D. GUILLO\* Lyon

### INTRODUCTION

Tensors, the latest and greatest family of threads, are available in 2 different formats: re-absorbable and permanent. Intensive, often tendentious, marketing strategies, appeal to the market's pre-existing, cognitive biases. The deception is further reinforced by means of confusion which they use to mislead conscientious practitioners who are trying to make the best decisions based on sound logic and accurate data. In this article, we provide solid rationale to enable you to select the best thread version to satisfy your patients' high expectations, as well as your own. We will then discuss the best approach using permanent threads which alone offer long-term results.

Permanent threads currently represent 15 to 20% of all implanted threads and they are constantly being improved. Their permanence makes them superior to re-absorbable threads which, contrary to what their promoters would suggest, only last from a few weeks to a few months. The most appropriate implantation techniques will also be discussed.



Here, we provide arguments for the use of permanent, notched threads as an effective tool for current practices and practitioners.

#### A-WHAT DO PATIENTS WANT?

Patients seek to improve their general appearance which is often a tired and/or sad look.

Many patients will have already experimented with various fillers (Liquid Lift® for example) designed to rejuvenate their appearance via injections but only provide pseudo-triangulation, insufficient support for heavy faces, and do nothing for the lower, chinstrap region.

Many patients will have had a mini or full surgical lift, but this will not have alleviated their sad appearance since, in most cases, such techniques do nothing for the malar region.

\*Email: <u>denisguillo@yahoo.fr</u>

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In most cases, they will have observed their original facial oval slowly deteriorating and probably have heard, all too often, that they always look tired. They may also have noticed that they could improve their appearance simply by pulling their facial tissue up and back. This often rightfully convinces them that some kind of tissue lift is necessary. On the other hand, a *surgical* facelift may not be required, and they may prefer "tensor threads". Here we discuss why the latter might be the preferred approach.

#### B-WHAT DO PRACTITIONERS RECOMMEND?

They will, of course, first offer the solutions with which they are familiar, and, for this reason, they should invest some time expanding their "tool-kits" by taking additional training. In any case, they should never try techniques they have not yet fully mastered.

**Practitioners** might suggest any or all of the following approaches:

- injections of hyaluronic acid, in particular using
- Dr Di Maio's well-known, MD Codes<sup>TM</sup> protocols using Allergan<sup>®</sup> which works for patients with diminished volume, not just sagging tissue, since, in the latter case, this technique would only provide an unconvincing illusion of triangulation. Eventually, the weight of the post-injection tissue will exacerbate the sagging despite an attempt to mask this effect via dilation. Nevertheless, in many cases, injections do help since sagging is often accompanied with volume loss, but this approach should only be considered after effective tissue repositioning.

- numerous rejuvenation treatments, peelings and deep stimulations using various physical agents (RF, lasers, HIFU, etc.) smooth the tissues but do not actually provide any lift. Nevertheless, they can be used to enhance the effects of valid lifting techniques.

- "tensor threads", which are relatively new, can be used to lift facial tissues but their use is complicated due to confusing marketing dialogue. Re-absorbable and permanent threads are so different that it's virtually impossible to perform a valid comparison.<sup>(1)</sup>



EXAMPLE No. 1

Images, taken before and 1 month after, presented a few years ago by a company promoting re-absorbable threads. They issued such photos to all thread-using practitioners to be presented as their own personal results and misled patients. According to the photos, the results were great, very natural,

and desirable, however, there are some issues:

- it's a fact that, as fully explained in our article <sup>(1)</sup>, re-absorbable threads never provide such results.

- in the 2<sup>nd</sup> image, *postural modification* (chin projection), along with extra lighting, removes all the shadows and exaggerates the results thus giving the *impression* of effective rejuvenation.

- upon deeper inspection, it can be seen that the only major difference is the disappearance of the bitterness fold which was significant not only due to sagging but also due to DAO hypertonia. (This conjunction often being present.) *The truth is that only botulinum toxin can treat such hypertonia as threads are not designed to do so!* The author of this article has demonstrated that only *combined intervention* (threads + botulinum toxin) can provide such dramatic results. (*Photos 5a and 5b*)

In fact, there is even more evidence.

Chinstrap lifting, normally used to remove bitterness folds, lifts the cutaneous tissue, and removes the associated artefacts (pigmentary stains, nevi, etc.). This fact is particularly clear in our results as illustrated in *Photo 6 Superimposed Before/After Images.* In the second image presented here, there was no impact on the cheekbones and, just behind the bitterness folds, which have disappeared, there is a significant pigmentary stain which has not budged!

Enlargement of the images shows that, although the surrounding cutaneous pores remain perfectly visible, a *very d1sturbing* blurring became apparent throughout the entire commissural region.

These 2 facts confirm that that these images are fake, and this is a marketing deception! They have undergone <u>significant</u> Photoshop editing as *it would be impossible to replicate such results using the indicated technique*!

Surgeons might suggest:

- a surgical lift which is relatively sophisticated but the traditional methods of lifting tissues. They are constrained to use this approach to ensure good, long-term results, however, they will have noticed a significant reduction in the demand for this type of intervention;

- surgical thread-loops (surgical thread and Elasticum<sup>(2)</sup>, to form circles which are then tightened, as required, to consolidate a traditional lift and so they are already familiar with the use of permanent threads;

- notched threads which provide excellent support and, without compromising any professional ethics, their advantages can be investigated;

- malar implantation in combination with a surgical lift while using this new thread in a region to be definitively treated without resorting to lipofilling. (A lift is much more effective than a mere volume expansion.)

- these threads also offer other advantages. They are much less invasive while preventing scarring, preserving the precious cutaneous vascular infrastructure, greatly minimize morbidity rates, Permanent, notched suspension threads: permanence oblige



Photo 6: Superimposed EasyLift® Before/After Images (Note the difference in height of the facial stains).





Photos 5a/5b: Before and 4 Months after EasyLift(3) 3 regions + Azzalure n the DAO.

and provide surprisingly effective/natural results, i.e. they offer all the advantages of permanent threads *as long as they are implanted in a strategic manner*.<sup>(3)</sup>

#### C-WHAT DO LABORATORIES RECOMMEND?<sup>(1)</sup>

They offer both re-absorbable and permanent threads, as well as various methods of implementation.

Re-absorbable threads are composed of glycolic, polylactic, and/or polydioxanone acid, whose lifespans vary but, in general, are relatively short-term. Some laboratories falsely claim extended duration based on the fact that a few molecules continue to linger for several years. These are smooth threads, implanted in significant numbers, whose sole virtue is that they generate short-term tissue stimulation as they are reabsorbed, or notched threads (bi-directional for the mostpart) with the claim that they shorten the tissues via a linear concentration. This effect does not last any longer than the thread's natural lifespan (i.e. only a few weeks). Despite the claims of some, they do not provide any greater effect or lifespan than re-absorbable threads, (Example 1). Long dissertations asserting tissue regeneration are based on poor histology rather than actual results and do not provide any solid, photographic evidence.

In 1999, permanent bidirectional, **notched threads** were introduced. Today, there are 2 types: monomaterial using notched polypropylene (Aptos<sup>TM</sup>), and bi-material using polyester/silicone which were first offered in 2007 by 1st SurgiConcept<sup>TM</sup> as Spring Thread<sup>®</sup>. Their length, solidity, and notches can provide very simple lifts (often suggested by laboratories as a first approach) or more complex lifts. The latter can be very effective but are less accessible. Who could want anything more than great, sustainable results?

In summary, only permanent threads offer such advantages. The numerous re-absorbable threads only provide minimal, short-term results of debatable quality despite the fact that deceptive marketing dialogue continue to play on the inherent fears of patients and practitioners to promote their use. Notched, suspension threads are, therefore, a relatively recent alternative for the treatment of dermo-hypodermic sagging which was previously only possible via surgery. The latter approach was not always accessible to everyone nor was it beyond esthetical criticism. For practitioners, these threads are the *only means* of lifting sagging tissue via an ascending redistribution.

For surgeons, they represent *an alternative lifting technique* offering great advantages, but their use is completely different from the traditional surgical approach.<sup>(5)</sup>

### 2<u>effective use</u>

Having presented their inherent advantages, they can only be fully realized via **appropriate and effective use.** 

20 years ago, Dr. Marlen Sulamanidze first introduced this new tool to the world. At the time, it was offered as a short, bi-directional permanent thread offering minimal advantages. Today, after much refinement, it's a very attractive option for patients.

### As with all threads, effective use begins with accurate dialogue, along with supporting images.<sup>(1)</sup>

The promotion of re-absorbable threads is often based on carefully-elaborated pseudo-science. In actual practice, they quickly dissolve inside tissue. In contrast, permanent threads are long-term and must be implanted with great care. As always, practitioners are completely responsible for what they do but, in the case of permanent threads, the commitment is long-term.

There is no room for lies, approximations, or unrealistic expectations. Honesty is essential and all information must be rigorously accurate in terms of indications, thread characteristics, implantation details, results, complications, and long-term expectations.

#### A-INDICATIONS

These threads are clearly more advantageous than the re-absorbable threads, however, they must be implanted properly. Their application ranges from the most basic correction of minor jugal tissue sagging



Photo 3 : Aggressive/Non-Aggressive Notches. up to the correction of significant sagging of the entire face and neck with heavy or light skin (Photos 1 and 2). The ability to apply this in an effective and sustainable manner to resolve increasingly difficult indications is highly correlated to the quality of the installation technique.

Honesty in this domain requires an explanation of realistic expectations based on the indications, the chosen thread, and the implantation technique.



Permanent, notched suspension threads: permanence oblige

For single-year results, re-absorbable threads vs. permanent threads are recommended. Longer-term results *(which most patients want)* require permanent threads combined with more complex, powerful implantations. It would be absurd to employ the EasyLift<sup>®</sup> technique with weak, short-term, re-absorbable threads and expect any power or durability! (cf. Complications)

#### B-PERMANENT'THREADS

There are 2 types available on the French market: mono and bi material. *(Photo 3)* 



Photos 1a/1b: Face/Neck Before and 1 year after EasyLift®.

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- mono-material: polypropylene, mono-stranded, notched threads (Aptos<sup>TM</sup>) are traditional threads but are now offered with effective, solid notches. Nevertheless, in our opinion, they are too aggressive and, especially in the scalp region, can result in immediate or latent inflammation.

- bi-material: polyester threads coated with siliconeelastomer and equipped with soft notches, were first introduced in 2007 to avoid excessive aggression. They include 1st SurgiConcept<sup>TM5</sup>s Spring Thread<sup>®</sup> (2008) and Thread & Lift<sup>TM7</sup>'s Infinite-Thread<sup>®</sup> (2018) which are similar in appearance but have different infrastructures and behaviors. - 1<sup>st</sup> SurgiConcept<sup>TMb</sup>s original Spring Thread<sup>®</sup> which has a twisted, dual-braided, polyester core within a silicone sheath. it's tough but flexible which makes it suitable for soft tissues. Its inner spiral can be stretched and so provides a limited degree of elasticity.

- Thread & Lift<sup>TM</sup> 's Infinite Thread<sup>®</sup>, although welldesigned with its straight, mono-braided core and nearly-smooth exterior, is not well-secured to its sheath. This deficiency, which is the Achilleds' heel of bimaterial threads, can result in dissociation of the core/sheath and thus complicating excision which can be a serious problem. We are speaking from our own professional experience (without which we would not have deemed ourselves qualified write this article!). Refer to the chapter entitled "Complications" for more details.

#### C-IMPLANTATION METHODS & TECHNIQUES

The currently achievable results are the result of ongoing refinements and, since this is such an



Photos 2a/2b: Before and 4 Months After Facial EasyLift<sup>®</sup> + DAO Azzalure<sup>®</sup>.

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Diagram 1: Short Threads.

Diagram 2: Long, Straight,. (Parallel Installation)

important topic, it has been given its own chapter in this article. The selection and mastery of the most appropriate implantation method will help to ensure consistently-satisfying results.

Permanent threads can ensure long-term results however they must be installed using the most effective techniques. The latter can be judiciously selected by following the best practices rules which we will briefly discuss here<sup>(3)</sup> but must be employed with common sense.

- only use flexible, well-made, permanent threads with nonaggressive notches (our preference is 1st SurgiConcept<sup>TM's</sup> well-proven Spring Thread<sup>®</sup>;

- use the appropriate number of threads in each problem region and treat all problem regions (especially the malar and temporal). Do not use an excessive number of threads in the "neck/lower demi-face" regions as this does not correct a "sad" appearance;

- use the most appropriate implantation vectors to obtain the most natural results;

- ensure the right implantation depth (superficial/mid hypodermis) and the right redistribution to obtain effective, ascending concentration of the tissues;

-use a long-term method i.e. one which can be re-tensioned.



Diagram 3: Long ''X" Installation.

Diagram 4: EasyLift®.

Correspondingly, EasyLift<sup>®</sup> is the only effective method <sup>(4)</sup> as it's a dual-mount whose suspension, using smooth threads, ensures long-term results.

The simplest implantations (straight or parallel) are the most appropriate for beginners and should only be performed using re-absorbable threads, not permanent ones, because, in either case, the results would never exceed 1 year.

It's absurd to claim that permanent threads can easily be replaced every year since this would mean that the thread, and/or the installation, is inadequate and that would belie the "long-term" (3, 5 or even 10year lifespans) promises. Such irresponsible assertions are dangerous incongruities which only the most careless practitioners could or would promote.

There are only 2 main types of installations: the simple and the complex.

-the simple implantations (*Diagrams 1 and 2*) include the most basic, straight (parallel) "U" or "V" configurations and are called "free" because the threads are free-floating. This makes them difficult to locate for later removal and only provide up to 1-year results. The parallel configuration

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#### EXAMPLE N° 2

A great before/after image taken from the internet in B&W or in color has been available for a long time but, in January 2016, the Infinite Lift<sup>TM (6)</sup> inventor announced a supposed 3-year result (44-47 years of age) during a permanent-thread presentation. In our experience, this can only be a *maximum of 2 months, not 3 years,* and this fraud must be eliminated from all discourse.

For these identical images, the associated dialogue has varied from 2 to 3 or even 4 years. First attributed by its author in 2016 to the Infinite Lift<sup>TM</sup> technique with no indication of the thread type, the dialogue has varied (Congrès IMCAS, and SOFCEP articles, and zealous colleagues on Facebook) and then used, by the original author of these beautiful but outdated photos, to promote Infinite Thread<sup>®</sup> and Thread & Lift<sup>®</sup> as promoted.

Currently, the images, and other lies, are touted as being examples of Infinite Thread<sup>®</sup> or Thread & Lift<sup>®</sup>, as witnessed at Imcas 2020 (7). The suggested implementation is now called "parallel", which is straight and weak and dating back to 2000 when threads were first introduced.

Then, in January 2016, 3-year results were claimed for an implantation performed in 2012, however Infinite Thread<sup>®</sup> only dates back to 2018. This is nothing less than willful confusion. The flagship images touted for this brand could only have been possible after the development of EasyLift<sup>®</sup> which, alone, could provide such results. This is true even if implemented by the practitioner in its simplified version in 2012 with 1st SurgiConcept<sup>°</sup>s Spring Thread<sup>®</sup> which was used by the latter at that time.

To use these beautiful images in order to promote an inferior thread (cf. Complications) while knowing their true history, and to recommend the use of the easy-to-remove but very weak parallel technique, is an act of "sournois parasitisme" (the French legal term for "underhanded parasitism"). It successfully misleads practitioners and patients regarding its actual benefits which, today, are offered by Infinite Thread<sup>®</sup>. This is yet another example of false advertising. Such results could never be obtained with the recommended thread and associated configurations. is only suitable for use with re-absorbable threads. The best form of "simple" configuration is a "U". It consists of 2 strands of notched threads placed within sagging facial tissue. They are placed in an inverse "U" sufficiently high underneath the scalp to ensure solidity. This approach ensures a minimum 2-year life-span.

- complex: "X", "Y" or EasyLift<sup>®</sup>, (*Diagrams 3 and 4*), have the advantage that multiple threads can be simultaneously located for easy removal. These configurations are only suitable for use with permanent threads but can ensure a minimum 3-year lifespan. EasyLift<sup>®</sup>, which can be retensioned, provides good results for up to 15 years.

#### D-RESULTS

Illustrating these techniques to others via photographic evidence is always complicated and requires effective, rigorous techniques. It's also essential to maintain professional honesty by avoiding artificial embellishment (i.e. photoshopping) and misleading dialogue. A future article will discuss inherent manipulations and keys to detecting fraud. Such lies dishonor the practitioner as well as the thread manufacturers.

Two notable examples of such dishonesty are presented here. The first involves re-absorbable threads (showing apparent results that are impossible for these types of threads) and the second involves permanent threads. Their perpetrators have published much of this kind of deception via the internet. We would like them, in advance, to understand that we do not appreciate being cynically abused in this manner and hope that they also understand that our shedding light on such misleading activity is not intended to be an act of denigration.

To abuse practitioners, and/or patients, does a great disservice to the technique as well as to permanent, notched threads whose value we would like to defend. Since we are independent professionals, we can expose fraudulent acts involving permanent threads just as we do in the case of re-absorbable ones.<sup>(1)</sup>

#### E-COMPLICATIONS

As described in our 2015 article<sup>(8)</sup>, the solution for complications is still the same, for the most-part, and should only be used in the case of significant complications

especially infections. The only effective solution is to remove the suspect threads *since their persistence within the tissue continues to provide effective harbor to harmful germs*.

Easy excision of all threads should, therefore, is essential for the patient's health and our own liability. Does this apply to all threads? Experience is always objective!

We will now present a comparative analysis of the excision of 3 permanent, notched threads: Aptos<sup>TM</sup>, 1<sup>st</sup> SurgiConcept<sup>TM</sup> and Thread & Lift<sup>TM</sup>.

Since its use ceased a few years back, we have decided to against any detailed discussion of Silhouette Lift<sup>®</sup>. This thread remains intact long after its notches have been re-absorbed. Tiny nodes remain but, otherwise, it's relatively smooth. Excision of these threads (Photo 9) was very laborious, not due to the quasi-friction of any of the micro-nodes, but due to the presence of the temporal textile plate used to secure the upper attachments. It also continued to inflict residual pain long after the short-term results had disappeared. The marketing dialogue emphasized the "safety" aspect of the re-absorbable notches, but the enduring presence of these polypropylene nodes was carefully overlooked. The error of using such dialogue, the incoherency of its complex implantation, and the use re-absorbable notches, has been perfectly explained here.

## Permanent, notched suspension threads: permanence oblige

A description of the general excision technique was provided in our 2015 article <sup>(8)</sup> and is still valid.

- in addition to long, 30G, anesthetic infiltration and Nokor<sup>TM</sup> needles, 4 tools are necessary to complete this intervention: tweezers, fine scissors, a Mueller hook, and a new ancillary tool, acting as a type of "core drill", which is carefully placed around the thread to remove the sheath which tends to adhere to the surrounding tissue. (*Photo 8*)

- locate the thread (the approach varies for long and short threads and for *free* (simple implantations) and *fixed (*"X" and EasyLift<sup>®</sup>));

- anesthetize the tissue along its trajectory but *without using* excessive hydrotomy which would only bury it deeper;

- try to apply tension (only possible with longer threads) so that it can be located with the hook;

- hook it to bring it to the surface;
- massage it along its trajectory in both directions;

- loosen the notches gradually using minimal traction and massaging. Do not apply too much or too brisk a traction as it may break the thread.



Photo 8: Silhouette Lift<sup>®</sup> Dual-Implantation Excision Products (threads + plates).



Photo 9: The Tools.



Photo 10: EasyLift® Half-Module. Complete Excision.





Photo 11: Aptos® Thread.

Photo 14: Damaged Aptos® Thread Excision Product.



Photo 12: Intra-buccal Exposure of a Short Aptos<sup>®</sup> Thread.



Photo 13: Hooking an Aptos<sup>®</sup> Thread.

It also depends on the fibrotic quality of the tissues. (In contrast to malar tissue, scalps effectively imprison the thread.)

Note that the longer the excised thread portion, the more fragile it becomes, and, therefore, the more important it's that the applied traction be limited.

In principle, and despite any vibration of the freed notches, the operation is pain-free. As long the hydrotomy is not excessive, the excision recovery is much simpler than that of the original installation.

Short threads are, by far, the most difficult to remove (*Photo 9*), followed by long threads in simple, straight (parallel) installations. Secured threads can be located by applying traction at an upper point, (EasyLift<sup>®</sup> smooth thread) which helps to identify the complete subjacent trajectory. This traction also makes it easier to hook. (*Photo 10*)

Lastly, it's clear that to claim that any excision is "easy" is accurate. it's only easy when the thread is infected and does not stick to the tissue. To the dismay of many patients, a good excision requires much patience and care.

We will now discuss a reproduceable **excision test** for the 3 threads:

#### 1. Aptos<sup>®</sup>

(Photo 11)

Aptos<sup>®</sup> are *marine-blue*, or transparent, polypropylene, simplynotched, monofilament, bidirectional threads. They are now much longer than their original versions and are sometimes installed in multiples. It was often necessary to remove them due to asymmetry, migration and/or exposure (*Photo 12*). There were many mediocre-quality copies of the original short threads which were easily detected by their marine-blue color once the fine fibrotic sheath surfaced under hook tension (*Photo 13*).

The notches rendered the threads more fragile, but the latter remained intact and could be excised more easily if the thread were pulled without opposing the notches. By pulling in the appropriate direction, the thread and notches could be removed intact, though flared. If pulled in the wrong direction, the notches hung up and the thread would become damaged (*Photo 14*). Contrary to what the promoters of re-absorbable threads would suggest, this does not apply to current Aptos<sup>®</sup> threads. Although breakage of this thread was once an issue, today, as the result of improved manufacturing and quality control techniques, it is rare for this to happen.

#### 2. 1<sup>st</sup> SurgiConcept<sup>™</sup>

(Photo 15)

Spring Thread®, introduced in 2008, consists of an original, twisted core composed of a dual, polyester braid and sheathed with a colorless, silicone-elastomer material with round notches. They are available in 2 sizes for face and body (Ø 0.5 and 0.8 mm) and their elasticity is approximately 15% which provides a great deal of flexibility. As the result of their colorless appearance, they can sometimes be difficult to distinguish from the surrounding tissue. Nevertheless, the core has strength and visibility underneath the transparent sheath. When removing, slow and prudent traction, applied to lengthen and expose the thread, combined with careful, bidirectional massage, helps to release the notches. The sheath and core remain intact despite the applied tension and pressure, and complete removal can often be achieved with a single pull. (Photo 10)

#### 3. Thread & Lift<sup>™</sup>

(Photo 16)

Certified in 2018, Infinite Thread® has a smooth core with a single, gray polyester braid surrounded by a purple-gray, well-notched, silicone-elastomer sheath. They are less flexible and have no elasticity but, due to their color, are easy to locate when at the tissue surface. Once there, the sheath is not very cohesive and even if the hook is applied prudently, it immediately breaks up and becomes dissociated from the core which frays then quickly breaks even if the short segments are pulled very carefully. (Photo 17). Hook entry points must be made every 3 cm to pull the thread without breaking it, however, it's not possible to remove the entire sheath and that is a serious issue in the case of an infection. it's impossible to use this solution with facial implantations unless the patient is significantly disturbed (as was the case in 2 of our excisions).

**Complete excision of this poorly-designed thread which is much more fragile than advertised, is actually impossible**, and this is a real problem in the dialogue of manufacturers, promoters, and trained practitioners, who firmly claim that its excision is easy and complete anytime after its implantation <sup>(8)</sup>. In the light of this objective (yet painful) experience, it's evident that this type of dialogue is based on false science (the manufacturer cannot be unaware of this problem). To support this kind of misrepresentation is a willful and dangerous hoax perpetrated against the health and well-bring of potential patients.

# Permanent, notched suspension threads: permanence oblige



Photo 15: 1st SurgiConcept's Spring Thread<sup>®</sup>. Body & Face (Note the visibility of the transparent, polyester core).



Photo 16 : Infinite Thread<sup>®</sup>.



Photo 17: Infinite Thread<sup>®</sup> stripped and cut after an excision.

In conclusion, only 2 of the 3 threads (Aptos<sup>®</sup> and 1<sup>st</sup> SurgiConcept<sup>TM</sup>) **meet the excision requirements.** Thread & Lift<sup>TM</sup> does not meet the requirements and is not, therefore, recommended. Its promotion is only based on misleading paganization of dialogue used to promote other threads thus inducing *dangerous confusion*.

### <u>3 THE LONG-TERM</u>

It provides all the benefits of permanent threads.

It cannot be overemphasized that these stable threads are only as effective as their implantation techniques. 1 year – which, in our opinion, is not a long time – for simple, straight (parallel) installations, 3 years for complex "X" and "Y", and more than 10 years for the re-activable EasyLift<sup>®</sup>. The choice is simple! From the outset, long-duration threads and techniques should be recommended even if an extended lifespan requires multiple re-tensioning sessions.

To present any conclusions that a parallel configuration can provide a 10-year lifespan is nothing but a lie, especially for a thread that only has a 2-year lifespan. Similarly, showing permanent-thread results after 1 hour or even 2 days is also unreasonable even if the public is sufficiently naive to applaud it! Again, *confusion is cultivated by advertising lifespans that compete with other threads*.

Injection of volumizing products (re-absorbable) and/or fat can be performed does not prevent the installation of permanent threads and can be applied throughout their lifecycle. Also note that powerful malar repositioning can avoid the need for injections and MD Codes<sup>TM</sup>. In our practice, we only use hyaluronic acid in the presence of threads, and we exclude calcium hydroxylapatite-type "tissue inducers" (Radiesse<sup>®</sup>) and polylactic acid (Elansé<sup>®</sup>) whose unpredictable What about a secondary intervention after permanent threads have been implanted? During a surgical lift, for example, the threads can be cut with a lancet, but it's not advisable to remove them at any cost. Shortening them as much as possible is quite sufficient.

What about the persistent presence of permanent threads in the face once their effect has subsided? The fact that this question is asked indicates a genuine and valid concern for long-term liability.

While simple installations of the Aptos<sup>®</sup> threads are still susceptible of migrating due to their stiffness and despite their length, this phenomenon is less noticeable with the more flexible, non-aggressive, silicone threads. Since the latter are completely biocompatible, they can remain in place unless there is good reason to remove them and a longer-term technique is preferable.

Consider their presence when choosing an injectable.

As biocompatible and as well-integrated as they are, they are implants and the human body can sometimes become irritated (diminished immunity). It would be an error to try to mitigate such a risk by using an amalgam with re-absorbable threads. We re-iterate, here, that, when using permanent threads, it's essential to consider one's long-term liability.

As proposed in the EasyLift<sup>®</sup> technique, without compromising the quality or lifespan of the results, it's important that a <u>minimum</u> number of <u>removeable</u> threads be used.

### 4 <u>conclusion</u>

The potential of permanent threads is considerable and must be implanted in an optimal manner via effective installation techniques. *Nevertheless, practitioners must consider their increased liability*. Installing threads within people's faces without any concern regarding the future status of such threads, or their maintenance requirements, is extremely irresponsible. Unmanageable situations are already being reported (difficulties in removing problem threads) as the result of

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inflammatory complications are difficult to manage.

a series of unusual lies, and this situation is intolerable. it's essential to remind everyone of their professional responsibilities, especially in terms of honest discourse regarding the actual capabilities of permanent threads. A humble return to reality is essential! it's unethical to continue to make false claims regarding the virtues and reputations of any thread, and/or its installation, based on supposed experience whose inherent lessons have been completely disregarded.

The reputations of all players are at risk here and it's essential to protect your own professional reputation as well as that of others.

Permanence oblige, i.e., long-term threads and implantations require all players to exercise more objectivity, care, and honesty to protect everyone's long-term liabilities and reputations.

Conflict of Interest Disclaimer: Whether he uses them or not, this author is not in a state of any conflict of interest with regards to the products cited in this article.

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