

I Wanna Be Pretty

Filler Occlusion Protocol

- **Signs of Occlusion:**

- **Paleness or blanching** of the skin around the injection site
- **Severe pain** (the patient may describe it as intense and sharp)
- **Swelling or increased edema** in the area
- **Blue or dusky discoloration** of the skin
- **Delayed capillary refill** (press on the skin and watch for delayed return to normal color)
- **Loss of normal skin warmth**
- **Visual changes** (in cases of ocular occlusion), including blurry vision or blindness (more relevant in facial occlusions near the eyes or nose)

Quick Action:

If you suspect a vascular occlusion, act immediately—don't wait for symptoms to worsen.

2. Immediate Response:

- **Stop the Procedure Immediately:**
Discontinue injecting and do not attempt to inject more filler into the area.
 - **Reassure the Patient:**
Calm the patient down while you prepare to address the occlusion.
Time is critical, so make sure they understand the situation.
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3. Steps to Reverse the Occlusion

- **Massage the Area:**
Light massage around the occluded area may help disperse the filler and potentially relieve minor occlusions. However, avoid excessive pressure.
- **Use Hyaluronidase (optional):**
If the filler is hyaluronic acid-based (HA), inject **hyaluronidase** (brand names like **Wydase** or **Vitrase**) into the occluded area.

Dosing: Start with 75–150 units of hyaluronidase per occluded area. Multiple injections may be required depending on the size of the occlusion.

- Inject **in a retrograde fashion** along the course of the suspected occluded vessel.
 - If no response is seen within 2-3 minutes, additional injections may be needed.
 - Be cautious not to inject into a nearby vessel or vein.
 - **Massage After Hyaluronidase:**
After injecting hyaluronidase, massage the area gently to help disperse the filler and the enzyme.
 - **Administer Nitroglycerin Paste (if appropriate):**
In some cases, a small amount of **nitroglycerin paste** (applied to the skin) can help vasodilate the vessel. This can improve blood flow in the area.
 - **Be cautious** with nitroglycerin, as it may cause headaches or dizziness in some patients.
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4. Further Medical Intervention

- **Immediate Referral to a Medical Professional:**
If the occlusion does not resolve with hyaluronidase or if you suspect a serious complication (e.g., blindness, skin necrosis), **refer the patient immediately** to an emergency physician or a specialist (e.g., a plastic surgeon or ophthalmologist).
 - **Monitor for Further Complications:**
Watch for signs of more severe outcomes like tissue necrosis, or loss of vision in the case of ocular occlusion. These are rare but serious, and may require advanced treatments such as surgical intervention or even systemic anticoagulant therapy in extreme cases.
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5. Documentation

- **Record All Details:**
 - **Time of occlusion** and any response to treatment.
 - **Filler type** used and the volume injected.
 - **Response to hyaluronidase** (if applicable), noting any improvement or lack thereof.
 - **Referral** to another healthcare provider, if applicable.
 - **Aftercare instructions** given to the patient.
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6. Post-Treatment Care:

- **Monitor the Area:**
After initial intervention, the patient should be monitored for further signs of complications over the next 24-48 hours.

- **Post-Care Instructions:**

Provide guidance on aftercare, which may include:

- Avoid massaging or putting pressure on the treated area.
 - Keep the area elevated if needed.
 - Use cold compresses to reduce swelling (but not on the site of occlusion itself).
 - Advise the patient to follow up if they notice any changes in sensation, appearance, or pain.
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7. Prevention of Vascular Occlusion

- **Proper Injection Techniques:**

- Use a **blunt-tipped cannula** when possible to reduce the risk of injecting into a blood vessel.
- **Aspiration technique:** Always aspirate before injecting to check for blood return (though not a foolproof method).
- **Inject slowly** and in small amounts, especially in high-risk areas like the nose, temples, and under-eye.

- **Use of Ultrasound Guidance (optional):**

Some med spas now use ultrasound technology to visualize blood vessels during filler injections, particularly in higher-risk areas. This can significantly reduce the risk of occlusion.

- **Anatomical Awareness:**

Having a deep understanding of facial anatomy, particularly the location of arteries, veins, and nervous structures, is crucial to avoid inadvertent occlusion.

8. Patient Education

- **Signs to Watch For:**

After treatment, make sure your patients understand the signs of potential vascular occlusion (pain, discoloration, visual changes) and instruct them to contact the clinic immediately if they experience any concerning symptoms.

- **Expectation Setting:**

Discuss the risks and proper aftercare to minimize complications, even though occlusions are rare.