## Mono Thread And Botox Combination For Double Chin Reduction

A double chin can undermine your self-esteem. A double chin is caused by excess fat in the submental region, also known as the area beneath your chin. There are numerous reasons why a double chin develop, including genetic factors, weight gain, ageing, or a loss of elasticity. Diet and exercise can help some people reduce the appearance of a double chin, but it isn't a quick or effective solution for everyone.

both polydioxanone (PDO) (mono, screw, and barbed) as well as poly L-lactic acid (PLLA) threads with bidirectional cones. Choice of thread used was based on the primary indication.

PDO threading is the process of using dissolvable sutures to lift and contour. During nonsurgical facelift, threads are used that stimulate the production of collagen to even further enhance the health of your skin. The PDO procedure takes around 30 minutes. The procedure begins with rubbing a numbing ointment on the skin; then, we will insert the threads into the treatment area and lift the sagging skin. In time, the threads will start to dissolve and turn into collagen. You can expect your results to last for about 12 – 18 months.

Bioabsorbable threads used for repositioning ptotic facial tissue have been added into the picture. combining threads with fillers and botulinum toxin to achieve longer-lasting and natural-looking results.

excessive cord-like platysmal banding were initially treated with botulinum toxin, followed by neck rejuvenation with threads.

Neuromodulators work by blocking the communication of neurotransmitters between your nerve endings and muscles. This reduces the activity of hyperactive muscles, temporarily eliminating lines and wrinkles which are apparent when your facial muscles are moving

PDO threads combined with neurotoxins produce better results than either alone. It is recommended that a neurotoxin be used prior to the procedure to relax muscle pull and maximise thread longevity. We recommend using a neurotoxin two weeks before the thread procedure to weaken muscle pull in the treated area. This will allow the threads to lift the tissue effectively. Combining PDO threads and neurotoxins saves money for both patients and practises.

There are some compelling reasons to consider dermal threads instead of surgery or other invasive, painful alternatives. Thread treatments take 30-60 minutes, which means very little disruption to life and work schedules.

There is minimal post-op discomfort with this method, and no need for recuperation or prescription pain medications afterward. Threads are less expensive than standard surgery. These reasons, coupled with the broad range of problems threads can correct, makes this one of the most versatile treatments available today. It is also why threads have become one of the most popular treatments in the facial aesthetic world.

Dermal Thread Placement Boosts Essential Protein Production. This is because the body sends collagen proteins to any irritated site to help the area heal. And it does not send just a little collagen. It sends lots of it; along with another protein known as elastin which aids in skin elasticity.

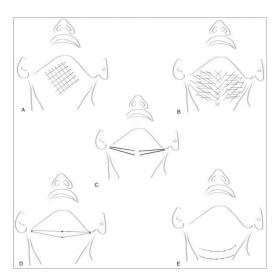
It is collagen that thickens skin so it does not have that thin, crepe paper appearance. And collagen, once again, provides the "framework" under the skin to support it and keep it from sagging.

When just rejuvenation of the neck in terms of textural improvement was desired, monofilament or screw PDO threads were used, as these threads improve microcirculation and collagenosis and thus the texture of the skin and mild wrinkling is corrected. When reduction in volume due to a double chin was desired, monofilament PDO threads were used in a crosshatch technique to aid in lipolysis, along with tightening the skin, thus attempting to restore the optimal cervicomental angle. To improve sagging and severe wrinkling, more stretch in the horizontal plane was desired, and hence to redrape the skin, PDO bidirectional barbed or PLLA bidirectional cone threads are used.

For a long-lasting result, PLLA was chosen over PDO threads in patients who could afford, as it has a longer half-life of 18 months as compared to 6 months of PDO.

A crosshatch technique was used where more surface area was required to give greater textural improvement and also as optimal vectors for double chin.

A hammock technique was used to stretch the skin where laxity was more, and to give a good anchoring at the mastoid fascia. Linear threading was used where just volumization with threads was desired as in Venus rings



Topical anesthesia using eutectic mixture of prilocaine and lidocaine was used as a local anesthetic for 1h before PDO under aseptic precautions. For insertion of cog threads, local infiltration using 2% lignocaine with adrenaline 1:200,000 was given for points of insertion and an 18-gauge needle was used to make the entry point. Thread insertion was thereafter done under aseptic precautions.

Post-procedure advice included ice pack application for the anticipated swelling and edema. Capsule amoxicillin (625mg) with clavulanic acid (125mg) was given three times a day for 5 days. Patients were advised against wide mouth opening for 48h and to abstain from smoking, vigorous exercises, and cosmetic procedures in the treated area for a week.

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