

# Aesthetic Buyers Guide™



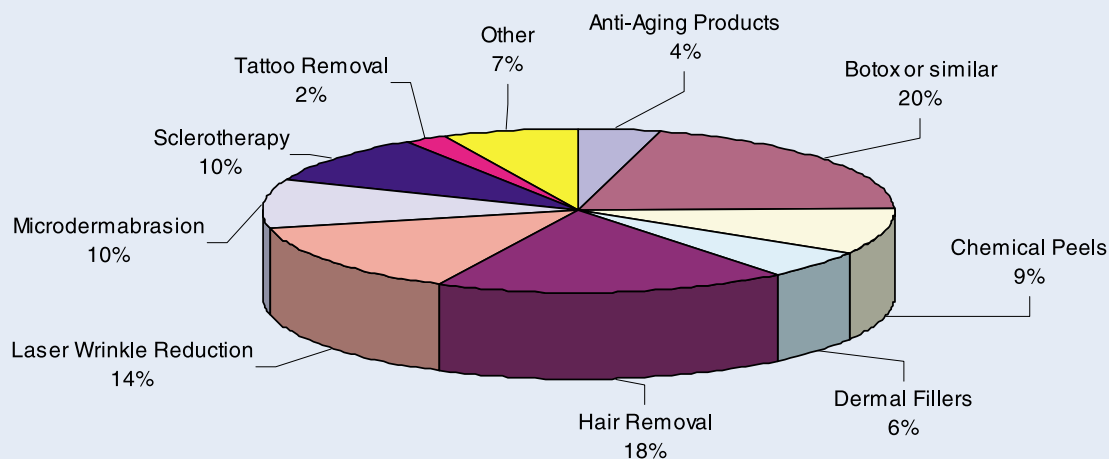
## Aesthetic User Survey Report

by Michael Moretti, Editor

The *Aesthetic Buyers Guide* recently formed a Virtual Focus Group of opinion leaders in the aesthetic field to conduct quarterly market surveys. Results from the first survey include detailed responses from approximately 100 aesthetic practices. Data from this expert panel of users has been compiled into this exclusive Aesthetic User Survey Report.

Summary results from this survey show many significant trends. In terms of products and services, anti-aging products are in high demand and represent the largest monthly volume. The next most popular services include Botox, medical spa treatments, hair removal, and microdermabrasion. This market data is extremely valuable to aesthetic practices from a practice development and positioning standpoint. If your practice is not offering all of these high-demand services, then you are missing out on major revenue centers.

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# Cold Air In Laser Therapy: First Experiences With A New Cooling System

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## Abstract

**Background and Objective:** Analgesic cooling technologies are firmly established in dermatological laser therapy. We present cold air as a novel method of cooling and compare it to those that are already in use.

**Study design / Materials and Methods:** We treated 166 patients with the diagnoses hypertrichosis, port wine stains, hemangioma, essential telangiectasias and tattoos with different laser systems (long-pulsed alexandrite laser (LPIR), pulsed dye laser, q-switched Nd:YAG laser, q-switched ruby laser). In a prospective study, we collected data about the analgesia of the cooling method and the thermal protection of the epidermis (reduction of the extent and duration of erythema, purpura, blisters, hyper-/hypopigmentations, edemas, crusting), compared to the cooling method with ice gel. Additionally, we measured air and skin temperatures with an infrared thermometer at different application modalities.

**Results:** 3% of the treated patients refused the cold air therapy altogether. 11% found that it was as good as the other cooling methods; 86% clearly preferred the cold air therapy. Leaving out the perinasal area, the percentage rises to 97%. On average, the analgesic effect was by 37% better than through cooling with ice gel. The increased thermal protection of the epidermis made it possible to use laser energy levels that were higher by 15-30% and, at the same time, to reduce the rate of side effects (in 63% of the patients erythema persisted for a shorter period, in 70% the purpura was reduced, 83% had less crusting).

**Conclusion:** In dermatological laser therapy, the use of cold air in analgesia can be considered as an effective, inexpensive and well-accepted (by both patients and doctors) alternative to currently applied cooling methods. Nevertheless, further prospective studies are necessary in order to find out whether treatment results can really be improved by using higher laser energy levels.

**Table 6:** Advantages of cold air cooling over ice gel cooling (patient results)

Parameter	Cold air cooling
Preferred therapy	97%
Preferred therapy outside face	100%
Possible increase of laser energy	15-30%
Erythema persisting shorter in	63%
Erythema less intensive in	74%
Analgesic effect better by	37%
Less purpura in	70%
Less edema in	7%
Less crusting in	83%
Clearance	No difference observed

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