

ABG CLINICAL roundtable

Physicians Convene for Clinical Consensus Regarding Fraxel SR1500 Laser Tx

A group of leading physicians convened in Palm Springs, Calif. to share their knowledge and experience in using the Fraxel® SR1500 (Reliant Technologies, Mountain View, Calif.). The goal of this roundtable discussion was to establish pre-treatment, treatment and post treatment standards of care. Currently the results from two days of discussion, debate and conversation are being tabulated into a clinical article to be released in the Fall of 2007.

As a pioneer of fractional laser delivery, the Fraxel laser has been considered a gold standard of care for anti-aging, collagen remodeling and non-ablative skin resurfacing. Fraxel SR1500, launched in Fall 2006, is Reliant's latest innovation in aesthetic laser medical technology, and marks

the first expansion of the Fraxel family of lasers. This new laser provides a highly effective, predictable and safe, non-ablative treatment for patients with acne scarring, melasma or hormonal skin discoloration, periorbital wrinkles and sun and age spots.

Editor's Note: The following Clinical Consensus Roundtable was moderated by Mathew Avram, M.D., J.D., director of Massachusetts General Hospital Dermatology Laser and Cosmetic Center in Boston, Mass. Dr. Avram, along with his fellow panelists, are early users of the Fraxel SR1500 laser and are conducting clinical studies for a variety of purposes and conditions. The following discussion will share their experiences and recommendations when using this laser.



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**Robert M. Adrian, M.D.,
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Founder
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The Fraxel SR1500 laser features many clinical advantages over other aesthetic medical devices, including:

- FDA clearance for treatment at 70 mJ (beyond 1.4 mm into the dermis)
- Optical zoom handpiece, allowing for a precise spot size to optimize both lesion width and depth based on the treatment parameters selected
- Continuous motion handpiece and new roller tip for safe, efficient and fast treatments
- Second generation Intelligent Optical Tracking System for smooth, consistent, uniform pattern delivery without the need for blue tint
- Ergonomic handpiece and extended sapphire tip allowing convenient treatment around the eyes and on the upper lip
- Redesigned high-resolution graphic user interface that provides real time measurement feedback on screen
- A smart treatment control engine that calculates the depth of penetration and dosage delivery based on physicians' selection of energy and treatment level



Photos courtesy of Z. Rahman, M.D.



Acne scars before Tx



Acne scars after Fraxel Tx

A. Jay Burns, M.D. – Fraxel is my go to laser over all others for acne scarring and off-face fine lines and texture issues. It is also my preference for patients with mild-to-moderate facial wrinkles who insist on limited downtime.

Howard Conn, M.D. – The Fraxel laser is highly effective and safe in treating fine-to-moderate lines, lentigines, atrophic acne scars and increasing pigment in old surgical scars.

Jeffrey S. Dover, M.D. – The Fraxel SR1500 laser has been a dramatic advance in our therapeutic armamentarium for several specific indications. It's an effective resurfacing tool for treating photo-aged skin and improving mild-to-moderate wrinkling, as well as dyspigmentation in patients who want little downtime. It is our treatment of choice for acne scarring, with our results now approaching those, and in fact perhaps in some cases surpassing those, of CO₂ resurfacing combined with Erbium:YAG laser skin resurfacing.

Richard E. Fitzpatrick, M.D. – We routinely use Fraxel to treat photodamage of the face, neck, chest, hands and arms — we always see improvement in color, texture, fine lines and softening of deep lines. Significant skin tightening is also common. I consider it the treatment of choice for acne scars of all types, as well as traumatic and surgical scars. Fraxel is one of the few, safe treatments for melasma and we commonly use it for patients of all skin types. It is the only treatment that can be used safely as well as aggressively for treating any of these conditions off the face, and therefore is my treatment of choice for treating dyschromias, photodamage, or scarring in any location off the face.

Paul M. Friedman, M.D. – Our most popular indications are photorejuvenation and acne scarring. We have also seen clinical efficacy in treating surgical scars, melasma, striae distensae, post-inflammatory erythema, poikiloderma, hypopigmented scars and DSAP. We have observed significant improvement in texture and topography of the skin after treatment for acne scarring. We have successfully treated a variety of scars, including broader atrophic scars and pitted scars with minimal post treatment recovery. Significant improvement has been observed on all areas, particularly the cheek

What skin conditions do you choose to treat with the Fraxel laser and why?

Mathew Avram, M.D., J.D. – The best indications for Fraxel laser treatment include photodamage, melasma and acne scars. Many of my patients come to our office to improve their fine wrinkles and photodamage in order to look five to ten years younger. The Fraxel SR1500 laser is an excellent device for this type of patient. In my practice, it is my preferred laser treatment for acne scars, mild-to-moderate wrinkles and melasma. It also produces a substantial improvement in tone, texture and dyspigmentation.

Robert M. Adrian, M.D., F.A.C.P. – The Fraxel laser is the ideal treatment for acne scars because of its high efficacy with minimal downtime. Treatment is also effective for photo-aging, and is a very hot topic among my patients.



and temple areas. The fractional mode of delivery also allows you to safely treat off the face — including the neck, chest and upper back. In addition to improving acne scars, patients are also reporting a reduction in pore size.

Roy Geronemus, M.D. – I find the Fraxel SR1500 laser to be the gold standard for overall rejuvenation due to its efficacy, safety and minimal downtime. I also use the laser predominantly when treating acne scars, enlarged pores, surgical and traumatic scars, melasma and when improving skin quality, texture and tone. And now with the no blue dye roller tips, treatment is faster, more consistent and more ergonomic, allowing for a more efficient practice and a happier clinician.

Richard Gregory, M.D. – In my practice, the Fraxel laser is especially useful in treating the thin, crepe-like skin that occurs on the neck and hands. Unwanted brown spots from age and sun damage can be removed, and patients experience new collagen production for thicker, tighter skin. Fraxel fills a niche for those patients who want the benefits of ablative skin resurfacing — wrinkle reduction, skin tightening, textural improvement and pigment removal — who are not quite ready for the downtime that comes with CO₂ or erbium lasers.

Suzanne Kilmer, M.D. – Fraxel offers the best improvement in acne, hypopigmented and other scars without the risk and downtime of ablative resurfacing. There is more textural improvement than with other non-ablative modalities.

Gary Lask, M.D. – The Fraxel is an excellent treatment for photo-damage and acne scarring, giving predictable and reproducible results. It has the potential to create injury to the deep dermis without the healing issues associated with deeper ablative laser treatments.



Vic Narurkar, M.D. – Fraxel treatment is my gold standard for acne scars in all skin types (I to VI) including distensible (shallow) and non-distensible (ice pick) scars; off-face resurfacing for poikiloderma of civatte, photo-aging of face, neck and hands; infra-orbital skin crepiness in skin types I-V; full face resurfacing of skin types I to V for mild-to-moderate rhytides and lentiginos; and therapy resistant melasma in skin types I to V.

Photos courtesy of Vic Narurkar, M.D.



Melasma before Tx



Melasma after Fraxel Tx

Why is the depth of lesion penetration important?

Dr. Friedman – Deeper penetration provides a greater catalyst for natural generation of new collagen to promote deeper dermal remodeling than seen with traditional non-ablative techniques, thereby enabling greater success in the treatment of acne scarring and deeper rhytides.

Dr. Kilmer – The Fraxel laser's lesion depth of 1.4 mm allows for deeper collagen remodeling, releasing deeper scar tissue.



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What benefits do you see in having a continuous scanning handpiece?

Dr. Burns – The new roller tip has eliminated the need for blue dye, thus greatly enhancing patient’s ease of treatment with the procedure as well as streamlining patient flow, efficiency, while lowering costs.

Dr. Conn – The scanning technology in the Fraxel laser provides a uniformity of energy application in contrast to the competing systems that use a stamping modality. This results in more thorough treatment of the face.

What is your experience as to patient acceptance of Fraxel treatment?

Dr. Avram – We have 17 lasers in our practice. In terms of patient satisfaction, efficacy and benign side effects, the Fraxel laser provides the best treatments for acne scarring, melasma, wrinkles and photo-damage. The benefits of treatment for tone, texture and pigment are evident in my practice.

Dr. Narurkar – Patient satisfaction is key for any aesthetic procedure. We did a small study that is currently in preparation for publication. Fraxel laser treatment was the second highest in terms of patient satisfaction after Botox® cosmetic (Allergan, Inc., Irvine, Calif.). Previous non-ablative and tightening procedures had very low patient satisfaction rates and ablative procedures had an intermediary satisfaction rate due to prolonged recovery time.

Dr. Gregory – There is a trend among my patients to seek the maximum result possible given the least amount of downtime. This is especially true in a plastic surgery practice, where patients expect significant change with treatment. The Fraxel laser gives my patients a real alternative to ablative skin resurfacing, with minimal downtime. It also serves as an adjunct for my surgical patients who also want improved texture, tone and skin clarity to complement their surgical procedure.

Dr. Fitzpatrick – Our patients are thrilled, and their friends are pounding on the door requesting treatment. There has been huge patient acceptance, especially from those who wouldn’t consider laser resurfacing due to its associated risks and lengthy recovery period. The power of word-of-mouth has been incredible.

Do you feel the Fraxel laser has contributed to the profitability of your practice? How has it impacted your bottom line?

Dr. Narurkar – The Fraxel laser has significantly increased profitability. We did an analysis of the cost to benefit ratio. Fraxel had the highest return on investment per procedure. In terms of gross revenues, after introducing Fraxel treatment, my gross revenues increased by about 25%. Also, I was able to reduce the less profitable procedures.

Dr. Conn – Yes, Fraxel treatment is the most frequently performed procedure in our office. For me, every Fraxel laser case is profitable.

With all the available technologies you have at your disposal, why do you choose Fraxel laser?

Dr. Friedman – The Fraxel laser treats a wide variety of conditions and allows you to safely treat all skin types and off the face — including the chest, neck and hands with minimal downtime.

Dr. Narurkar – We use the Fraxel laser because of the proven safety and efficacy, peer-reviewed studies, science and proven track record with high patient satisfaction rates. I choose the Fraxel treatment over competitive technologies because of the proven results with peer review.

* Dr. Dover and Dr. Geronemus were not able to attend the Clinical Consensus meeting in person, however completed a clinical questionnaire prior to the event.

Photos courtesy of Z. Rahman, M.D.



Photodamage of the neck and chest before Tx



Photodamage of the neck and chest after Fraxel Tx