

aesPLLA[®]
INJECTABLE POLY-L-LACTIC ACID POWDER

User Manual

For professionals

New
PLLA
INJECTABLE POLY-L-LACTIC ACID



“

aesPlla® , the way of basic solution to find young looking

”



aesPlla® , stimulates the collagen and boost skin volume naturally.



Skin aging starts from inside

Collagen is the key factor of young skin.

As people get aged, collagen is decreased from 20 years old. And the reducing rate is 1% per year. Adult skin declines the ability of generating collagen. From 40 years old, they lose 20% of collagen in the skin. The basic reason of wrinkles and folds are from lost collagen. Thin skin gets sagged and brings an aged face. aesPlla® stimulates the collagen in the subcutaneous layer and fills the lost volume.

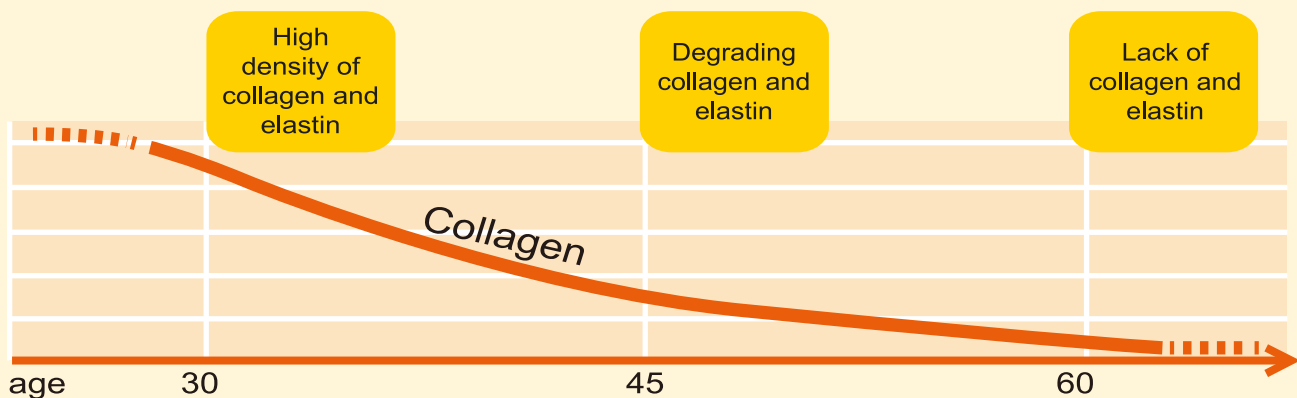
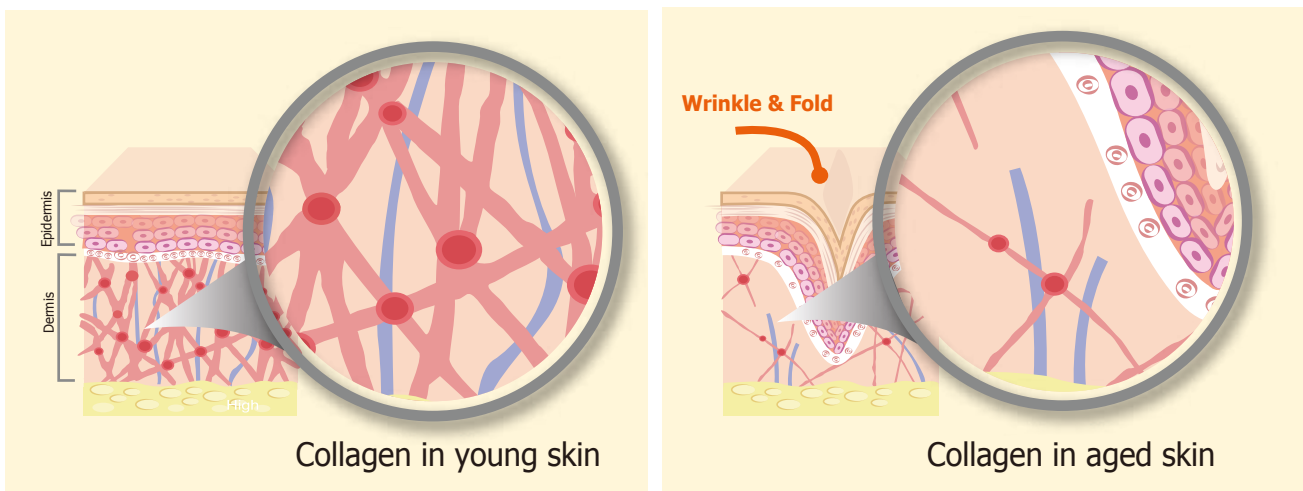


FIGURE 1 The relationship of skin collagen content (expressed per unit skin surface area) to age in males (a) and females (b). Females have less collagen than males at all ages but the rate of decrease is the same in both sexes.
Ref. *British Journal of Dermatology*(1975) 93, 639.

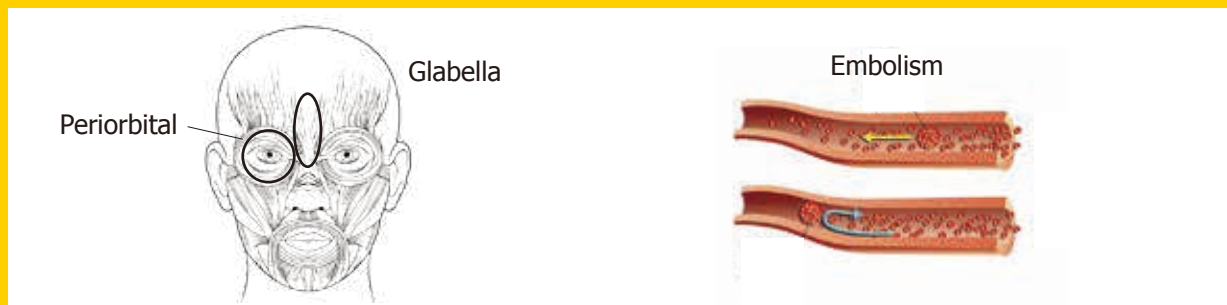
aesPlla® treatment area and volume

Volume can be flexible according to patient's condition.



Cautions

Avoid unintentional vessel injections.



Do not overcorrect with product during an injection session. Treatment should be Gradual correction.

aesPlla® treatment example



Protocol

9mL diluted aesPlla® solution

= 1 vial aesPlla® + 7mL Saline water + 2mL Lidocaine
= 3ml x 3 syringes

with 23-25G blunt cannula needle 5cm

Upper, Mid, Lower Face
Each part max. of 1 syringe(=1/3 Vial)

※ It is important to wait for the progressive effect to take place over an interval or at least 4 weeks for aesPlla®. ; In clinical practice, patients are typically evaluated at 4-6 weeks.

This is the preperation of aesplla® treatment

✓ Check point

- Expired date of the vial & Damage on the cap
- Before using this product, doctors should fully understand this instruction guide
- All the suspension procedures of this product should be done under the aseptic condition in the environment free microorganism contamination.

✓ Preperation materials

- Sterilized saline water, 2% Lidocaine, 18G needle, 23-25G blunt cannula, disposable 5ml syringe, alcohol cotton, gauze, gloves

✓ How to preperate before treatment



1 Remove the cap from the vial and clean with alcohol cotton.



2 Connet 18G needle to disposable 5ml syringe. Take 5ml of sterilized saline water with syringe and add into the vial. At this time pierce the rubber cap with needle.



3 To dilute enough the powder, let the vial for minimum 2 hours. Do not shaking the vial. And this diluted solution should be used within 72 hours.



4 When the patient be ready, lightly swing the vial and the solution can be mixed as a translucent suspension.



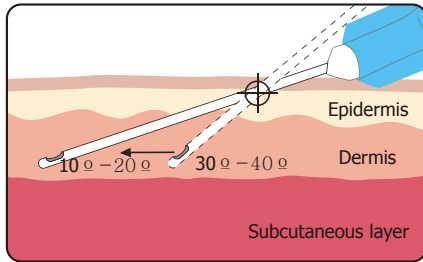
5 Just before the treatment clean the rubber cap of aesplla®. Add 2cc of Lidocaine and fill the diluted solution with 18G needle with 5ml syringe. Do not store the solution in the syringe.



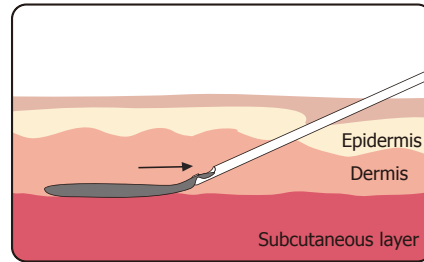
6 Before treatment change the 18G needle to 26G blunt cannula. Inject to deep dermis and subcutaneous layer.

This is the injection technique

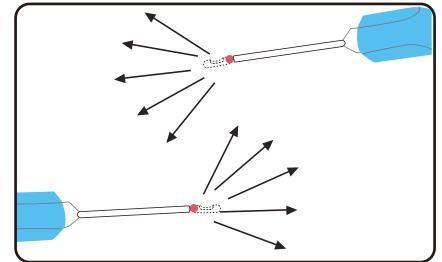
aesPlla® can be combined to ensure full correction and smoothness.



When the needle tip is in the deep dermal plane, the needle angle should be lowered to 10-20 degrees and the needle should be advanced in the deep dermal plane parallel to the surface of the skin.



Inject aesPlla® parallel to the skin fold.



Start the first injection the base of the point, additional injections should be radial to the first injection. Picture above shows a radial pattern after completing the last injection.

Injection TIP

- ✓ Do not inject smaller than 26G needle.
- ✓ During the treatment, frequently agitate the solution keep the homogeneous suspension.
- ✓ During the treatment, massage in a circular fashion after 3-4 injections to evenly distribute the solution.
- ✓ Before the treatment, expel a few drop of aesPlla® to check the needle is blocked and to remove the air.
- ✓ During the treatment, if clogging occurs , please change the needle.

Injecting

Technique

- a. Before aesPlla® treatment, always perform a reflux maneuver to avoid intravascular injection. If blood returns to the syringe, the needle is in a blood vessel and should be withdrawn. And a new syringe should be prepared.
- b. Base on the treatment plan, start the first injection at the base of the nasolabial fold. After completing the length with injections parallel to the nasolabial fold. The radial patten is achieved with additional injections perpendicular to the first session.

Volume per injection

The maximum volume of aesPlla® per individual injection should be limited to 0.1ml-0.2ml, spaced at a distance of 0.5-1cm. Avoid overcorrection.

Post-treatment care

- a. Immediately after aesPlla® treatment may occur redness, swelling and bruising in the treatment area.
- b. To help aesPlla® distribute evenly in the contour deficiency, it is very important at the end of the treatment session to manually massage in a circular fashion to the treatment area for a minimum of 2 minutes.
- c. To reduce the risk of edema or bruising after treatment, an ice pack is applied to the treat-ed area.(Avoid any direct contact of the ice with the skin)
- d. Treatment make-up may be applied a few hours post-treatment if no complications are present.
- e. Avoid from exposure of the treated area to sun and UV until any initial swelling and red-ness has resolved. Physician should advise to patients about appropriate sunscreen protection.

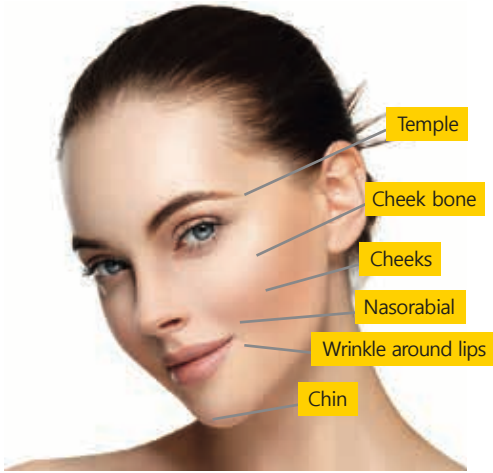


Effect and Various application

- ☑ Face augmentation
- ☑ Breast and hip augmentation
- ☑ Hand & neck wrinkle improvement
- ☑ Scar improvement
- ☑ Female and male sexual organ (genital)
- ☑ Vagina tightening and penis shaft thickening



Face Augmentation



Area	1st session	2nd Session	Depth of Injection	Technique
Forehead	1-2 vials	Same dose But if the volume increased excessively, half dose of 1st session	Subcutaneous layer or Periosteum	Fan shape injection using Cannula
Temporal area	1-2 vials			
Cheek	1 vials			
Ant zygomatic area	1 vials			
Nasolabial fold	0.5vials			

Anesthesia

Local anesthesia 30 minutes before the procedure, nerve block if necessary

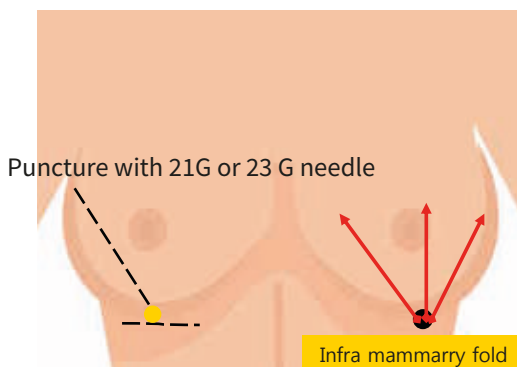
Puncture - 21G or 23G needle

The puncture area is confirmed by pinching the place where the lidocaine was injected.

Procedure

Put it in the subcutaneous layer. Using Fan Technique, inject into the sunken are evenly. If there is bleeding, be sure to press the area for hemostasis. And then to start the treatment.

Breast Treatment



Anesthesia

- 1) Cancer Test before treatment – cancer/ fat/ filler, hard to distinguish
- 2) After treatment - Avoid to wear wire bra
- 3) For Augmentation of Breast A to B size up – 3 set per each side

1st session	2nd Session	Depth of Injection	Technique
5~10 vials	Two month later half dose of fist session	Between parenchymal mammary tissue and the pectoralis major muscles or retromammary fat	Fan shape injection using Cannula

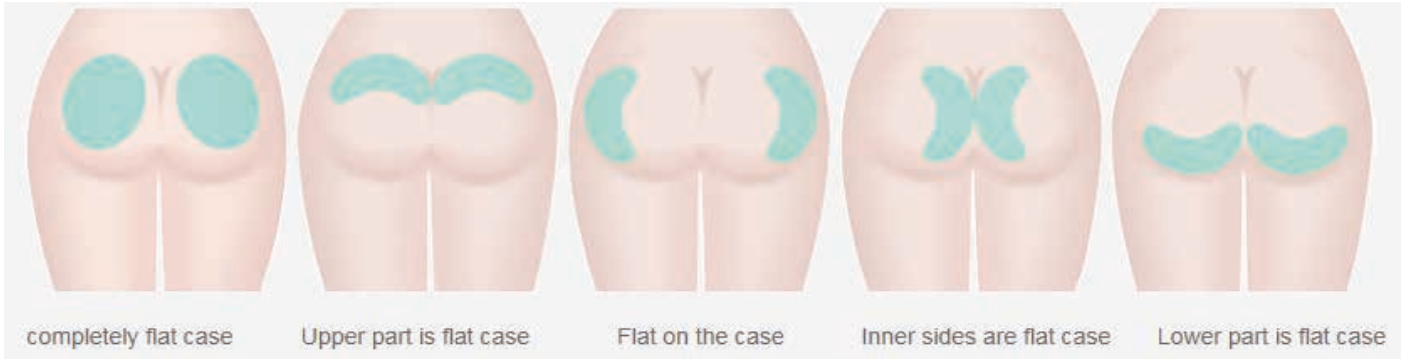
Anesthesia

Inject 10-20 ml of tumescent solution into one side

Procedure

- 1) Make procedure design
- 2) Make a local anesthesia with lidocaine
- 3) Inject at level of under **submammary gland area**. Using 21G or 23G Cannula which same as image.
- 4) Inject at entry point of inframammary fold. Length of needle should be placed at midline of inframammary fold and do the fan shape injection using cannula
- 5) Inject fan shape, Hold Breast and lift up and Inject also avoid the mammary gland. Gentle massage in the injected area - 30min a day for 5days
- 6) Patient should get a second treatment after first treatment in 6 to 8 weeks. (recommend after 2 months)

Buttock Augmentation



Augmentation

Hip Augmentation is for supplementation of Hip's depressed

Puncture

Lateral margin of hip

1 st session	2 nd & 3 rd Session	Depth of Injection	Technique
4 vials. It depends on the degree of the hip depression and the customer's request for volume increase.	Same dose as 1 st session but when excessive volume, half dose of previous session	Above gluteus maximus muscle	Fan shape injection using Cannula

Back of Hand



1line – inject enoughly

1 st session	2 nd Session	Depth of Injection	Technique
2~4 vials	4-6wks later half dose of fist session	Dermal layer	Fan shape injection using Cannula

Anesthesia

Local anesthesia 30 minutes before

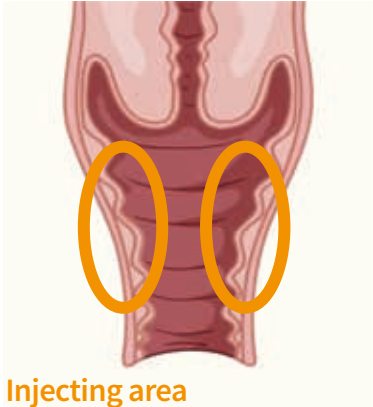
Puncture – 21G or 23G needle

The puncture area is confirmed by pinching the place where the lidocaine was injected.

Procedure

Using Fan technique Inject evenly after injection, massage the back of the hand with the feeling of flattening the back of the hand.

Vagina Treatment



1 st session	2 nd & 3 rd Session	Depth of Injection	Technique
3~5 vials	Same dose as 1 st session but when excessive volume, half dose of previous session	Submucosa injection	Injection at inlet of vagina using cannula. Be careful not to penetrate rectum and urethra

Anesthesia

Make a local anesthesia with lidocaine.

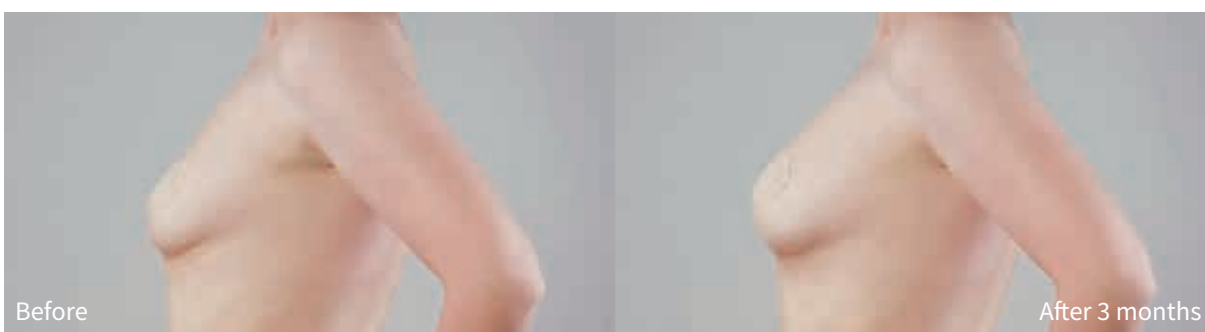
Puncture – 21G or 23G needle

At vaginal outlet

Procedure

- 1) Inject half dose at right wall
- 2) Inject half dose at left wall
- 3) Injection site 5-6cm from vaginal inlet, sub mucosal layer
- 4) Patient should get a second treatment after first treatment in 6 to 8 weeks.

Breast Treatment (before & after)





Buttocks Treatment (before & after)



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