or unsafe medical products or treatments.
5. **Regulatory Compliance:** Medical advertising is subject to strict regulations in many countries to protect consumers from false or misleading claims. AI-generated content might pose challenges in ensuring compliance with these regulations.

Cont...

Social Medias vs. App in 2023 Using SEO and AI in Plastic Surgery, Cosmetic Dermatology and Aesthetic Medicine

ADVERSE EFFECTS ON HEALTHCARE PROFESSIONALS:

Aggressive AI-driven medical advertisements might create unrealistic expectations in patients, leading to doctor-patient conflicts and dissatisfaction if the promised results are not achieved.

To mitigate these risks, it is essential to have proper regulations and guidelines in place for medical advertising that involves AI. Additionally, human oversight and involvement in the creation and approval of medical advertisements can help ensure accuracy, compliance, and ethical considerations are met. Transparency in disclosing the use of AI technology in advertising can also build trust with consumers and help them make informed decisions about their health

WORKSHOP:

It will be demonstrated in vivo how you can use SEO and AI at the same time for a website, insert it into an app and then share the information as best as possible in social medias. AI is useful

- To spell or correct the grammar of your text
- To transform your text (style will be different if you want your text professional, simple, elaborated, funny, formal, informal, enthusiastic). All those cases will be shown during the demonstration
- To create a new text
- To adapt your text for the SEO
- To rewrite your text for the social medias (text will be different for Facebook, Twitter, LinkedIn...)

BIOGRAPHY:

Dr. Alain Tenenbaum is the President of Swiss Academy of Cosmetic Dermatology and Aesthetic Medicine and President of International Peeling Society. He is a specialist in (ENT) Oto Rhino Laryngology and Facial, Plastic, Reconstructive and Cosmetic Surgery. Also, he is an inventor of Endopeel and many other peelings like Peeling de Luxe. He is known as a worldwide trainer of Aesthetic Medicine and Cosmetic Dermatology. He is an expert in SEO- Search Engines Optimization, for Aesthetic Medicine, Anti-Aging Medicine, Cosmetic Dermatology and Aesthetic Plastic Surgery.

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DAY 2



THE SPEAKERS PRESENT

SCIENTIFIC TRACKS

ABSTRACTS

10 NOVEMBER 2023 | Dubai, UAE

PARCS 2023

SESSION CHAIR

DR. ALAIN TENENBAUM

Inventor of Endopeel, Facial plastic surgeon, Switzerland

SESSION MODERATOR

DR. MOHAN THOMAS

Dr. Mohan Thomas Aesthetics, India

- **MARCIA MARIA BARROS MOREIRA**

LIPABDOMINOPLASTY WITH ANATOMICAL DEFINITION: FROM MARKING TO APPLICATION, ABOVE ALL PREVENTING COMPLICATIONS

Hospital de Base do Distrito Federal, Brazil

- **FABIANO ARRUDA**

LIPORENUVION - 200 HUNDRED CASES OF HELIUM PLASMA RADIOFREQUENCY TO BODY CONTOUR

Médico Cir. Plástica, Brazil

- **REGINA RODMAN**

THE SNATCHED JAWLINE: USING HELIUM PLASMA IN LOWER FACE CONTOURING

Face Forward Houston, USA

- **LAOUAR YASMINA**

TITLE: SEQUELAE OF FACIAL PARALYSIS BY ENDOPEEL TECHNIC

Nourcine Clinic, Algeria

- **RUDHEE SEHGAL**

TITLE: INJECTION LIPOLYSIS AND ITS ROLE IN NON SURGICAL FACE & BODY SCULPTING

Dy Patil University & Dr. Mohan Thomas Aesthetics, India

- **PEDRO C. BRANDAO**

STEM CELL USE IN RECONSTRUCTIVE PLASTIC SURGERY

Hospital de Base do Distrito Federal, Brazil

- **JIE DING**

CHARACTERISTICS OF SERUM EXOSOMES AFTER BURN INJURY AND DERMAL FIBROBLAST REGULATION BY EXOSOMES IN VITRO

University of Alberta, Canada

- **George Titovets**

"THE ALMOND EYES" - A MINIMALLY INVASIVE MIDDLE EASTERN STYLE EYES RESHAPING

The St. Sophia International Institute of Beauty and Health, Cyprus

- **Federica Giuzio**

SURGICAL TREATMENT OF UNDIFFERENTIATED SOFT TISSUE SARCOMA IN A YOUNG 17-YEAR-OLD WOMAN: A CASE REPORT

University of Basilicata, Italy

- **KONSTANTINOS P. GIOTIS**

TITLE: DHI VS FUE VS FUT

DHI Global Medical Group, Greece

- **Fouad Reda**

TITLE: NON SURGICAL LABIA PLASTY

Promoitalia Anti-Aging Clinic, Tajikistan

- **Zaman Ummay Humayra**

TITLE: SURGICAL OUTCOME OF MACROMASTIA AND GIGANTOMASTIA BREAST REDUCTION BY USING INFERIORPEDICLE TECHNIQUE

Ahsania Mission Cancer and General Hospital, Bangladesh

Lipoabdominoplasty with anatomical definition: From marking to application, above all preventing complications

Dr. Marcia Maria Barros Moreira

Hospital de Base do Distrito Federal, Brazil

The evolution of abdominoplasty remains constant. Currently, with the advancement of liposuction techniques, the concept of high definition liposuction aims to correct stigmas caused by the procedure, such as the "tight" appearance and the lack of natural abdominal convexities and concavities. The aim of this study is to collect a series of cases, highlighting some technical details and evaluating fundamentally different results to avoid complications such as necrosis, dehiscence, epigastric redundancy, high scar, navel malpositioning and seromas.

The technique demonstrated in 154 patients with satisfactory aesthetic results, obtaining a natural abdominal appearance through deep and superficial liposuction, in areas of abdominal shadows. The work proved to be safe from a vascular point of view, in addition to being easily reproducible as it uses conventional liposuction with a low rate of complications, low scarring, reduction in waist circumference and correction of the epigastrium.

BIOGRAPHY:

Dr. Marcia Maria Barros Moreira did Plastic Surgery residency at Ivo Pitanguy Institute in 2007. She is currently a Plastic Surgeon in Hospital Base do Distrito Federal. She has experience in aesthetic and reconstructive surgery. Member of the Brazilian Society of Plastic Surgery (SBCP), Member of the American Society of Plastic Surgery (ASPS), Member of the Brazilian Society of Tissue Regeneration (SBRET)

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Liporenuvion – 200 hundred cases of helium Plasma radiofrequency to body contour

Dr. Fabiano Calixto Fortes de Arruda

Médico Cir. Plástica, Brazil

INTRODUCTION:

Liposuction is the most performed plastic surgery in the world. According to ISAPS data, in 2018, 1,732,620 surgical procedures were performed worldwide while in 2021 1,903,065 liposuction were registered. In the USA, similar data with 270,670 procedures performed in 2019 and in Brazil and Colombia, liposuction was the most performed procedure, with 248,112 and 46,755 procedures, respectively (1, 2, 3). Despite this, the demand for less invasive procedures that can bring results even if inferior to surgery, has increased significantly throughout the world. With this, the development of innovative technologies that improve the physical aspects of patients has developed in the beauty market. In the most recent publications (3, 4, 5, 6) there is a suggestion that radiofrequency is a superior technology to acquire skin retraction by collagen contraction in a minimally invasive way. Within these new technologies, the radiofrequency associated with plasma helium energy (helium driven plasm energy) known as Renuvion, (APYX) presents a broad aspect of resolution in skin contraction in body contouring surgeries, with heating and collagen contraction of safely and intensely in an energy generated in fractions of a second. This study aims to describe the authors' experience with the use of radiofrequency helium plasma in body contouring.

MATERIALS:

Patients who underwent the use of radiofrequency helium plasma (Renuvion) during procedures such as liposuction in the areas of the arms, thighs, abdomen, back, buttocks and neck from July 2020 to July 2023 were studied. Patients who had sickle cell anemia, phospholipid antibody syndrome, BMI greater than 30, history of thromboembolism, lupus, heart disease, mental disorder and diabetics, use of VASER were excluded from this study. The data evaluated were: sex, age, type of procedure, associated technology, associated surgeries, areas in which the renuvion was applied, pre- and postoperative results evaluated by photo, degree of patient satisfaction, number of passes per area, types of technology-related complications, complications associated with other factors. Data were tabulated in Microsoft Excel and analyzed using the SSPS 21 program.

RESULTS:

The sexes, aged between 22 and 65 years About 200 patients were studied, being 91% female, with a mean age of 38 years, predominantly Fitzpatrick skin type type 3. Low comorbidities, the main one being hypothyroidism, the main surgeries prior to liposuction and the main surgery associated with mastopexy with breast implant. The most used areas were the abdomen and back, with patients achieving more than 40% retraction in 80% of cases. No serious complication related do helium plasma, as adverse events mainly a temporary reduction of sensibility and equimosis.

cont...

Liporenuvion – 200 hundred cases of helium Plasma radiofrequency to body contour

CONCLUSION:

The Helium plasma radiofrequency is safe and have a good use for solve flaccidity.

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BIOGRAPHY:

Dr. Fabiano Arruda is a highly accomplished plastic surgeon with a lifelong passion for medicine. He earned his medical degree from the Federal University of Goiás and pursued further specialization in General Surgery and Plastic Surgery at the Federal University of Uberlândia.

Committed to continuous improvement, Dr. Arruda honed his skills through international studies in Miami and Atlanta, working with top surgeons in the world. He holds a master's degree in Health Sciences, an MBA in Health Management and Auditing, and a doctorate in the same field.

Dr. Arruda practices Plastic Surgery in Goiânia and holds prominent positions in leading medical societies. He is an award-winning surgeon, recognized with the Antônio Pinheiro award at the Brazilian Congress of Plastic Surgery. With numerous publications and global lecture invitations, he contributes significantly to the field of plastic surgery.

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The snatched jawline: Using helium plasma in lower face contouring

Dr. Regina Rodman

Face Forward Houston, USA

Helium plasma radiofrequency devices for skin tightening have been a great advancement in surgical technology. The properties of helium are such that when energized to the plasma state the device is able to heat the tissue to a temperature promoting maximal contraction and also cool down very quickly. Both the heating and the cooling are done in a fraction of a second, making this technology safe and effective to use in the lower face and neck.

This presentation will discuss the use of helium plasma skin tightening in several capacities. It can be used alone for tightening of the lower face and neck, and techniques for best practice will be reviewed. This presentation will also present additional uses including, use conjunction with Vline surgery (jaw reduction), an adjunct with jaw implants. Finally the presenter will review her experience with use of the new micro handpiece, which has not yet been released to the public.

BIOGRAPHY:

Regina Rodman M.D. owns Face Forward Houston, a private facial plastics practice in Houston Texas, USA. She specializes in bony cosmetic work such as chin and jaw augmentation and reduction, forehead reduction, and facial feminization. She went to medical school at Rush University in Chicago, then otolaryngology residency which was completed at University of Texas Houston. She then went on to study facial plastic surgery and craniofacial surgery at SUNY Upstate in Syracuse New York. She combines her knowledge of aesthetic surgery and craniofacial surgery to perform a unique set of procedures that alter the facial skeleton to improve the balance and harmony of the face.

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Cleft lip in Yemen: A 13-years study

Dr. Mohammed H. Al-Saeedi

Kuwait University Hospital, Yemen

CLEFT LIP AND CLEFT PALATE:

Is a birth defect or congenital anomaly characterized by arrest of growth and faller of fuse of facial process between 5 and 11 weeks of gestation and give one or two split in the upper lip, gum and palate of baby?

CLEFT LIP AND PALATE (CLP):

Is the most common craniofacial birth defect and its etiology has been the focus of many reports in the literature. The cause of CLP is unknown, but possible causes are malnutrition and irradiation during pregnancy, psychological stress, teratogenic agents, infectious agents (viruses), and inheritance. Most clefts are likely caused by multiple genetic and non-genetic factors. Prosthetic reconstruction of the anterior maxilla is important for these patients look and psychological problems. The incidence of cases depends on geographical region and the socio-economic situation and frequency of incidence in the world is defined as 1/700.

Our Study Started from 01.12. 2001 and ended in 30.11.2013 in K.U.H is located in the capital of Yemen, in Sand'a. It is a University Hospital, and it is the one of referral hospital, during our study we was connected with 25 hospitals and medical centre in anther cities in Yemen. In our Study we make a research about the factors, region and severity of clef lip and cleft palate.

- We received 3941 patient in our hospital from all 356 hospitals in the country from 01.12.2001 until 30.11.2014
- We received 3941 patient in our hospital from all 356 hospitals in the country from 01.12.2001 until 30.11.2014

CONCLUSION:

We believe that most cases of cleft lip and cleft palate are caused by an interaction of genetic and environmental factors in all region of Yemen, but we discovered a Khat and Sea food in the East and West of Yemen are as definite cause. Due to remnants of radiation in the Sea in last 10 years we found high incident of congenital anomaly and cancer disease in the East and west of Yemen

BIOGRAPHY:

Dr. Mohammed Hamood Ali Al-Saeedi

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Title : Sequelae of facial paralysis by endopeel technic

Dr. Laouar Yasmina

Nourcine Clinic, Algeria

Endopeel is the latest trend in aesthetic treatment of the face and body , is an alternative to surgery, fillers, botulinum toxin and tensor threads and many machines. Endopeel method appeared to save humanity for the side effects of the Botulinum toxin. Phonic Acid is the active ingredient of Endopeel which provides a patented product that increases muscle Tone without affecting them by any paralysis and/or atrophy , and reduces sagging and wrinkles as a result of tension on the skin with no necrosis, no abscess. Endopeel consist of reshaping repositioning soft tissues by non-invasive methods, keeping same mass and same volume of such tissue before and after treatment. Endopeel is a bioregenerative cleans the DNA chain from oxidative factors.

In addition to what Endopeel offers in aesthetic treatment , it is greatly involved in pathological treatments , the most important of which is Sequelae of Facial paralysis , Endopeel gives immediate results and offers an appreciated social life to patients with these facial deformities, with a minimum duration of 6 months. The most important and great thing about the Endopeel technic is that it treats the paralyzed hemiface by increase the muscles tone and in some cases there are signs of nerve regeneration with many enhance the results of Endopeel treatments. In most cases it has been shown that by starting to treat the paralyzed side there is an improvement on the healthy side , this is the opposite of what other technics do (botulinum toxin) as it do not provide any treatment to the paralyzed side and it just relaxes unwanted muscles movements on the healthy side and reduces tension in area of the face, the worst is their association with hyaluronic acid (fillers) which only gives volume. Also tensor threads which do not act in the muscles and just try to balance the face by tightening the skin and do not give the expected results (the desired natural appearance) especially in the eye area.

Endopeel offers a significant advantage in treatment of sequelae of facial paralysis: the absence of risks(such as scars, necrosis, abscess), immediate results with more long time. Thanks to Endopeel , we can give back a social life to any patient affected with sequelae of facial paralysis without surgery after 30min.

BIOGRAPHY:

Dr. Yasmina Laouar is an Algerian aesthetic medicine doctor practicing in Mila at the Nourcine Clinic. Specializing in the treatment of sequelae of facial paralysis using the innovative Endopeel technique.

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Stem Cell Use in Reconstructive Plastic Surgery

Dr. Pedro C. Brandao

Moreira M.M.B.

Hospital de Base do Distrito Federal, Brazil

INTRODUCTION:

Complex wounds are in many ways challenging for the reconstructive surgeon and his team. In the last fifty years, many technological advances optimized treatment of these complex wounds but few actually focused on the real subjacent causes of unfavorable wound healing. Recent clinical trials and use of stem cells have shown promising outcomes and benefits in many wound phenotype treatments worldwide. Stem cell use efficacy is demonstrated by three main mechanisms: Tropism for inflamed tissues, positioning and differentiation into wound tissue cells and release of paracrine immunomodulatory and angiogenesis factors. In this study, the authors present a technique to safely collect and use mesenchymal stem cells from laser assisted liposuctioned fat tissue for complex wound treatment.

METHODOLOGY:

Information for this study was collected by literary reviews, patient interviews, surgeries and clinical outpatient care. A programmed routine of surgical interventions by the plastic surgery team and two support teams: One-S.T.E.P. laser equipment technicians and nurses to conduct negative pressure dressings after each procedure. Stem cell harvest was done by laser assisted liposuction, followed by fat centrifugation. After centrifugation, the mesenchymal stem cell phase is isolated and distributed by infusion in the wounded tissue. The residual centrifugated fat is then positioned in the wound's surface before applying negative pressure dressing which remains for seven days. After this period, the wound is reassessed and the plastic surgery team decides whether to repeat the process or apply a skin graft. In this case, new stem cell harvest is done and the mesenchymal stem cell phase is injected in the wound surface to be covered subsequently by autologous skin graft and negative pressure dressing. Final dressing removal is done in seven days with excellent graft integration and minimal scarring.

RESULTS:

Our experience using mesenchymal stem cells in complex wound treatment demonstrates how an organized, cost and time efficient procedure can improve scarring and patient downtime, compared to conventional wound treatments. We found significant reduction in complications such as infections, graft loss and scar hypertrophy.

cont...

Stem Cell Use in Reconstructive Plastic Surgery

CONCLUSIONS:

Stem cells are a fundamental aspect of tissue regeneration. Their use in wound healing has been an important object of study worldwide and brings optimism to patients otherwise subjected to conventional wound treatment. Recent studies show that new guidelines and treatments should follow key questions such as: what is the best stem cell population for improving wound healing and accelerating tissue regeneration? What are the most cost-effective, least morbid and most practical harvesting equipment and techniques? What is the ideal method to transport stem cells to the wound? In this study, the authors attempt to answer these important questions as it mirrors the optimistic clinical results of other clinical studies and also the difficulties to design larger scale randomized trials. The technique described has shown to be easily replicable, cost-effective and promotes improved healing time and minimal scarring complications.

BIOGRAPHY:

Dr Pedro C. Brandao is a Brazilian Board-Certified Plastic Surgeon (SBCP) and American Society of Plastic Surgery (ASPS) Member. Specialized in Aesthetic and Reconstructive Surgery, private practice, Senior Staff Member as a Plastic Surgeon of the Surgical Oncology Department in Brazilia's Federal District Base Hospital, one of Brazil's largest public hospitals.

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Characteristics of serum exosomes after burn injury and dermal fibroblast regulation by exosomes in vitro

Jie Ding 1

Yingying Pan¹, Shammy Raj², Lindy Schaffrick¹, Jolene Wong¹,
Antoinette Nguyen¹, Sharada Manchikanti¹, Larry Unsworth²,
Peter Kwan¹ and Edward Tredget¹

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BACKGROUND:

Exosomes (EXOs) have been considered a new target thought to be involved in and treat wound healing. More research is needed to fully understand EXO characteristics and the mechanisms of EXO-mediated wound healing, especially wound healing after burn injury.

METHODS:

All EXOs were isolated from 85 serum samples of 29 burn patients and 13 healthy individuals. We characterized the EXOs for morphology and density, serum concentration, protein level, marker expression, size distribution, and cytokine content. After a confirmation of EXO uptake by dermal fibroblasts, we also explored the functional regulation of primary human normal skin and hypertrophic scar fibroblast cell lines by the EXOs in vitro, including cell proliferation and apoptosis.

RESULTS:

EXOs dynamically changed their morphology, density, size, and cytokine level during wound healing in burn patients, which were correlated with burn severity and the stages of wound healing. EXOs both from burn patients and healthy individuals stimulated dermal fibroblast proliferation and apoptosis.

CONCLUSION:

EXO features may be important signals that influence wound healing after burn injury; however, to understand the mechanisms by which EXOs regulates the fibroblasts in healing wounds, further studies will be required.

Biography:

Dr. Jie Ding is a research scientist and works in the Wound Healing Research Group, Department of Surgery, Faculty of Medicine and Dentistry, University of Alberta. Dr. Ding's research focuses on the cellular and molecular mechanism of hypertrophic scarring after burn injury, and exploration of therapeutic approaches with 70 publications, including research articles, reviews, and book chapters. As a co-applicant, Dr. Ding participated in 15 research funding applications. Dr. Ding teaches Discovery Learning and Basic Surgical Skills courses, has supervised 34 students, including graduates, postdoctoral fellows, and internships at the University of Alberta. Dr Ding is a peer reviewer for 16 scientific journals.

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The Almond Eyes – a minimally invasive Middle Eastern Style Eyes Reshaping

Dr. George Titovets, MD, PhD

The St. Sophia International Institute of Beauty and Health, Cyprus

INTRODUCTION:

The eyes and the periorbital area in general are an important part of the appearance of the face and the overall image in particular.

One of the frequent aesthetic problems of this area are:

- Fallen and low-setting eyebrows,
- Sagging and excess skin of the upper eyelid,
- Down position outer corner of the eye.

All these changes create a look:

- Fatigue,
- Sadness,
- More age.

The purpose of aesthetic correction of the eyes and periorbital area is as follows:

- -Provide lifting of the soft tissues of the periorbital area in such a way as to provide a visual effect of a fresh look.
- -One of the minimally invasive methods used since about 2015 is the thread lift, in which the procedure was carried out: Lifting the lateral part of the upper eyelid due the straightening and lifting of the distal section and the tip of the eyebrow. This method was called "fox eyes" or "cat eyes".

However, as result of the procedure, the acute angle is formed between the eyebrow line and the long eye line. This "angle of aggression" creates the "predatory" facial expression and a guarded look. Therefore, our aim was to create a fundamentally new method for reshaping of the eye and periorbital area. We set a goal to create a new, aesthetically pleasing eyebrow lifting.

METHODOLOGY:

We have developed a new method of eyebrow lifting, which makes it possible to create:

The peaceful facial expression with the bewitching and attention grabbing look.

The main difference of our method is that we raise:

- -Lateral canthal angle of the eye
- -Upper eyelid
- -Middle and lateral part of the eyebrow, forming parallel lines (we call them – «lines of nobility») of the eyebrow and intercanthal line of the eye – which is fundamental to the Middle Eastern Style of eye shape.

The proposed method is based on the thread technologies of soft tissue lifting. It uses absorbable barbed P(LA/CA) threads. We named this eyes and eyebrows thread lifting – "almond eyes".

This procedure is performed:

- -In the treatment room;
- -By local anesthesia;
- -Within 1.5 – 2 hours.

cont...

The Almond Eyes - a minimally invasive Middle Eastern Style Eyes Reshaping

RESULTS:

We have carried out procedures and tested the duration of the lifting effect on many patients.

- -The age of our patients ranged from 22 to 68 years.
- -Any adverse reaction, side effects, complications didn't register.
- -According to our clinical cases, a significant effect lasts 2 - 2.5 years (we started using this approach 2.5 years ago).

CLINICAL CASE:

Before and After 1 month



Discussion:

People with a classic almond eye (which is also known as doe eyes) have a natural upward lift to the outer corner of their eye. The lift of the lower eyelid makes it appear longer than the upper eyelid and also allows the eye to look larger, more shaped and more open.

Conclusions:

Significant and long lasting result gives us the opportunity to:

- -Use this method in clinical practice;
- -To report about this method at the congresses of aesthetic medicine;
- To teach this method to doctors working with thread lifting technologies in aesthetic medicine.

BIOGRAPHY:

MD Obstetrician-Gynecologist, PhD, Certified Specialist on Medical Genetics, Aesthetic and Anti-Ageing Medicine, Author of many publications in leading professional medical magazines, Professor of St. Sophia International Institute of Beauty and Health, Nicosia, Cyprus International Certified Trainer on the Thread Lifting Methods and Intimate Aesthetics, Honorary Professor of the Academic Union, Oxford, UK', Head of the Chair of Anti-Ageing and Aesthetic Medicine, The Academic Union, Oxford, UK'.

Representative of the European Medical Association (EMA) to the Republic of Cyprus

Member of the board the European Society of Preventive, Regenerative and Anti-Aging Medicine (ESAAM)

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Surgical Treatment of Undifferentiated Soft Tissue Sarcoma in a Young 17-Year-Old Woman: A Case Report

Dr. Federica Giuzio

Bonomo Maria Grazia, Giuliani Antonio, Massariello Domenico Nicola, Salzano Giovanni, Saturnino Carmela and Brongo Sergio

University of Basilicata, Potenza, Italy

This case report describes the clinical case of a 17-year-old woman with an undifferentiated soft tissue sarcoma in the left supratrochanteric area. The young woman came for observation at our plastic surgery hospital with a large vascular mass visible on her left side which also made walking difficult. Our patient reports the onset of the mass about two months earlier and its growth very quickly. In this case report, we will analyze the demolitive and reconstructive surgical procedures in order to guarantee our patient radical surgery and the possibility of continuing radiotherapy and any specific chemotherapy to avoid the risk of relapse and metastasis over time.

BIOGRAPHY:

Dr Federica Giuzio has a degree in Industrial Pharmacy and Medicine and Surgery at the University of Bologna and Salerno. He obtained the second level Master's degree in Aesthetic Surgery at Humanitas University of Milano and the Master's degree in Breast Reconstructive Surgery at the Sapienza University of Rome. She is a PhD student at the University of Basilicata.

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7th International Conference on Plastic, Aesthetics, Reconstructive & Cosmetic Surgery 09-10 November 2023 | Dubai, UAE

DHI vs FUE vs FUT

Dr. Konstantinos P. Giotis

Vassia Birou

DHI Global Medical Group, Greece

Today, those who suffer from hair loss and have decided to proceed with a hair transplant, have three main options. FUT (Follicular Unit Transplant), FUE (Follicular Unit Extraction) and DHI Direct Hair Implantation techniques. These are the three different methods that show significant differences both in terms of the process and the result they offer.

Unlike the other methods, the DHI procedure does not involve scars, sutures, and treatment of the grafts while the implantation of the hair follicles is done one by one, directly from the donor to the recipient area.

DHI Direct Hair Implantation is the world's best hair transplant technique. It is powered by the triple synergy- technology, teamwork, and technique- and it is offered exclusively by DHI Global Medical Group.

BIOGRAPHY:

Konstantinos P. Giotis established the DHI Global Medical Group back in 1970, in Palo Alto California. His sole aim was to offer a pain less, scar free, minimally invasive hair restoration procedure, available to all and most important at an affordable cost. DHI has grown to become the world's largest Hair Restoration provider with more than 75 locations worldwide, having helped more than 250,000 male and female patients. K. P. Giotis has lectured in a series of European University, is the author of the book "Hair Loss – Balance your Options" and has received honorary award at the University of Athens.

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Non-Surgical LabiaPlasty

Dr. Fouad Reda

Prmoitalia Anti-Aging & Medical Center, Tajikistan

INTRODUCTION:

Intimate Aesthetic, NON surgical Labiaplast by plasma pen and vaginal Tightening.

METHODOLOGY:

New methods of non-surgical labiaplast using the plasma energy pen by coagulating the soft skin tissue.

RESULTS:

Results with reference in the presentation

CONCLUSIONS:

New NON-surgical Method of Aesthetic gynecology

BIOGRAPHY:

Lebanese Aesthetic plastic reconstructive and intimate surgeon, CEO of Promoitalia Anti-Aging Clinic in Tajikistan graduated from the VU University and medical Center of Amsterdam Holland.

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Surgical Outcome of Macromastia and Gigantomastia Breast Reduction by using Inferior Pedicle technique; an early experience

Dr. Zaman Ummay Humayra 1

Afrina Sharmin 2, Atiar Rahman 1

1 East West Medical College Hospital, Bangladesh

2 Z.H Shikder Women's Medical College and Hospital, Bangladesh

OBJECTIVE:

Breast hypertrophy is a rare medical condition of the breast connective tissues in which the breasts become excessively large. Various procedures have been described for reduction mammoplasty with specific skin incisions, patterns of breast parenchymal resection. Among various techniques, the inferior pedicle technique the blood supply to the nipple and areola remains generous, coming from the entire width of the inframammary fold. An unexpected benefit has been the excellent postoperative sensation of the nipple, areola, and the skin of the breasts.

MATERIALS & METHODS:

A retrospective observational study was conducted by the author at different private hospitals over a period from July 2019 to Jan 2022 with the patients who had reduction mammoplasty using inferior pedicle technique. All patients were examined and asked for late post-operative results and overall patients' satisfaction.

RESULTS:

The Age range of the patient was between 22 to 48 years. Patients show good satisfaction regarding breast symmetry, nipple symmetry and sensation, breast projection and contour of the breast.

CONCLUSION:

Inferior pedicle based breast reduction is a useful technique to reconstruct the inconveniently large breasts which can provide satisfactory anatomical outcome and a life changing experience for the patients.

BIOGRAPHY:

Dr. Zaman Ummay Humayra, a distinguished plastic and reconstructive surgeon, completed her fellowships in Japan and Bangladesh at a young age. She is an Associate Professor in the Department of Plastic & Reconstructive Surgery and works with various medical institutions, including Ahsania Mission Cancer Hospital. Dr. Humayra specializes in breast surgeries for both aesthetic and cancer patients, congenital anomalies, aesthetic procedures, and challenging wound coverage. She also serves as an editorial board member for national journals, contributing significantly to her field.

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Video Presentations

7th International Conference on
PLASTIC, AESTHETICS, RECONSTRUCTIVE &
COSMETIC SURGERY

NOV 10, 2023 | 13:20-14:00
MEETING ROOM -02

PARCS 2023



High SMAS Face Lifting

Dr. Jose Eduardo Lintz

Clinica Eduardo Lintz, Sao Paulo, Brazil

INTRODUCTION:

The author shows his experience on face treatment, emphasizing the SMAS treatment. The face lifting is one of the most common surgeries in the world. The author shows his experience on SMAS treatment and shows his systematization on HIGH SMAS facelifting. After more than 2400 patients submitted to face lifting at his clinic, Dr Lintz shows important details on SMAS and the advantages of HIGH SMAS technique. The Dr Lintz's preferred technique is the HIGH SMAS, that provides a total and natural face's treatment with long terms results even for thin faces. The satisfaction rate was higher among patients submitted to HIGH SMAS face lifting. The face lifting is one of the most common surgeries in the world. The surgical treatment of the face involves skin and SMAS (Superficial Muscle and Aponeurotic System) approach. Several techniques have been described on SMAS treatment, since plication, SMASectomy, dissection (HIGH SMAS) and deep plane.

METHODS:

The author shows his experience on face treatment, evaluating 2421 patients operated since 2001. Between 2001 and 2012, patients' thin faces the technique was SMAS plication. To patients with "intermediate" faces, the technique was SMASectomy and to thick patients, SMAS dissection. Since 2012, after high SMAS systematization, the author has been performing this technique to almost every patient, totalizing more than 1000 patients. The author shows his HIGH SMAS's systematization, the critical points, the tips and the anatomy. Furthermore, the author discusses the advantages of the technique.

RESULTS:

Since 2012, the author has performing the HIGH SMAS technique, obtaining effective, natural and predictable results. Even to thin patients, the HIGH SMAS (dissection) technique shows a very good repositioning of the tissues. The complications were similar to all surgical techniques performed by the author and the satisfaction rate was higher among patients who underwent HIGH SMAS facelifting.

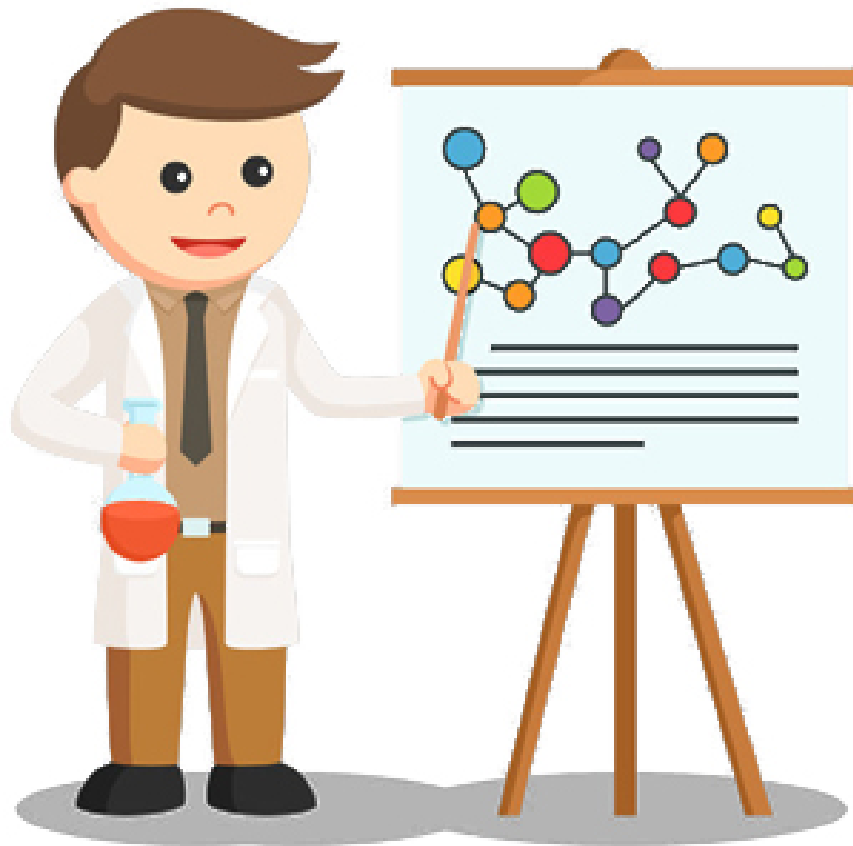
CONCLUSIONS:

After 2421 faceliftings performed, the HIGH SMAS has been showing effective, natural and predictable results. The satisfaction rate was higher among patients submitted to HIGH SMAS face lifting. With a very low rate of complications, and high satisfaction results, the HIGH SMAS facelifting is the author's preferred technique for the most of the patients.

BIOGRAPHY:

Dr Lintz has been graduated in Medicine in 1995, general surgery from 1996-1997 and Plastic Surgery from 1998-2001 at Pitanguy's Institute in Rio de Janeiro, Brazil. Assistant professor at Pitanguy's Institute from 2008-2019. President of aexpi (pitanguy alumni association), Brazilian society of plastic surgery, American society of plastic surgeons, International society of aesthetic plastic surgery, American society of aesthetic plastic surgery (the aesthetic society), Chief of plastic surgery service of the heart hospital (hcor-sp).

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Poster Presentations

November 10, 2023 | 14:00-14:20



MEETING ROOM -02

Hairline Advancement Surgery: pearls and pitfalls

Dr. Regina Rodman, M.D.

Face Forward Houston (private practice), USA

Hairline advancement is a surgical procedure to advance the hairline and shorten the vertical height of the forehead. Patients who seek this procedure generally have a hairline that is superior to the curve of the forehead, creating a disproportionally tall cutaneous forehead. This is not for hairline restoration. It is only for patients who have a stable hairline but wish to have it lowered to achieve cosmetic facial balance.

This surgery is essentially a large advancement flap, which is conceptually simple, but can be technically difficult. Advancing the scalp and closing the incision while minimizing alopecia and scarring requires careful attention to detail. In this session, I will share some pearls and pitfalls I have learned through experience over years of performing this procedure.

BIOGRAPHY:

Regina Rodman M.D. owns Face Forward Houston, a private facial plastics practice in Houston Texas, USA. She specializes in bony cosmetic work such as chin and jaw augmentation and reduction, forehead reduction, and facial feminization. She went to medical school at Rush University in Chicago, then otolaryngology residency which was completed at University of Texas Houston. She then went on to study facial plastic surgery and craniofacial surgery at SUNY Upstate in Syracuse New York. She combines her knowledge of aesthetic surgery and craniofacial surgery to perform a unique set of procedures that alter the facial skeleton to improve the balance and harmony of the face.

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TRIMANO – A Helping Hand for Upper Limb Surgery

Dr. Tarek Ashour

Manchester University Hospitals, UK

INTRODUCTION:

Working within the modern-day NHS presents many challenges to surgeons, not least staff shortages and reduced surgical training opportunities. These problems have been exacerbated by the COVID-19 pandemic. Finding solutions to these issues is essential to good patient care, and often those solutions can come from our colleagues in allied specialties. We work in the Orthoplastic department of a regional UK major trauma centre, and from observing our Orthopedic colleagues, present a novel use for the Trimano surgical support arm which has not previously been described. We discuss potential uses for this device in plastic surgery and demonstrate its use with a case.

EXAMPLE:

The TRIMANO Surgical Assist Arm Case Example: TRIMANO is a support arm which can be attached to any operative table and acts as a surgical assistant to hold the limb during surgery. The sterile device can be maneuvered peri-operatively to allow access to the limb through a wide range of positions. We used this device to perform skin grafting on a complex wound on the extensor aspect of the elbow. This is ordinarily a difficult site to access surgically and would normally require an assistant to hold the arm. Through using this device, the case was completed expediently as both surgeons were able to participate in the surgery without the need for an assistant, optimizing theatre time and training opportunities.

DISCUSSION:

There are many procedures across the breadth of plastic surgery which we suggest would benefit from use of the TRIMANO arm. We used this device to facilitate skin grafting of a difficult to access site but propose many upper limb procedures could benefit from its use. These include burn procedures, from initial excision and skin grafting to later revisional work, axillary surgery such as lymph node clearances, scar revisions and surgery for hidradenitis, aesthetic procedures including brachioplasty and upper limb liposuction, and nerve procedures such as nerve transfers and decompressions. In addition, the assist arm negates the need for a surgical assistant which can improve surgical training and theatre efficiency.

CONCLUSIONS:

We found the TRIMANO device to be a very useful adjunct for plastic surgical procedures in the upper limb and would recommend its use to colleagues. In addition to its functional applications, we suggest this device has potential to improve staffing issues and surgical training opportunities, as well as being a good example of how surgical practice can continually benefit from MDT working.

BIOGRAPHY:

Mr. Tarek Ashour graduated in 2003 and completed his Masters and MD degrees in Surgery and became a Member of the European Board of Plastic Reconstructive and Aesthetic Surgery in 2016. He was a member, now Fellow, of the Royal College of Surgeons since 2008. Had worked as Locum Consultant in Plastic Surgery in Oxford then in Manchester University hospitals where he is currently working. His main interest in Breast Reconstruction and Aesthetics, Hand Surgery, Lower Limb Trauma, and Skin Cancer.

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Treatment of Traumatic Tibial Pilon Deficiency with a Custom-made Titanium Implant using 3D Printing

Dr. Petr Šín

University Hospital Brno, Czech Republic

We present a case report of a 44 years old man who was suffered an open and segmental injury to the distal part of the lower leg due to the impact of tangential traumatic force after falling off a quad bike. There was complete loss of the ventromedial portion of the distal tibial epiphysis due to deep abrasion, involving the medial malleolus and anterior edge. Moreover, there was a luxation fracture of the posterior border of the tibia and a comminutive fracture of the fibular malleolus. The fractures were treated with a standard osteosynthesis method, but the challenge was to replace the missing portion of the inner ankle and deltoid ligament with the goal of preservation of the complete movement in the ankle joint. Considering the patient's age and existing expertise, we decided to construct the missing bone portion using a titanium replacement. In the initial phase of treatment, we created a form using 3D printing technology to create anatomical antibiotic impregnated cement "spacer". This was based on the CT data of the uninjured distal tibia with following software-based mirror rotation and subtracting the volume data of the uninjured part. The cement spacer was implanted into the defective space of the distal tibia, anatomically restoring its original shape. The spacer remained in place for 5 months, with the advantage of sanitation of the potential infection and also to induce membrane formation. This formation replaced both the missing joint capsule and the corresponding fiber ligaments in terms of strength.

There was another surgery after 5 months, where we replaced the temporary implanted spacer with the final 3D printed titanium "custom-made" implant. The joint side of the final implant structure was treated with a special DLC layer to reduce friction, whereas the side facing the bone featured a trabecular structure to enhance osteointegration. The titanium replacement was manufactured by ProSpon according to our obtained data and requirements to fully anatomically replace the missing bone part. To cover the exposed titanium implant together with the soft tissue defect 6x6 cm in size, we decided to close it with a free flap transfer. An immediate reconstruction was performed in one surgical procedure using serratus anterior muscle flap from the left side of the chest. Microsuture was performed on tibial posterior artery (end to side) and vein (end to end). Skin grafting of the surface of the flap was performed one week after the reconstruction which was followed by complete failure of the flap. There was second reconstruction performed two weeks later using serratus anterior muscle free flap from the right side of the chest. After that, there were no postoperative complications.

BIOGRAPHY:

Plastic surgeon, head doctor of Intensive Care Unit of Plastic Surgery, Department of Burns and Plastic Surgery, University Hospital, Brno, Czech Republic. She is focusing especially on microsurgery, reconstructive surgery, wound healing, pressure ulcers

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Analyses of pressure ulcer debridement methods: Macroscopic, histopathological, & oxidative stress assessments

Dr. Alica Hokynková

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INTRODUCTION:

Debridement of pressure ulcers (PUs) represents the first step of surgical therapy of this specific kind of wounds before their reconstruction. The aim of this surgical or nonsurgical procedure is to remove all avital tissue, to open the fistulas, tract and sinuses and also to spare the vital parts of the wound. Correctly performed technique can positively influence wound healing and lower the risk of postoperative complications. We focused on two different types of debridement in one PU using standardly performed sharp debridement (knife and scissors) and the nonsurgical waterjet in relationship to macroscopic, histopathological and oxidative stress assessments.

AIM:

The aim of our study was to evaluate, if there are any changes in macroscopic and microscopic picture and in oxidative stress parameters using sharp and water jet debridement in the same PU wound in 5 patients.

MATERIALS AND METHODS:

Five patients (3 men, 2 women) of average age 57.2 years (42–68) were included in this study. Inclusion criteria were spinal cord injury (para- or quadriplegia), pressure ulcer (ischial, sacral or trochanteric localisation) of size greater than 5x5cm, deep category of PU (category III or IV). All patients underwent surgical debridement on one half and waterjet debridement on the other half of the wound. Subsequent surgical reconstruction using flap plasty followed a week after the debridement. Macroscopic changes were analysed subjectively by experienced plastic surgeon. Blood and urine samples for examination of oxidative stress parameters were collected on the day of debridement and a week after the debridement, just before surgical reconstruction. Tissue samples were collected for histopathological analysis and for oxidative stress parameters assessment according to the same scheme.

RESULTS:

A pink granulation tissue in the wound area treated by waterjet was observed. In the wound area treated by sharp debridement, a grey-violet coloured granulation was observed. These findings indicate better wound healing assessed subjectively. There were no significant differences in histopathological examination between the tissues treated with different type of debridement. Parameters of oxidative stress showed no significant difference, too

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Analyses of pressure ulcer debridement methods: Macroscopic, histopathological, & oxidative stress assessments

DISCUSSION:

We observed a difference between subjectively assessed macroscopic changes and objectively measured oxidative stress parameters in the blood, urine and tissue and also in histopathological examination of the tissue samples. The discrepancy between macroscopic and microscopic picture can be caused by sample collection technique – different depth of removed sample or different distance from the centre and edge of the PU. Another reason might be small number of patients included, that is considered as limitation of our study.

CONCLUSION:

We observed no significant objectively measured signs of positive impact on wound healing of PUs using different types of debridement. However, subjective evaluation by surgeon decided in favour of the waterjet debridement.

BIOGRAPHY:

Dr. Alica Hokynková, born on January 15, 1981, in Skalica, Slovak Republic, is an accomplished medical practitioner. She holds a Ph.D. in Surgery, specializing in wound healing, and an MBA in Healthcare Management. Currently, she serves as the head doctor of the Intensive Care Unit of Plastic Surgery at the University Hospital Brno, Czech Republic. Dr. Hokynková's diverse career includes teaching medical students, grant research on oxidative stress in pressure ulcer healing, and a rich publication history.

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Nerve block for pain management in pediatrics undergoing cleft lip and palate repair: a systematic review and network meta-analysis

Dr. Razan Abbas Albrahim

Princess Noura Bin Abdulrahman University, Saudi Arabia

BACKGROUND:

Cleft lip and palate, a common congenital anomaly, occur in approximately 0.1 or 2.3 in every 1000 newborns. Effective postoperative pain management in pediatric patients undergoing repair for cleft lip and palate remains a challenge. Therefore, this systematic review and network meta-analysis aims to assess the effectiveness of nerve block in controlling postoperative pain compared to other methods in pediatric patients undergoing cleft lip and palate repair.

METHODS:

This review adhered to the Preferred Reporting Items for Systematic Reviews and Meta-analysis (PRISMA) guidelines. A comprehensive search was conducted across multiple databases, including Embase, MEDLINE, Cochrane, and SCOPUS, without time frame limitation.

RESULTS:

The findings of the study indicate that dexmedetomidine achieved the longest duration of nerve block at 89.98%. This was followed by fentanyl (64.12%) and pethidine (51.62%), which also demonstrated significant durations of nerve block. Clonidine exhibited a moderate rate of nerve block at 29.62%. In contrast, the control group exhibited the lowest rate of block at 14.65%.

CONCLUSION:

This study supports the efficacy and safety of nerve blocks, particularly with dexmedetomidine, for postoperative pain management in pediatric cleft lip and palate repair. Adjuvant-enhanced nerve blocks offer extended pain relief and reduce reliance on opioids.

BIOGRAPHY:

Razan Albrahim, currently a medical intern from Princess Noura Bin Abdulrahman University who is passionate about Plastic and reconstructive surgery. She is currently completing her internship year, where she is learning surgical techniques, patient care and professionalism. She is also enthusiastic in scholarly pursuits and is looking for opportunities to initiate new projects and conduct research.

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Surgical Lip Repositioning for Reduction of Excessive Gingival Display and Improving Smile Esthetics

Dr. Armen E. Harutyunyan

Gagik Hakobyan

Yerevan State Medical University after M. Heratsi, Armenia

INTRODUCTION:

A smile is an important non-verbal method of communication and is an interaction between the teeth, the lip framework, and the gingival scaffold. When an excessive amount of gingiva is visible while smiling, this condition is commonly referred to as a "Gummy Smile". Excessive display of the gums, negatively affects the aesthetics of the smile. A normal gingival display between the inferior border of the upper lip and the gingival margin of the anterior central incisors during a normal smile is 1-2 mm. In contrast, an excessive gingiva to lip distance of 4 mm or more classified as "unattractive" by lay people and general dentists. The etiology of gummy smile includes gingival (altered passive eruption), skeletal (vertical maxillary excess) and muscle (upper lip hyperfunction) characteristics and therefore it is very important for the choice of treatment to establish the etiology. There are different methods of treatment, surgical or non-surgical, the choice of the methods used requires the collection of data, identification of the underlying causes. The treatment modalities range from orthodontic intrusion alone through complex treatments involving orthognathic surgery, orthodontics, restorative components and periodontal plastic surgery. Lip repositioning is suggested as an additional treatment modality for patients with excessive gingival display caused by degree I vertical maxillary excess (VME) combined with hypermobile upper lip (HUL). The current report presents the results of treatment of 48 patients with a gingival smile who underwent lip repositioning surgery to reduce the visibility of the gingiva and correct its asymmetry, using a simple surgical approach, with good stability over time.

OBJECTIVE:

The objective of this study is to minimize gingival display by surgical repositioning of the upper lip aimed at limiting the activity of the elevator muscles, and to suggest this technique as an alternative treatment modality to orthognathic surgery for treatment of excessive gingival display caused by degree I vertical maxillary excess combined with hypermobility of upper lip.

METHODOLOGY:

52 patients were selected with gingival display of more than 2 mm during maximal smiling. All patients underwent surgical reposition of the upper lip, aimed at limiting elevator muscle activity to treat excessive gum exposure. Patients were recalled after one week for a follow up postoperative symptoms. The degree of post operative pain and swelling according to VAS scale.

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Surgical Lip Repositioning for Reduction of Excessive Gingival Display and Improving Smile Esthetics

RESULTS:

Study indicates good results and their stability especially in patients with skeletal class I classification along with medium and thick biotype of attached gingiva without hypermobile upper lip. Almost all patients have been reported slight to mild pain after 1st week of surgery and one patient have been reported severe pain (according to the VAS pain level after surgery was 3 points). Almost all patients have been reported no pain after 2nd week of surgery.

CONCLUSIONS:

Surgical repositioning of the upper lip is an effective way to improve a patient's gingival smile caused by grade I and II VME in combination with HUL as an alternative treatment for orthognathic surgery because it is less invasive, with minimal complication rates, cost-effective, and provides faster results than orthognathic surgery.

BIOGRAPHY:

Armen E. Harutyunyan is a Plastic Surgeon at Astkhik Medical Center, Department of Oral and Maxillofacial Surgery, Yerevan State Medical University after M. Heratsi, Armenia. He did his Clinical Residency in Maxillofacial Surgery at Municipal Hospital. He has 4 scientific articles in international medical journals to his credit.

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INDEX



Page	Name
3	Alain Tenenbaum
32	Alain Tenenbaum
37	Alain Tenenbaum
62	Alica Hokynková
66	Armen E. Harutyunyan
20	Ashish Kumar Singh
6	Bellity Philippe
28	Christeen Youssef
16	Fabiano Arruda
42	Fabiano Arruda
5	Fayez El-Deeb
52	Federica Giuzio
54	Fouad Reda
25	George Titovets
50	George Titovets
10	Harleen Oberoi
21	Hussein Mohamed Ghanem
49	Jie Ding
57	Jose Eduardo Lintz
53	Konstantinos P. Giotis

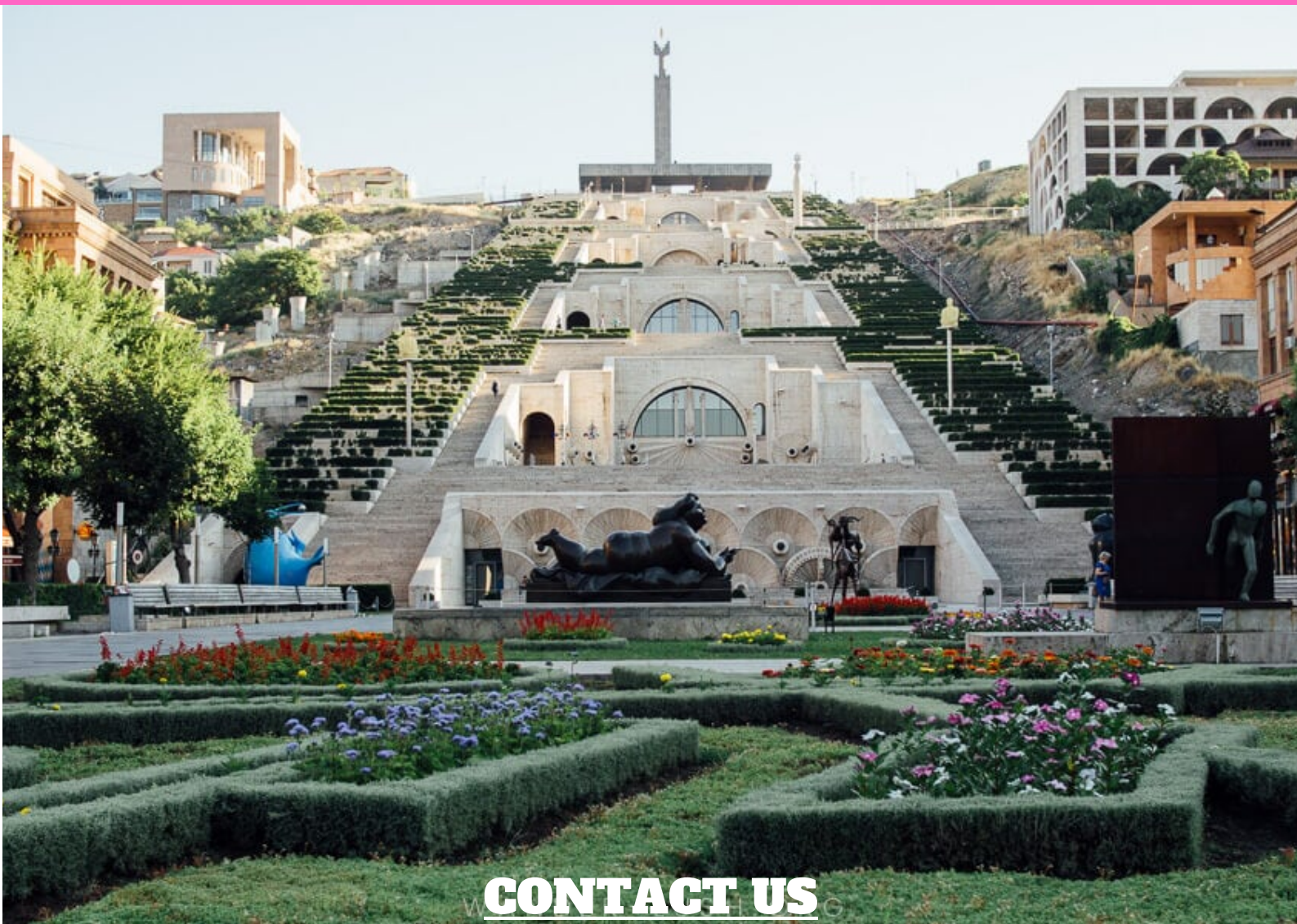
Page	Name
35	Lars Rasmusson
46	Laouar Yasmina
41	Marcia Maria Barros Moreira
15	Mohammed Faisal Ebrahim Kahawash
45	Mohammed H. Al-Saeedi
5	Mohan Thomas
8	Mohan Thomas
27	Mykola Boiko
23	Nejat Can
13	Norayr Mikayelyan
47	Pedro C. Brandao
61	Petr Šín
19	Preetinder Kaur
64	Razan Abbas Albrahim
18	Regina Rodman
44	Regina Rodman
59	Regina Rodman
34	Sachin Dev Sachdeva
60	Tarek Ashour
55	Zaman Ummay Humayra

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