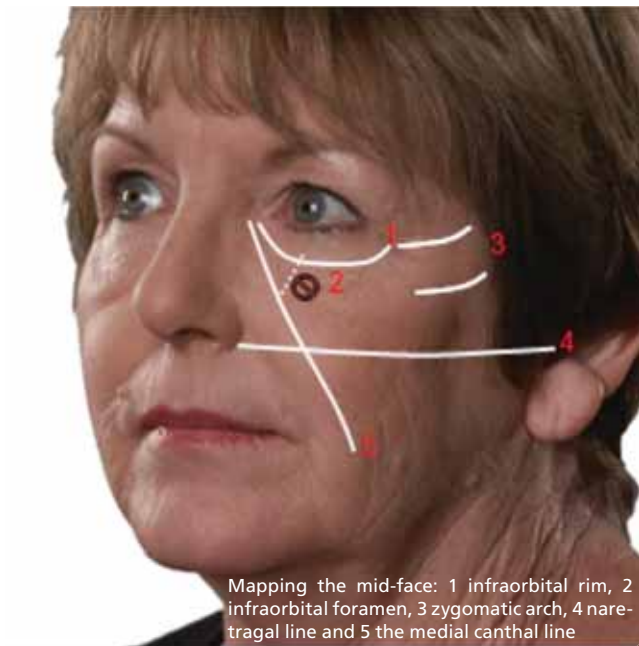


# Mid-face vectoring

Discussing her technique, Dr Sabine Zenker describes how she uses vectoring for injecting calcium hydroxylapatite into the cheeks to add volume



Mapping the mid-face: 1 infraorbital rim, 2 infraorbital foramen, 3 zygomatic arch, 4 nasolabial line and 5 the medial canthal line

Soft tissue augmentation has undergone a remarkable transformation. Facial augmentation and volumising have evolved from straightforward injecting into restoration by three-dimensional vectoring.

All the hyaluronic acids (HA), either biphasic or monophasic, are the mainstay fillers for volumising. They are suitable for most indications in treating facial structures, from filling a fold to volumising and reshaping. Ideally the volumising effects of dermal filler should be accomplished by its longevity owing to neocollagenogenesis.

Calcium hydroxylapatite is suitable for vectoring to give an exceptional lift-effect and volume enhancement to

dermal structures, notably in the lateral cheek area.

Radiesse is a calcium hydroxylapatite filler that comprises CaHA microspheres (30%) suspended in an aqueous gel carrier (70%). As the carrier gel is dissolved, CaHA stimulates the production of collagen around the microspheres, an effect that lasts up to 78 weeks.

Premixing lidocaine with Radiesse has not shown any negative effects on the rheology of the filler. I use blunt cannulas for injecting into the cheeks, which produces an even result. Blunt cannulas help respond to our patient's demands for a smooth aesthetic outcome with a higher comfort—especially for mid-facial contouring.

First, I map the midface, which is important for accurate planning. This

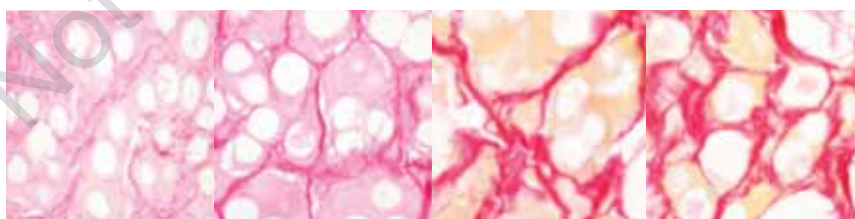
should identify five key regions: infraorbital rim, infraorbital foramen, zygomatic arch, nasolabial line and the medial-canthal line.

I place uniform threads of dermal filler using a fanning technique, mainly in the lower thirds of the cheek and more superficially into the subdermis. The selection of the insertion points is crucial for a good lifting effect.

Caucasian facial features require enhancement starting in the zygomatic arch area. Second and possibly additional insertion points may be placed subsequently working down the cheek. Ideally, a third point is placed laterally and distally to the nasolabial fold. Injecting upwards from this point serves several needs: It provides caudal support for the cheek augmentation and it addresses amelioration of the nasolabial fold.

Depending on the anatomical features and volume needed to reshape the cheek area, multiple fanning patterns are often necessary. Fine injection threads (0.05ml each) are recommended for natural and optimal results.

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Radiesse stimulates new collagen production of stained red using picosirius red shown at four weeks, 16 weeks, (magnification 40X), 32 weeks and 78 weeks (magnification 60X).

PHOTOS: MERZ AESTHETICS



Areas of injection for malar enhancement and nasolabial fold lift  
Pre- and post-treatment photographs show a 62-year-old woman before and immediately after injection of 1.5ml of calcium hydroxylapatite for lateral cheek vectoring. The vectors are placed fanning down the cheek, starting laterally between upper and lower part of the zygomatic arch. The threads are placed subdermally, using approximately 0.05-0.1ml per thread. A blunt cannula (TSK, 25-gauge, 50mm) was used to inject Radiesse pre-mixed with lidocaine 1% in a dilution ratio of 20%