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OPEN UP... *for* BOTOX

Now, patients can get neuromodulator injections to treat oral conditions—and wrinkles—all in one appointment.

BY RACHEL NAUD

Patients could be going to their dentist for another type of freezing: Botox. Although most Canadian dentists are allowed to use Botox for therapeutic purposes, dentists in the U.S. and in British Columbia are also allowed to use the neuromodulator for aesthetic purposes. Xeomin Cosmetic can also be used in dentistry based on college and provincial guidelines. Alberta has a formal program for dentists to use neuromodulators, such as Xeomin Cosmetic and Botox Cosmetics and injectable fillers.

TREATING ORAL CONDITIONS WITH BOTOX

Because Botox is a quick, relatively painless, non-invasive treatment that helps relax muscles and decrease pain, it is used for a variety of oral conditions. Dentists currently use Botox for conditions such as bruxism, teeth grinding, migraines, TMJ syndrome, jaw pain, headaches, spontaneous/irregular jaw movements, gummy smile, lip enhancements, jawline slimming,

establishing ideal lip lines and smile lines for aesthetic dentistry and control of drooling.

“Many of these conditions lacked a good prognosis before Botox [migraines/headaches/TMJ] or involved treatments that were ineffective [teeth grinding appliances] or required surgical intervention [establishing lip lines, gummy smile treatment],” says Dr. Louis Malcmacher, DDS, MAGD, president of the American Academy of Facial Esthetics.

Typically, when used for therapeutic purposes, results from Botox last between four and six months. However, when used for cosmetic reasons, results last approximately three to four months. Although these findings are nothing new, what is more recent is that patients can now get non-oral Botox treatments in their dentist’s chair.

FLOSS AND BOTOX

Many jurisdictions now allow dentists to use Botox for both therapeutic and cosmetic uses. “Having dentists administer Botox and dermal fillers makes a lot of sense, as they are one of the few groups that have specialized education in head and neck anatomy,” says Dr. Warren Roberts, DMD, a general dentist who practises in Vancouver. He is the co-founder and clinical director for the Pacific Training Institute for Facial Aesthetics (PTIFA), an advanced anatomy-based

facial rejuvenation training organization, and his practice is the number one dental administrator of Botox in North America. “They are highly trained and experienced in providing facial injections and they work in a clinical environment, and understand the importance of using safe and sterile instruments. Additionally, they can discuss all concerns regarding a patient’s teeth, smile and face.”

IN GOOD HANDS?

Dr. Roberts says patients shouldn’t be wary of getting Botox injections at the dentist since dentists must take advanced post-secondary education to be able to administer Botox. “However,” he warns, “it’s important for patients to be aware that many provinces and states do not regulate the training requirements or the quality of the programs dentists take. There are a number of one-day/online courses that claim to offer adequate “Botox training.” But my belief is that, in order to be an excellent practitioner in Botox, you need advanced and extensive training that covers a deep understanding of head and neck anatomy, as well as extensive hands-on experience.”

Regardless if the patient is having Botox for cosmetic or therapeutic use, Dr. Roberts says all patients should ask their dentist about the extent of their Botox training. Questions to consider include: Where did they take their training? How many hours was the program? How much hands-on experience do they have? How many hours of anatomy review were provided?

Dr. Frances Jang, MD, FRCPC, associate clinical professor at The University of British Columbia and dermatologist at Skinworks in Vancouver agrees. “Make sure your dentist has an interest in full facial aesthetics and that he knows how to treat Botox complications,” she says. ☺

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