



NEOFOUND

A NEW CONCEPT OF BIOSTIMULATION





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WHAT IS SKIN CONDITIONING

Modern facial aging concepts are based on the fact that this process of involution interests all structures located on different levels: bone, soft tissue and skin¹⁻³ (see table). Each layer is responsible of different blemishes. Those related to skin surface, such as fine lines, lost of firmness, smoothness and brightness, skin discolouration are very common and responsible of unattractive face⁴⁻⁵. The new concept of skin reconditioning includes a wider technique than the traditional bio revitalization because, in addition to modulate the fibroblasts, it induces other selective activities in different structures and cell lines like keratinocytes, muscle fibers, melanocyte, fibroblasts and preadipocytes.

INJECTION TECHNIQUES

Neofound can be injected into papillary or reticular dermis with every technique, it is recommended to use a 30g needle. Alternatively Neofound can administered via microneedling or Microinfusion stamp combined with BTXA.

HOW IT IS SUPPLIED

5 x 3ml vials

ACTIVES

	ACETIL CYSTEINE	NIACINAMIDE Vit PP	RESVERATROL	AMINOACIDS	HA HYALURONIC ACID	HEXAPEPTIDE
ANTIOXIDANT EFFECT	X	X	X			
POSITIVE BIOLOGICAL EFFECT				X	X	
AESTHETIC OUTCOME		X			X	X

A GLOBAL APPROACH TO REJUVENATION WITH SKIN RECONDITIONING

N-ACETYLCISTEINE

Acetylcysteine is the N-acetyl derivative of the amino acid L-cysteine. Acetylcysteine is an important reducing agent, so it is known for its high antioxidant properties. The thiol group (sulfhydryl) confers antioxidant effects and is able to reduce free radicals. In addition to the ability to regenerate glutathione, one of the most important antioxidants available to the human body, N-acetylcysteine has also proven to be effective as an anti-apoptotic agent.

RESVERATROL

Resveratrol (3,5,4'-trihydroxy-trans-stilbene) is a stilbenoid, a type of natural phenol. It has been shown to stimulate cell proliferation and collagen production with skin tone enhancement and a general anti-aging effect. In addition, it's antioxidant action would be even higher than that attributed to vitamin C and vitamin E and more effective than bioflavonoids. It also block the enzyme cyclooxygenase-2 with anti-inflammatory action and it activates superoxide dismutase (SOD2) with antioxidant effect.

NIACINAMIDE (VIT PP)

Niacinamide (vitamin B3) is a precursor to the nicotinamide adenine dinucleotide [NAD(P)], family of endogenous coenzymes. The reduced forms of these cofactors [NAD(P)H] have antioxidant properties. Shindo et al.

Enzymic and non-enzymic antioxidants in epidermis and dermis of human skin. *J Invest Dermatol.* 1994;102:122–124.

It has also been well-documented to reduce skin yellowing, hyperpigmentation, erythema and blotchiness. Cutaneous pigment is reduced via inhibition of melanosome transfer from melanocytes to keratinocytes. Hakozaiki et al.

The effect of niacinamide on reducing cutaneous pigmentation and suppression of melanosome transfer. *Cutaneous Biology.* 2002;147:20–31.

Niacinamide reduce fine lines and wrinkles, increasing collagen production and reducing excess dermal glycosaminoglycans (GAGs), characteristic of photodamaged or wrinkled skin. Bissett DL, Oblong JE, Berge CA.

Niacinamide: a B vitamin that improves aging facial skin appearance. *Dermatol Surg.* 2005;31:860–865.

Lastly, niacinamide increases both the lipid and protein components of the stratum corneum subsequently reducing trans epidermal water loss (TEWL) and increasing the skin's barrier properties. Tanno O et al.

Niacinamide increases biosynthesis of ceramides as well as other stratum corneum lipids to improve the epidermal permeability barrier. *Br J Dermatol.* 2000;143:524–531.



GLYCINE – PROLINE - ARGININE

Glycine and lysine are the primary amino acids found in collagen, accounting for at least 50 percent of its amino acid content. Glycine accounts for one-third of the amino acids in the collagen molecule. Arginine is classified as a semi essential amino acid. As a precursor of nitric oxide, arginine have an important role in vasodilatation.

LOW AND HIGH MOLECULAR WIEGHTS HYALURONIC ACID

The simultaneous presence in a single solution of different HA molecular weights (high and low) enables the integration of endogenous HA levels with balanced concentrations of HA1

- Low weight HA 100 kDa 30 mg per vial (1%)

Which binds to specific receptors, stimulates fibroblasts and keratinocyte proliferation, providing nourishment and deep hydration to the aged skin.

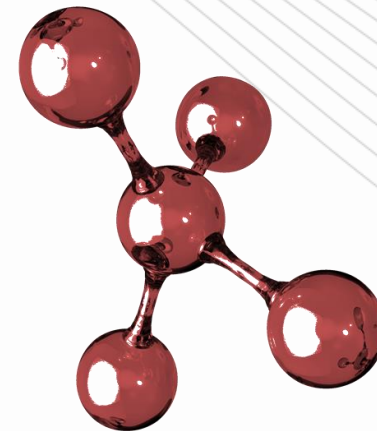
- High weight HA 1400 kDa 30 mg per vial (1%)

Owing to its high capacity to bind water molecules and interact with collagen and proteoglycans, exerts a dermal scaffold action.

ACETYL HEXAPEPTIDE

The Acetyl Hexapeptide is a peptide chemically composed of six amino acids (acetyl glutamate-glutamate-methionine glutamine-arginine-arginine), with activity similar to that of botulinum toxin A. It is similar to the N terminal end of the SNAP-25 protein, with which it competes for a position on the complex SNARE1, responsible for the release of catecholamines, chemical mediators of muscle contraction.

The Acetyl Hexapeptide-8 fragments the SNAP-25 protein irreversibly, preventing the formation of the SNARE complex resulting in permanent paralysis of the muscle. When applied, it reduces the tonic contraction of facial muscles responsible for the appearance of expression lines.



CUSTOMIZED TREATMENT

Different areas require different techniques. Different clients need different dosages.

WHEN: 2 sessions for young skin (Glogau 1 & 2), 3-4 sessions for aging skin (Glogau 3 & 4). Sessions must be done every 2 weeks. Repeat the cycle after 6-9 months or doing single monthly session as touch-up.

STANDARD DOSAGE: Face 1.5ml, Neck 1ml, Décolleté 1.5ml, Hands 1ml

WHERE: Face, neck, décolleté, hands

TECHNIQUE

Recommend 30G needle for injection. Microneedle or Microinfusion stamp

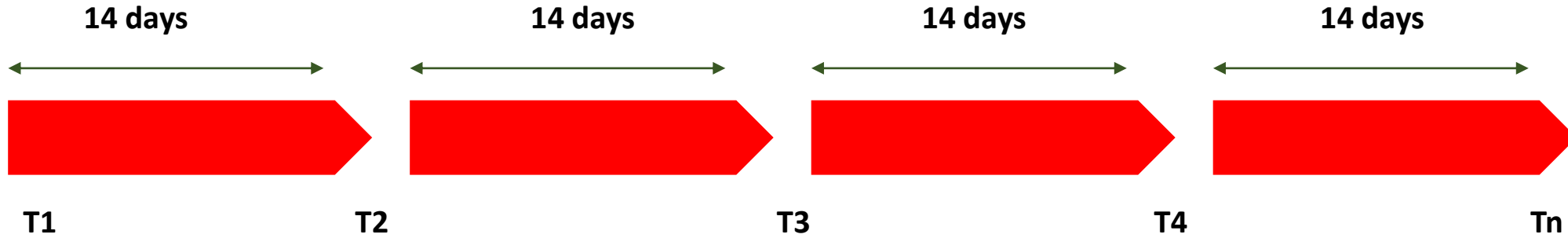
CONTRAINDICATIONS

- Pregnancy and breastfeeding
- Known sensitivity to any components
- Bleeding disorders
- Hormonal disease and organ diseases
- Severe autoimmune disease
- Patients suffering from keloid formation, hypertrophic scarring, or developing inflammatory skin condition
- Permanent fillers in the area to be treated
- Skin disease or abnormal conditions
- Acute or chronic infection on the area to be treated
- Herpes

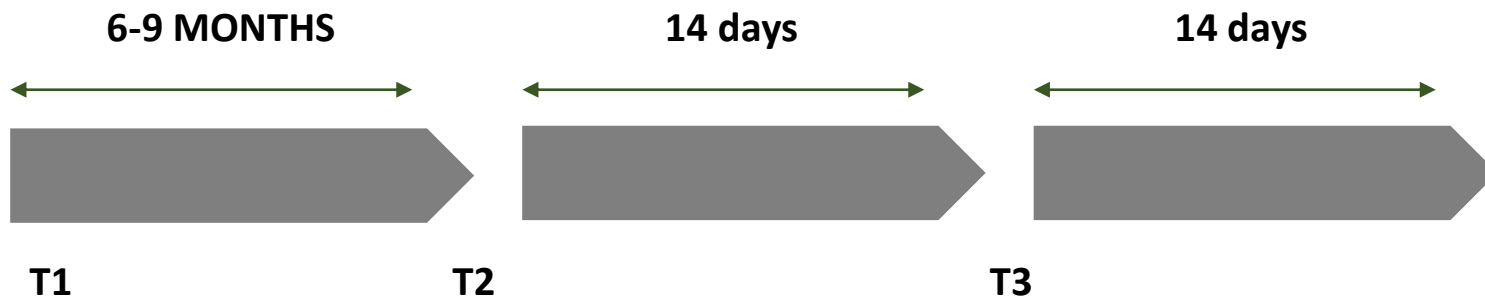
GLOGAU CLASSIFICATION

DAMAGE	DESCRIPTION	CHARACTERISTICS
Type I (mild)	"No wrinkles"	EARLY PHOTOAGING <ul style="list-style-type: none"> • mild pigmentary changes • no keratoses • minimal wrinkles PATIENT AGE-20'S OR 30'S <ul style="list-style-type: none"> • minimal or no makeup • minimal acne scarring
Type II (moderate)	"Wrinkles in motion"	EARLY TO MODERATE PHOTOAGING <ul style="list-style-type: none"> • early senile lentiginos visible • keratoses palpable but not visible • parallel smile lines beginning to appear PATIENT AGE-LATE 30'S OR 40'S <ul style="list-style-type: none"> • some foundation usually worn • mild acne scarring
Type III (advanced)	"Wrinkles at rest"	ADVANCED PHOTOAGING <ul style="list-style-type: none"> • obvious dyschromia, telangiectasias • visible keratoses • wrinkles present even when not moving PATIENT AGE-50'S OR OLDER <ul style="list-style-type: none"> • heavier foundation always worn • acne scarring present that makeup does not cover
Type IV (severe)	"Only wrinkles"	SEVERE PHOTOAGING <ul style="list-style-type: none"> • yellow-gray skin color • prior skin malignancies • wrinkles throughout, no normal skin PATIENT AGE-60'S OR 70'S <ul style="list-style-type: none"> • makeup cannot be worn-it cakes and cracks • severe acne scarring

PROTOCOL



RECALL PROTOCOL



- Type 1 & 2: 2 sessions
- Type 3 & 4: 4 sessions

- Repeat after 6-9 months
- Or single monthly sessions

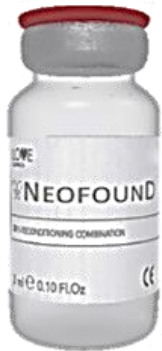
Treatment every 14 days. Protocol can be tailored to each client.

BTXA MICROINFUSION FACIAL



0.6mm
20 x needles

20-30iu 1.5ml



28-36 Days

28-36 Days

28-36 Days

28-36 Days



T1

T2

T3

T4

DO NOT REPEAT THE BOTOX FACIAL BEFORE 3 MONTHS