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## Presentation IPL-Sq®

VYDENCE CONTINUING MEDICAL EDUCATION Program

Prepared by Clarissa Bravin, Renata Novais reviewed and approved by Antonio Olivatto

proprietary and confidential

see more at:

LASER ACADEMY tv



## ETHEREA-MX® PLATFORM

### LEADER IN THE WORLD'S SECOND-LARGEST AESTHETICS MARKET



- Maximum versatility;
- LASER and light technologies;
- 70+ treatment indications;
- LASER for all types of skin;
- Always with new technologies;
- Greater profitability and return;
- Compact design that is easy to transport;
- Reliable: second-generation platforms;
- Powerful and with proven results;
- Easily changeable handpieces, plugand-play;
- Dual voltage, with no need for a voltage stabilizer;
- International standard, FDA approved;
- Sold in nearly 20 countries.

## ProDeep® Nd:YAP 1340 nm For deep epidermal nonablative fractional LASER treatments





# GoSmooth® Er:GLASS 1540 nm Gold standard technology for nonablative LASER skin resurfacing



LongPulse®
Nd:YAG 1064 nm
Nd:YAG LASER with
variable pulse modes.

#### ACROMA-QS® Nd:YAG 1064/532 nm Dual-wavelength

Dual-wavelength Fractional Q-switched LASER with optional fractional spot.









IPL-Sq®
Intense Pulsed Light
Square-Wave Pulse
Technology and all-inone available cut-off

## ATHENA® DualMode® Accessory intimate LASER treatment for women's health and wellness.







intensel®
Infrared Light
Hi-powered IR light
for skin tightening
of the body and face.

\$\*etherea\*\* | Z Y E



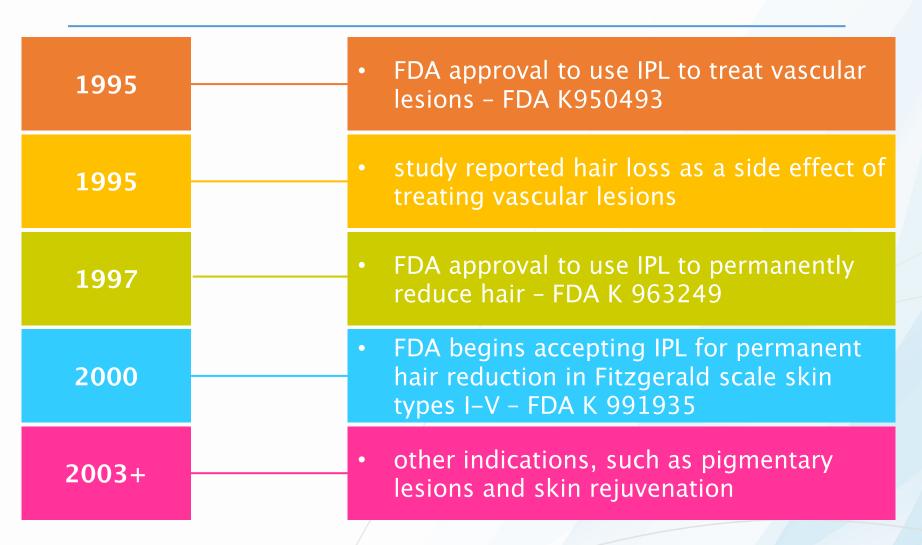
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about LASERs and light: science and technology





### **TIMELINE**





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### **ADVANTAGES OF THE TECHNOLOGY**



- Highly flexible system: for treating various indications with a single device
- Effective: the results are good, similar to some applications of laser;
- Safe: proven by hundreds of scientific articles and years of clinical practice.





#### **ACTION MECHANISM**



- IPL is a **flashing light**, where part is reflected on the surface of the skin and another part penetrates the skin;
- The light is converged on the target, producing a temperature increase of around 70°C;
- By conduction, these targets
   transfer the heat to the adjacent
   cells, including the papilla and the
   bulb, resulting in the
   denaturation of the target of the
   treatment;
- + Photochemical interaction

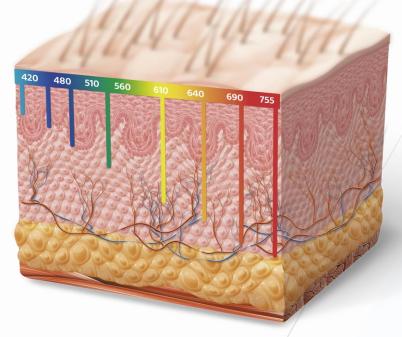




#### WAVELENGTH



Light spectrum in nanometers (nm)



- Through a prism, light is separated into a broad spectrum;
- Excluding UV radiation, the lamp's output consists of visible and infrared light with a wavelength of 400 to 1200 nm;

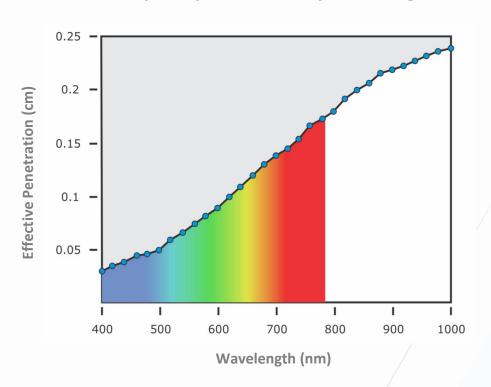
COLOR	λ
Violet	380 to 440 nm
Blue	440 to 490 nm
Green	490 to 565 nm
Yellow	565 to 590 nm
Orange	590 to 630 nm
Red	630 to 780 nm





### WAVELENGTH AND DEPTH OF ACTION

#### **Graph of penetration by wavelength**

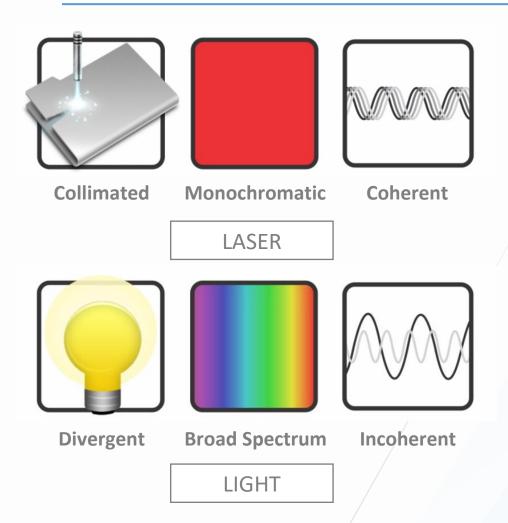


In IPL's spectrum, **penetration is proportional to the wavelength** less affinity for water vs. melanin;





#### DIFFERENCES BETWEEN LASER AND LIGHT



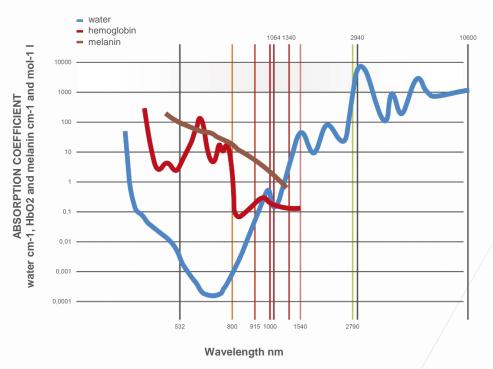
### Intensive pulsating light

- Multiple applications and indications as a function of the broad spectrum;
- Restricted to the surface of the tissue as a function of the divergent and incoherent beam.





#### TARGET CHROMOPHORE AND ABSORPTION CURVE



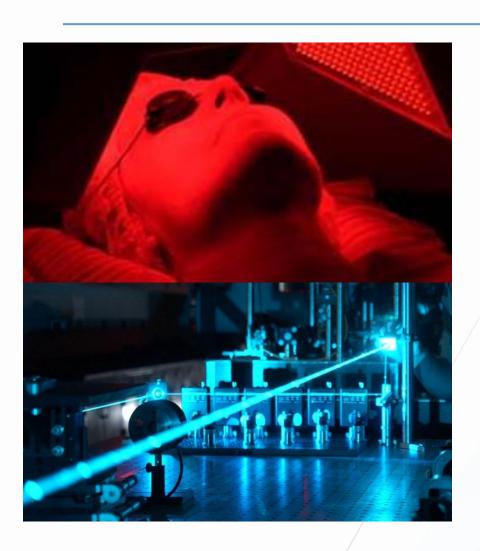
- Relationship of target chromophore and absorption curve as a function of wavelength;
- Different wavelengths, different target chromophores;
- IPL target chromophores: water, hbo, melanin, endogenous porphyrin (p. acne);
- Able to absorb luminous energy;
- They treat certain structures: hair follicles, pigmentary lesions, vascular lesions.



<sup>\*</sup>Manstein et al. FRACTIONAL PHOTTHERMOLYSIS: A NEW CONCEPT FOR CUTANEOUS REMODELING USING MICROSCOPIC PATTERS OF THERMAL INJURY. LASERS Surg Med 2004;34:426-38.

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#### INTERACTION WITH TISSUE



- Photochemical: biostimulation,
   PDT and tissue fluorescence,
   achieved through low-power
   LASERs and LEDs;
- Photothermal:
   photothermolysis, vaporization
   and tissue coagulation, achieved
   through LASERs and IPL
   equipment;
- Photomechanical: disruption (through shockwaves), achieved with q-switched LASERs.





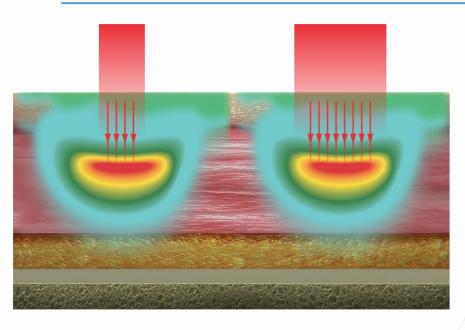
### **TARGET CHROMOPHORE**

INDICATION	TARGET CHROMOPHORE	FILTER
HAIR REMOVAL	Melanin	580 nm 640 nm 695 nm
PIGMENTED LESIONS	Melanin	515 nm 540 nm 580 nm
VASCULAR LESIONS AND RECENT SCARS	Hemoglobin	515 nm 540 nm 580 nm
ACNE VULGARIS	Endogenous porphyrin (p. acne) + Photobiostimulation	400 nm 640 nm 695 nm





#### **PULSE TIME**



THERMAL SELECTIVITY IS ACHIEVED THROUGH THE DIFFERENCE BETWEEN THE THERMAL CAPACITY AND THE THERMAL RELAXATION TIME (TRT).

- Pulse time is the time necessary to deliver the fluence or selected energy, measured in milliseconds (ms) in the case of IPL;
- It must be less than the TRT for there to be the correct photothermal process in the target chromophore;
- TRT: between the epidermis and between the different targets of the treatment;
- Time for the dissipation of 50% of the heat absorbed by the tissue or target chromophore.





### THERMAL RELAXATION TIME

AREA	SIZE μm	TRT ms
EPIDERMIS	_	08 – 10
MELANOSOME	1	0.2 μs
VESSELS	100	10
HAIR FOLLICLE	150 - 300	10 - 60



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### FITZPATRICK SCALE



- Type I White Always burns, never tans
- Type II White Usually burns, tans with difficulty
- **Type III** White Sometimes burns, tans well
- Type IV Olive Rarely burns, tans easily
- Type V Brown Very rarely burns, tans easily
- Type VI Dark brown Never burns, tans very easily



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IPL-Sq<sup>®</sup>: features & technology





### **TECHNICAL CHARACTERISTICS**



	IPL-SQ
Wavelength	400 to 1.200nm
Maximum energy	33 J/cm2
Pulse time	5 to 100 ms
Operating frequency	up to 2 Hz
Filters	400 580 515 640 540 695
Vascutips	40 x 12 mm 12x12 mm Ø 8 mm





IPL-Sq® DIFFERENTIALS

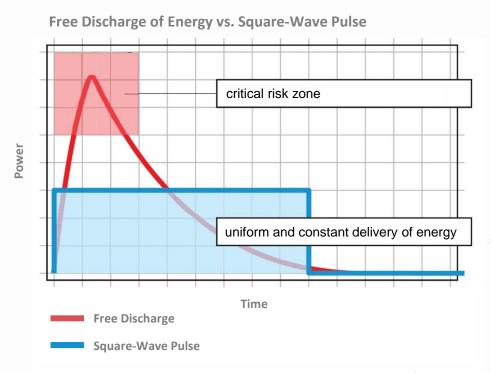


- All-in-one system: one handpiece, with multiple plugand-play cutting filters;
- Exclusive 695 nm filter for darker skin tones;
- Pulses from 5 to 100 ms, which offer aggressiveness when necessary and safety when needed;
- Versatility unmatched on the market, maximizing the technology's potential indications.





### SQUARE-WAVE PULSE



- Delivery of energy in Squarewave pulse®, optimizing safety and amplifying results;
- With the Square-wave pulse®, the amounts are constant, with a calculated and controlled discharge, ensuring uniform distribution of energy during the entire pulse;
- With free discharge, there is a higher risk of adverse side effects because the peak temperature reached is far higher than what is actually necessary.

DEPTH OF PENETRATION AS A FUNCTION OF A LASER WAVELENGTH. Nelson et al. 2002



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#### **CONTACT BY SAPPHIRE**



- Sapphire more efficient cooling compared to other materials;
- Cooling of up to 5°C on Etherea
- Protects the epidermis against possible collateral damage from the treatment;
- Mild anesthetic effect, reducing patient discomfort during the treatment;
- Allows the use of higher fluence to obtain bigger and better results.



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### **CONTACT BY SAPPHIRE**



- Broad coverage area, with 40 x 12 mm (4.8 cm²) for treatments with a lower number of shots, resulting in faster and more profitable sessions;
- Exclusive Vascutips® with Ø 8 mm and 12 x 12 mm for localized lesions;
- Repetition rate of up to 2 Hz on Etherea, offering much faster treatments.



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### **CONTACT BY SAPPHIRE**



- When using VASCUTIPS, it could be necessary to increase fluence by around 1-2 J/cm2;
- The cooling of the Vascutips is done by the physical contact of the Sapphire with the Sapphire Crystal (round or square);
- It is therefore necessary to check the efficacy of cooling every three shots;
- If the cooling effect is not noted, contact Customer Service and do not use it in the procedure.



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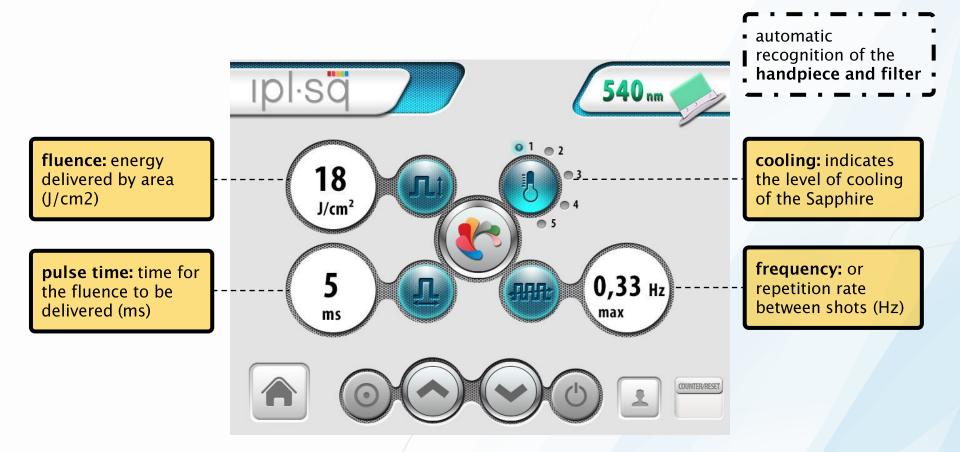
IPL-SQ®: interface and parameterization



### INTERFACE AND PARAMETERIZATION



ETHEREA-MX® INTERFACE





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IPL-SQ®: practice and training





### **QUICK REFERENCE GUIDE**





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#### **INDICATIONS**



- Various pigmented lesions;
- Vascular lesions on the face, neck and chest (superficial);
- Hair removal for lighter skin tones;
- Other indications: acne vulgaris, recent scars and stretch marks.



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### **CLINICAL GUIDE - PIGMENTED LESIONS**

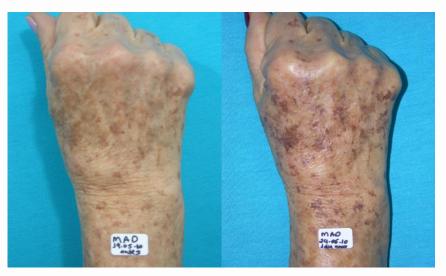


- Freckles
- Café au lait spots
- Infraorbital hyperpigmentation
- Post inflammatory hyperpigmentation





### **CLINICAL GUIDE - PIGMENTED LESIONS**



**Photo: VYDENCE C Training Center** 

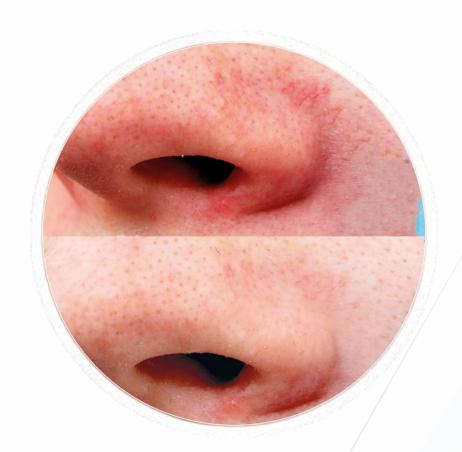
The endpoint: light erythema of the lesion, without visible alteration in the surrounding tissue. There can also be darkening of the lesion after a few minutes (photo).

USAGE	USAGE PARAMETERS	
Filter	515 or 540: clear and/or superficial lesions 580: dark and/or deep lesions	
Fluence:	10 to 19 J/cm <sup>2</sup>	
Pulse time:	10 to 20 ms	
Sessions:	2 to 4	
Interval:	20 to 30 days	



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### **CLINICAL GUIDE - VASCULAR LESIONS**



- Rosacea
- Telangiectasia
- Poikiloderma of Civatte
- Angiomas
- Spider veins
- Hemangioma
- Port wine stains
- Recent scars





### **CLINICAL GUIDE - VASCULAR LESIONS**



The endpoint: erythema of the lesion without visible alteration in the adjacent tissue, collapse of the vessel or changing its color (gray, blue, purple).

USAGE PARAMETERS	
Filter	515 or 540: superficial lesions 580: deep lesions
Fluence:	13 to 26 J/cm <sup>2</sup>
Pulse time:	10 to 40 ms
Sessions:	2 to 4
Interval:	30 to 40 days





#### **CLINICAL GUIDE - VASCULAR LESIONS**

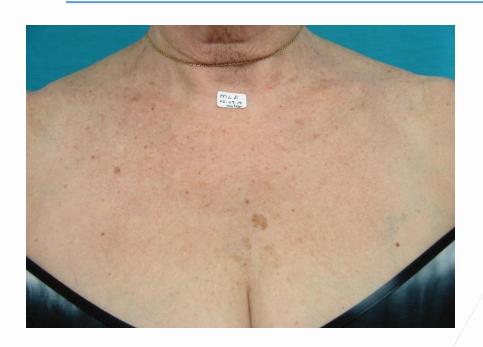
### Some precautions:

- Do not put pressure on the vessels before and during the shot because this can result in the dispersion of blood and consequent ineffectiveness of the treatment;
- Do not treat vascular lesions overlaid by pigmentary lesions and/or hair;
- Intensive Pulsating Light is indicated only for superficial vascular lesions on the face and trunk - it is not effective on the legs because of the depth of the lesions;
- Fluence and the pulse time must be adjusted according to the caliber of the vessel and the patient's skin type.



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#### CLINICAL GUIDE - POIKILODERMA OF CIVATTE



In treating poikiloderma of Civatte, filters can be associated in a single session for:

- Neocollagenosis (640 or 695).
   Part of the visible improvement of the vessels is due to the deposit of collagen in the area;
- Pigmentary and vascular lesions (540 or 580). If the pigmentary lesions are dark, it is necessary to first use parameters for these lesions and, only after they lighten, begin treatment for the vascular conditions.





### CLINICAL GUIDE - POIKILODERMA OF CIVATTE



	USAGE PARAMETERS	
	Filter	540 or 580
	Fluence:	14 to 20 J/cm <sup>2</sup>
/	Pulse time:	15 to 20 ms
	Sessions:	3 to 4
1	Interval:	30 to 40 days





### CLINICAL GUIDE - HAIR REMOVAL



- Safe hair removal for
   Fitzpatrick scale skin tones I–
   IV;
- Effective even on fine hair;
- More comfortable with the Sapphire cooling system.





#### **CLINICAL GUIDE - HAIR REMOVAL**



USAGE PARAMETERS		
Filter	580: light or fine hair 640: normal hair 695: thick hair or Fitzpatrick scale skin types IV and V	
Fluence:	10 to 22 J/cm <sup>2</sup>	
Pulse time:	20 to 100 ms	
Sessions:	4 to 8	
Interval:	30 to 60 days	





#### **CLINICAL GUIDE - ACNE VULGARIS**



USAGE PARAMETERS		
Filter	695 / 640: inflammatory 400: pustular	
Fluence:	6 to 18 J/cm <sup>2</sup>	
Pulse time:	30 to 100 ms	
Sessions:	4 to 6	
Interval:	7 to 14 days	





#### **CLINICAL GUIDE**

CONTRAINDICATIONS	PRETREATMENT	POSTTREATMENT
Pay attention to skin tones and patients with tans!	<ul> <li>Avoid exposure to the sun 30 days before the session;</li> <li>For hair removal, the hair must be short (shave with a razor on the same day or the previous day);</li> <li>Remove creams and/or lotions before the application;</li> <li>Avoid overlapping the shots.</li> </ul>	<ul> <li>Advise using sunscreen and avoiding exposure to the sun during the entire treatment;</li> <li>If there are small "scabs" after the treatment of pigmentary lesions, instruct the patient not to remove them, thereby avoiding hypochromia.</li> </ul>



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#### AREAS OTHER THAN THE FACE



- Lower number of hair follicles than on the face;
- The healing process is considerably slower;
- If possible, treat using the Dynamics Mode
- Always use maximum cooling;
- Fluence: decrease around 10– 15% in relation to facial treatments;
- Seek less aggressive treatment options;
- Higher number of sessions.



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#### MY PRACTICE VYDENCE





The MyPractice is a continued medical education program proposed by VYDENCE® to the doctors that use our products and technologies may share their experiences in a practical and quick way.

#### » My Practice Online



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IPL-Sq<sup>®</sup>: care and preventative maintenance



#### CARE AND MAINTENANCE

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#### CARE AND PREVENTATIVE MAINTENANCE



- Cleaning the filters: use a soft cloth moistened with isopropyl alcohol until all stains and residue are removed;
- Clean after of each application;
- Pro rata guarantee of the handpiece: 60,000 shots;
- Damage from falls or misuse (usage not in accordance with the recommendations) is not covered;
- Careful during transportation, misalignment can result in ineffective treatment;
- Send the handpiece to technical support after reaching the recommended number of shots.

#### **CARE AND MAINTENANCE**

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#### CARE AND PREVENTATIVE MAINTENANCE



- Always check the integrity and cleanliness of the filters and sapphires before use;
- Damage caused to the filter coating is irreversible and can cause severe harm to patients.



#### CARE AND MAINTENANCE



#### CARE AND PREVENTATIVE MAINTENANCE



**WATCH NOW** 

## Learn more about maintenance procedures on our channel

LASER ACADEMY tv

- Use only deionized water;
- Replace all the water in the reservoir annually;
- Change the deionizing filter annually;
- Annual inspection of the platform and handpieces.



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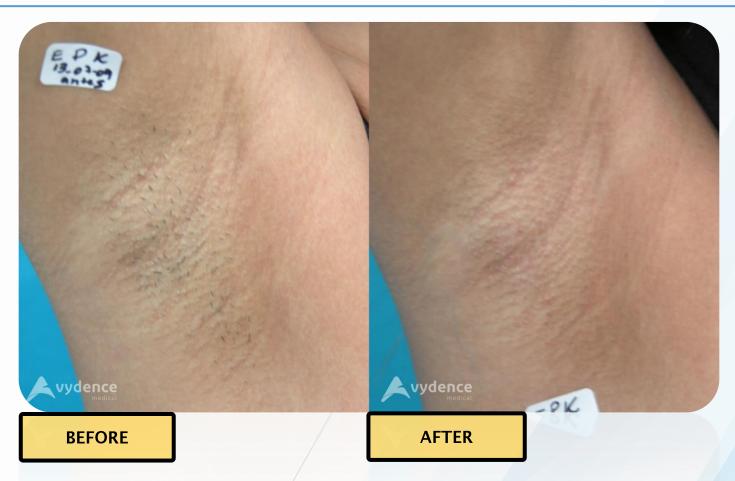
IPL-SQ®: cases and results





HAIR REMOVAL

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 640 nm, 16 J/cm2, 30 ms.





HAIR REMOVAL

Photo from VYDENCE Training Center São Paulo, SP



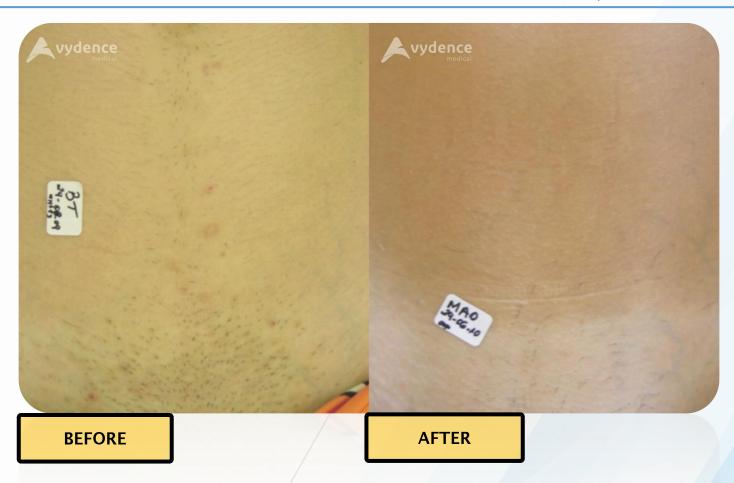
**IPL:** Filter 640 nm, 17 J/cm2, 30 ms





#### HAIR REMOVAL

Photo from VYDENCE Training Center São Paulo, SP



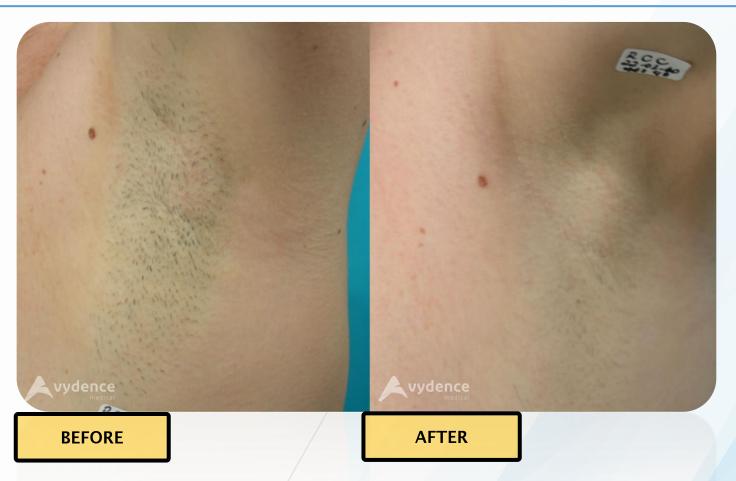
**IPL:** Filter 640 nm, 17 J/cm2, 20 ms





HAIR REMOVAL

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 640 nm, 16 J/cm2, 30 ms





HAIR REMOVAL

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 640 nm, 16–17 J/cm2, 30 ms, 8 sessions.





HAIR REMOVAL

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 640 nm, 16–17 J/cm2, 30 ms, 8 sessions.





#### HAIR REMOVAL

Photo from VYDENCE Training Center São Paulo, SP



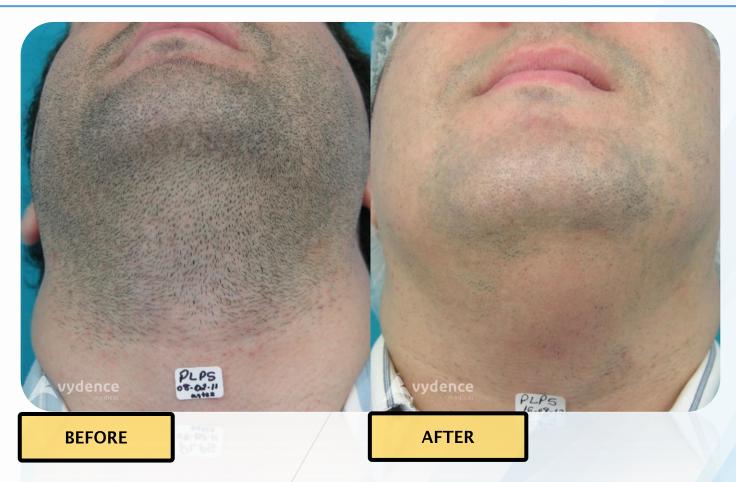
**IPL:** Filter 640 nm, 16 J/cm2, 30 ms





HAIR REMOVAL

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 640 nm, 16 J/cm2, 30 ms



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#### **PIGMENTED LESIONS**

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 580 and 540 nm, 15–16 J/cm2, 1/5 ms, 3 sessions.



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#### **PIGMENTED LESIONS**

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 580 and 540 nm, 15–17 J/cm2, 1/5 ms, 3 sessions.



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#### **PIGMENTED LESIONS**

Photo from VYDENCE Training Center São Paulo, SP



IPL: Filter 580 and 540 nm, 15-16 J/cm2, 15 ms, 3 sessions.



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#### **PIGMENTED LESIONS**

Photo from VYDENCE Training Center São Paulo, SP



IPL: Filter 580 and 540 nm, 15-16 J/cm2, 15 ms, 3 sessions.



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#### **PIGMENTED LESIONS**

Photo from VYDENCE Training Center São Paulo, SP



IPL: Filter 640 nm, 14 J/cm2, 30 ms + Filter 540 nm, 15–16 J/cm2, 15 ms + AR 5%





**VASCULAR LESIONS** 

Photo from VYDENCE Training Center São Paulo, SP



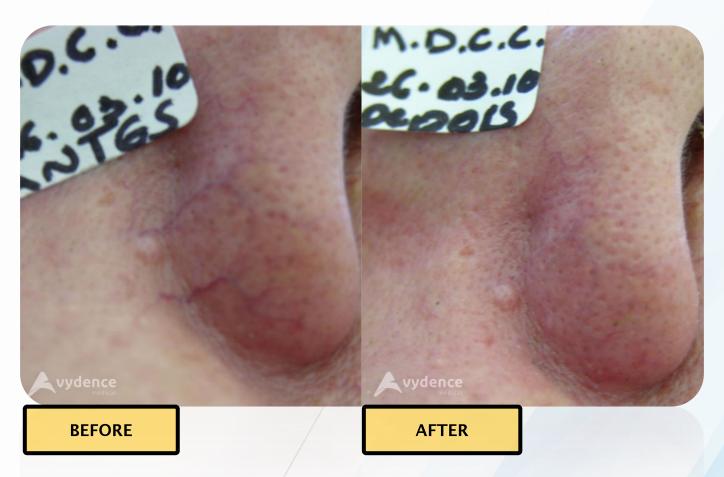
IPL: Filter 580 and 540 nm, 20 J/cm2, 15 ms.





**VASCULAR LESIONS** 

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 580 and 540 nm, 20 J/cm2, 15 ms..





**VASCULAR LESIONS** 

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 580 and 540 nm, 20 J/cm2, 15 ms.





**ACNE VULGARIS** 

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 640 nm, 12 J/cm2, 100 ms + Filter 400 nm, 10 J/cm2, 30 ms..





**ACNE VULGARIS** 

Photo from VYDENCE Training Center São Paulo, SP



**IPL:** Filter 640 nm, 12 J/cm2, 100 ms + Filter 400 nm, 10 J/cm2, 30 ms..





**RECENT SCARS** 

Photo courtesy of Dr. Carlos Alberto Ferreira Campinas, SP



**IPL:** Filter 540 nm, 10–15 J/cm2, 10–20 ms, 3 sessions.



#### BIBLIOGRAPHIC REFERENCES



- Klein A, Steinert S, Baeumler W, Landthaler M, Babilas P. PHOTOEPILATION WITH A DIODE LASER VS. INTENSE PULSED LIGHT: A RANDOMIZED, INTRAPATIENT LEFT-TO-RIGHT TRIAL. I Dermatol. 2013 Jun:168(6):1287-93.
- Haak CS, Nymann P, Pedersen AT, Clausen HV, Feldt Rasmussen U, Rasmussen AK, Main K, Haedersdal M. HAIR REMOVAL IN HIRSUTE WOMEN WITH NORMAL TESTOSTERONE LEVELS: A RANDOMIZED CONTROLLED TRIAL OF LONG-PULSED DIODE LASER VS. INTENSE PULSED LIGHT. Br J Dermatol. 2010 Nov;163(5):1007– 13.
- Amin SP, Goldberg DJ. CLINICAL COMPARISON OF FOUR HAIR REMOVAL LASERS AND LIGHT SOURCES. J Cosmet Laser Ther. 2006 Jun;8(2):65–8.
- 4. Wu DC, Friedmann DP, Fabi SG, Goldman MP, Fitzpatrick RE. COMPARISON OF INTENSE PULSED LIGHT WITH 1,927-NM FRACTIONATED THULIUM FIBER LASER FOR THE REJUVENATION OF THE CHEST. Dermatol Surg. 2014 Feb;40(2):129-33.
- Chan CS, Saedi N, Mickle C, Dover JS. COMBINED TREATMENT FOR FACIAL REJUVENATION USING AN OPTIMIZED PULSED LIGHT SOURCE FOLLOWED BY A FRACTIONAL NON-ABLATIVE LASER. LASERS Surg Med. 2013 Sep;45(7):405-9.
- Ooe M, Seki T, Miura T, Takada A. COMPARATIVE EVALUATION OF WRINKLE TREATMENTS. Aesthetic Plast Surg. 2013 Apr;37(2):424–33.
- Thaysen-Petersen D1, Lin JY, Nash J, Beerwerth F, Wulf HC, Philipsen PA, Haedersdal M. THE ROLE OF NATURAL AND UV-INDUCED SKIN PIGMENTATION ON LOW-FLUENCE IPL-INDUCED SIDE EFFECTS: A RANDOMIZED CONTROLLED TRIAL. LASERS Surg Med. 2014 Feb;46(2):104–11.
- Srinivas CR, Kumaresan M. LASERS FOR VASCULAR LESIONS: STANDARD GUIDELINES OF CARE. Indian J Dermatol Venereol Leprol. 2011 May–Jun;77(3):349–68.
- Goldberg DJ. LASER REMOVAL OF PIGMENTED AND VASCULAR LESIONS. J Cosmet Dermatol. 2006 Sep;5(3):204–9.
- Liu LH, Fan X, An YX, Zhang J, Wang CM, Yang RY. RANDOMIZED TRIAL OF THREE PHOTOTHERAPY METHODS FOR THE TREATMENT OF ACNE VULGARIS IN CHINESE PATIENTS. Photodermatol Photoimmunol Photomed. 2013 Dec 9

- 9. Taylor M, Porter R, Gonzalez M. INTENSE PULSED LIGHT MAY IMPROVE INFLAMMATORY ACNE THROUGH TNF-A DOWN-REGULATION. J Cosmet Laser Ther. 2014 Apr;16(2):96–103
- 10. Raulin C, Greve B, Grema H. IPL TECHNOLOGY: A REVIEW. LASERS Surg Med. 2003;32(2):78-87.
- 11. Wat H, Wu DC, Rao J, Goldman MP. APPLICATION OF INTENSE PULSED LIGHT IN THE TREATMENT OF DERMATOLOGIC DISEASE: A SYSTEMATIC REVIEW. Dermatol Surg. 2014 Apr;40(4):359–77.
- 12. Town G, Ash C, Eadie E, Moseley H. MEASURING KEY PARAMETERS OF INTENSE PULSED LIGHT (IPL) DEVICES. J Cosmet LASER Ther 2007;9:148–160.
- 13. Clarkson DM, Gill D, Odeke M. A TIME-RESOLVED INTENSE PULSED LIGHT SPECTRAL ANALYSIS SYSTEM. LASERS Med Sci 2008;23:59-64; 16. Ash C, Town G, Bejorring P. RELEVANCE OF THE STRUCTURE OF TIME-RESOLVED SPECTRAL OUTPUT TO LIGHT-TISSUE INTERACTION USING INTENSE PULSED LIGHT (IPL). LASERS in Surg and Med 2008;40:83-92



