



Chemical / TCA peel

What is a chemical peel?

While chemical peel performed with a chemical solution is useful for removal of fine facial wrinkles and certain types of hyperpigmentation, which is a surgical treatment is an accepted method for deeper lines and acne scarred skin.

Both are effective methods for removing layers of skin to improve dermatological defects.

The chemical peel procedure (chemabrasion) is the procedure of choice for the eradication of fine wrinkles and has been much refined since 1960. It achieves the desired prolonged effect. Moderate tightening of the forehead skin may also be achieved for some patients without the risk of hair loss or obvious scars. It can be usefully performed in conjunction with other procedures, like the facelift procedure. Chemical peel removes the upper portion of the skin and stimulates the patient's own collagen formation beneath the treated area.

Best Candidate for a chemical peel

This rejuvenates the skin, giving it a fresh, smooth appearance. Generally, the ideal candidate for peels is one with minimal facial sag and finely wrinkled skin that has been constantly exposed to the elements - a patient who desires improvement, but, is not quite ready for a facelift.

Patients with fair complexions are better candidates than those with olive toned skin because with the latter, it is more difficult to blend the demarcation line (where the peel begins and ends). Every effort is made to "feather" (blend) this line in all patients. The different color and texture from one area to the other can be a permanent effect, even if ever so slight. Patients with darker skins are more likely to have irregular pigment changes. Women are better candidates than men because their skin is thinner and there is no heavy hair growth.

How TCA Peel is performed?

TCA and less often used Phenol, are chemical agents of choice. TCA has renewed interest and advantages. It is not absorbed by the skin like Phenol, and therefore, is free of the systemic side effects of phenol, which can not be taken lightly. TCA does not burn as deeply, so one is more likely to avoid total loss of pigmentation and hypertrophic (thickened) scars. Weaker chemical agents are more available, but, also with less strength, comes less effectiveness.



TCA can be applied repeatedly in one to three monthly intervals and its effectiveness is compared to Phenol with a much improved safety record. TCA is wonderful for the neck area and the tops of hands. A distinct advantage is that the strength can be altered to the needs of the patient.

The inflammatory reaction is red and crusty, peaking in 48 hours lasting at least 10-14 days. Frequently a slight pink discolouration may last up to 3-4 weeks. The epidermal skin regeneration actually begins the second day after application and that is completed usually by two weeks. Although this is not a surgical procedure, it can be quite uncomfortable for several days, especially when the entire face is treated at once.

Depending on your particular skin condition, the doctor may want to "prime" your skin with retinoic acid cream for a few weeks prior to the chemical peel. This would serve to make your skin more receptive to the forthcoming treatment. At the time of the procedure, pre-medication is a matter of surgeon's preference.

Application is section by section. It is necessary to come to the lip border; lips may blister but it is better than leaving a band of untreated skin and in the end you will have a nicer result.

Recovery after Chemical peel

Post-operatively there will be a burning sensation for a few hours after application, although vaseline will likely have been applied to reduce some of the burning and irritation. Medication may be prescribed to control intense itching, for the first few days if needed. After healing of the skin is complete, facial lubrication with moisturisers and retinoic cream is continued for 2-3 months and may be considered for continuous daily use.

It is important to remember that exposure to sunlight within 8 weeks following treatment, may result in unfavourable discolourisation. Hyperpigmentation is directly related to the sun's rays. All patients are strongly urged to stay OUT of the sun for this length of time. Hyperpigmentation may be permanent.

At approximately 2 weeks post operatively you will be allowed to apply an emollient sunblock cream. Your sunblock needs to be at least SPF 15 and must be used DAILY. In your interest, we highly recommend wearing a sunblock cream daily under any makeup used forever.

Risks and possible Complications

Streaking and missed spots may occur in spite of every technical effort to avoid them. Any blotchy pigmentation is minimised by having had a thorough and even cleansing of the skin prior to the original procedure. There can also be the darkening of pre-existing nevi (moles). It is suggested to remove concerning nevi prior to surgery in a separate procedure.

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People who carry the herpes simplex virus (and who are susceptible to cold sores) run the risk of aggravating that condition and special precautions are taken to avoid any problems.

Persistent redness is a possible annoyance and may even last months. It is suggested that alcohol intake increases erythema (redness) and for that obvious reason we say "do not indulge".

Hypertrophic heavy scar formation and keloids (thickened scars) are relatively rare. Experience dictates that scarring is likely to occur around the lips in patients with an active recurrent history of herpes simplex. It is for reasons like this, that we need and request, a thorough medical history prior to any cosmetic procedure.

Chemabrasion reduces the aged appearance of the skin and is often a substitute for a facelift. It is also done in conjunction with the facelift. One must consider all options.

This leaflet has been prepared to give a basic understanding of the procedure before a consultation takes place, and to cover many of the questions frequently asked about this type of cosmetic surgery. Final decisions should not be made until an individual assessment has taken place with the surgeon.

There is no obligation on the part of the patient to undergo surgery by attending for consultation. If you have any further questions or would like to arrange a consultation please do not hesitate to call us.