



e.p.t.q.[®] SCHOLAR

“
 e.p.t.q.[®] has stable properties and high cohesiveness for body procedures that require consideration of the characteristics of the area and the degree of sagging of the skeleton and tissue. e.p.t.q. is a suitable and safe filler.
 ”

PRIME PROMOTION

BUTTOCK VOLUMIZING AND LIFTING USING HYALURONIC ACID DERMAL FILLER

Hanbit Hong, MD, explains why he believes the monophasic HA dermal filler e.p.t.q.[®] is the ideal product for buttock lifting



BEFORE PERFORMING any HA dermal filler treatment, design is the most important thing to consider, no matter which part you are injecting. Considering the characteristics of the treatment site, the degree of sagging of the current skeleton and tissue, and the overall harmony with other parts, it is also important to think of a design with the rheology of HA dermal filler in mind, proceed with the treatment according to the design, and check and modify the

"The rapid subcutaneous infiltration of lidocaine for a fasciift proved fatal at a dose of 275g at a commercially available concentration. Instantaneous absorption occurs with an IV injection of lidocaine, and a dosage of 20mg/kg can produce cardiovascular collapse and generalised convulsions". Therefore, I conduct the procedure with a maximum 200mg of lidocaine for facial treatments and 400mg for the body. In general, I try to control the total lidocaine dosage below 100mg for the face and 200mg for the body.

Cohesivity test and results
 The monophasic HA dermal filler e.p.t.q.[®] series shows high cohesivity and gel integrity (Table 1).

Case review
 When we look at the case in (Figure 1), the patient had some volume at the posterior buttocks, but the volume at the side pelvis was relatively insufficient, resulting in their legs looking shorter. In general, the most protruding area in a woman's side profile is the area marked 'B', which is the greater

e.p.t.q.[®]

e.p.t.q.[®] is a CE marked medical device. Please refer to the instructions before use.

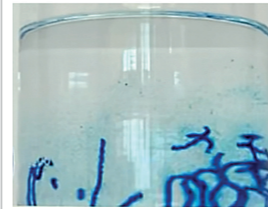
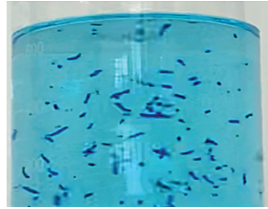
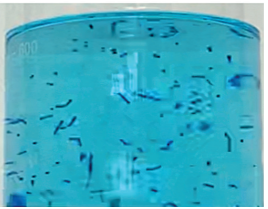
| Product | 15s | 70s | 95s | G' (Pa) | G'' (Pa) |
|---------------------------------------|---|---|---|---------|----------|
| e.p.t.q. [®] Lidocaine S 500 |  |  |  | 356.87 | 68.82 |

Table 1. Cohesivity test and results
 The monophasic HA dermal filler e.p.t.q.[®] shows high cohesivity and gel integrity.

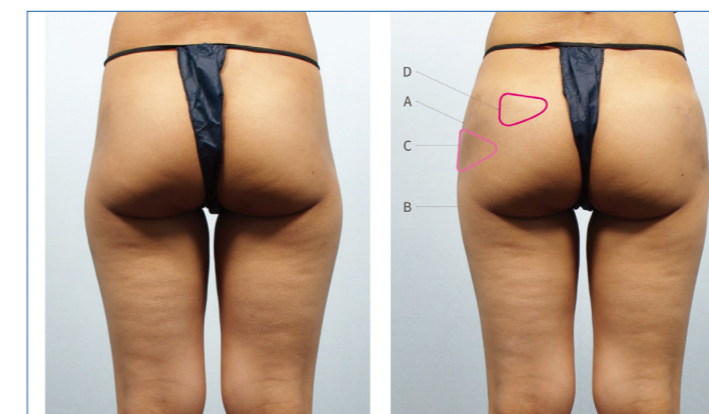


Figure 1 (A) Before, (B) after buttock procedure using HA dermal filler. Patient: 41-year-old female. Treated area: Hip (Buttock). Product used: e.p.t.q.[®] S 500 (JETEMA, Korea). Amount injected: Total 200ml (100ml/side).

e.p.t.q.[®] is excellent for large-volume injection because there are almost no side effects due to the minimum addition of chemical crosslinker (BDDE), an essential additive for the HA dermal filler manufacturing process. e.p.t.q.[®] has sufficient G' and cohesivity to withstand the muscle and dynamic movement that it has a product line with a variety of excellent rheology. In conclusion, e.p.t.q.[®] is excellent for body contouring as well as the face.

BUTTOCK VOLUMIZING AND LIFTING USING HYALURONIC ACID DERMAL FILLER

"It is also important to think of a design with the rheology of HA dermal filler in mind, proceed with the treatment according to the design, and check and modify the details as you inject if necessary."

Hanbit Hong, MD, explains why he believes the monophasic HA dermal filler e.p.t.q.[®] is the ideal product for buttock lifting



HANBIT HONG, MD, President of LUXWELL Clinic, Korea; Seoul National University College of Medicine, Seoul, Korea

BEFORE PERFORMING any HA dermal filler treatment, design is the most important thing to consider, no matter which part you are injecting. Considering the characteristics of the treatment site, the degree of sagging of the current skeleton and tissue, and the overall harmony with other parts. It is also important to think of a design with the rheology of HA dermal filler in mind, proceed with the treatment according to the design, and check and modify the details as you inject if necessary.

Unlike an implant, HA dermal filler can be injected in small quantities into the necessary area, and it has a surprising advantage in that it can be applied to a large area through a small puncture. Additionally, if the patient does not like the result, you can use hyaluronidase to dissolve the HA dermal filler.

The book 'Tumescent Technique' by Jeffrey A. Klein, MD, mentions,

"The rapid subcutaneous infiltration of lidocaine for a facelift proved fatal at a dose of 2.5g at a commercially available concentration. Instantaneous absorption occurs with an IV injection of lidocaine, and a dosage of 20mg/kg can produce cardiovascular collapse and generalised convulsions."

Therefore, I conduct the procedure with a maximum 200mg of lidocaine for facial treatments and 400mg for the body. In general, I try to control the total lidocaine dosage below 100mg for the face and 200mg for the body.

I prefer to use HA dermal filler without lidocaine for body procedures (over 100ml). The e.p.t.q.[®] series supply both types, with and without lidocaine.

Also, the high cohesiveness and lifting capacity of HA dermal filler helps to maintain the shape without migration. The cohesive strength of HA dermal filler gel can also be confirmed through a simple experiment (Table 1).

Cohesivity test and results

The monophasic HA dermal filler e.p.t.q.[®] series shows high cohesivity and gel integrity (Table 1).

Case review

When we look at the case in (Figure 1), the patient had some volume at the posterior buttocks, but the volume at the side pelvis was relatively insufficient, resulting in their legs looking shorter.

In general, the most protruding area in a woman's side profile is the area marked 'B', which is the greater trochanter part of the femur. The area marked 'A' is the ASIS (anterior superior iliac spine), which is usually the second protruding area, and 'C' is usually a recessed area, which is why it is usually called a hip dip. The subject of the case needed volume at the lateral pelvis, but she did not want her legs to look shorter by having too wide and flat hips, so instead of B, A was the new pelvic point, and C was not fully filled but

only moderately filled to give a 'not too fat' image.

I punctured both sides with an 18G needle, then injected 30cc of tumescent on each side using a 19G disposable cannula and treated the site using e.p.t.q.[®] (HA dermal filler without lidocaine, JETEMA Co., Ltd., Korea) with the 70mm 19G disposable cannula. If the area injected with HA dermal filler is stimulated by the movement of the muscles, it is likely to be uncomfortable, so most of the volume is filled in a moderately deep fat layer that is not very close to the fascia, and some areas that are not easily volumised were filled in a slightly shallow fat layer.

When I re-evaluated the volume after volumising areas A and C, the protruding area B was lifted and appeared less protruding, so the patient and I agreed to create more lifting by filling area D rather than filling part C. There was no complaint of pain during and after the procedure, and a total of 200ml was used (almost the same amount in both the left and right sides). The patient was asked if she wanted a touch-up procedure after 1 month, but the patient said it was unnecessary, and she was very satisfied with the result.

I recommend checking the patients' condition around 2 weeks to 1 month after the procedure, and if it feels that the initial volume is not enough, perform an additional touch-up procedure at the 1 month mark.

Why do you choose to use e.p.t.q.[®]?

I like e.p.t.q.[®] because it has excellent safety due to the small amount of chemical crosslinker (BDDE). When

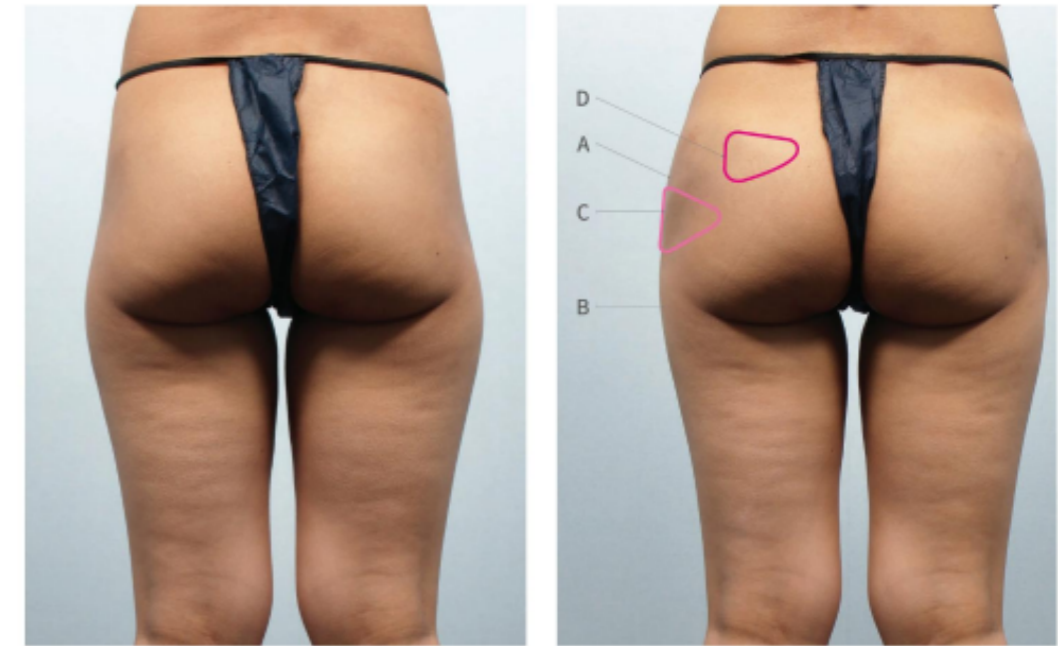


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injecting filler on the nose bridge, it is common for the filler to spread over the glabellar region and result in an 'avatar' nose, but with e.p.t.q.[®], I do not see those side effects as much as others because of its stable rheology⁶ and cohesiveness⁶. That is why I love using e.p.t.q.[®] filler.

What do you like most about e.p.t.q.[®]?

e.p.t.q.[®] is excellent for large-volume injection because there are almost no side effects due to the minimum addition of chemical crosslinker (BDDE), an essential additive for the HA dermal filler manufacturing process. In addition, I like the fact that it has a product line with a variety of excellent rheology. e.p.t.q.[®] Lidocaine S500 is a good choice for the nose tip and chin that is required to withstand strong compression,

whereas e.p.t.q.[®] Lidocaine S100 is apt for fine wrinkles. e.p.t.q.[®] has sufficient G'⁶ and cohesivity⁶ to withstand the muscle and dynamic movement. In conclusion, e.p.t.q.[®] is excellent for body contouring as well as the face.

► For more information, contact global@jetema.com

Table 1 JETEMA. Data on file. Experiment with 'Gavard-Sundaram Cohesivity Assay'³, Cohesivity tested at room temperature using 0.1mg of methylene blue to 1.0ml of each HA gel, Constant rotational frequency of 160rpm. Rheology Test using TA instrument DHR-2, 2022.

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|--------------------------------------|-----|-----|-----|---------|----------|
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Further Reading

1. Klein, Jeffrey A. Tumescent Technique: Tumescent Anesthesia & Microcannular Liposuction. Mosby, 2000.
2. Sunshine I, Pike WW. Value of thin-layer chromatography in two fatal cases of intoxication due to lidocaine and mepivacaine. N Engl J Med 271:48, 1964.
3. Yukioka H, Hayashi M, Fujimori M. Lidocaine intoxication during general anesthesia. Anesth Analg 7:207, 1990.
4. JETEMA. Data on file. Experiment with Gavard-Sundaram Cohesivity Assay, and Rheology Test. April 2022.
5. Hema Sundaram et al. Cohesivity of Hyaluronic Acid Fillers: Development and Clinical Implications of a Novel Assay. Pilot Validation with a Five-Point Grading Scale, and Evaluation of Six U.S. Food and Drug Administration-Approved Fillers. Plast Reconstr Surg. 2015 Oct;136(4):678-686
6. Lee, Won, et al. Clinical application of a new hyaluronic acid filler based on its rheological properties and the anatomical site of injection. Biomedical Dermatology 2.1 (2018): 1-5.