

# Expert Experience with Licellvi



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## Progressive Facial Aging: From Structural Support Loss to Visible Aging



### Reference

Swift A, et al. The Facial Aging Process From the "Inside Out". Aesthetic Surgery Journal. 2021.

## The Structural Biology of Facial Sagging

- Sagging is not only skin aging
- Facial sagging is a multilayer structural failure involving:

1. Bone
2. Deep fat
3. Muscle—ligament support
4. Superficial fat
5. Dermal envelope

- Key message

Sagging is not a single-layer problem.

## Conceptual Framework of Structural Failures (Adapted from Swift et al.)

### 1. Foundation Failure

Bone resorption + deep fat loss

### 2. Suspension Failure

Muscle weakness + retaining ligament support failure

### 3. Contour Failure

Superficial fat compartment imbalance

### 4. Envelope Failure

Dermal ECM failure

### ➤ Key message

Facial sagging is a progressive collapse from deep support to superficial envelope.

#### Reference

Swift A, et al. The Facial Aging Process From the “Inside Out”. Aesthetic Surgery Journal. 2021.

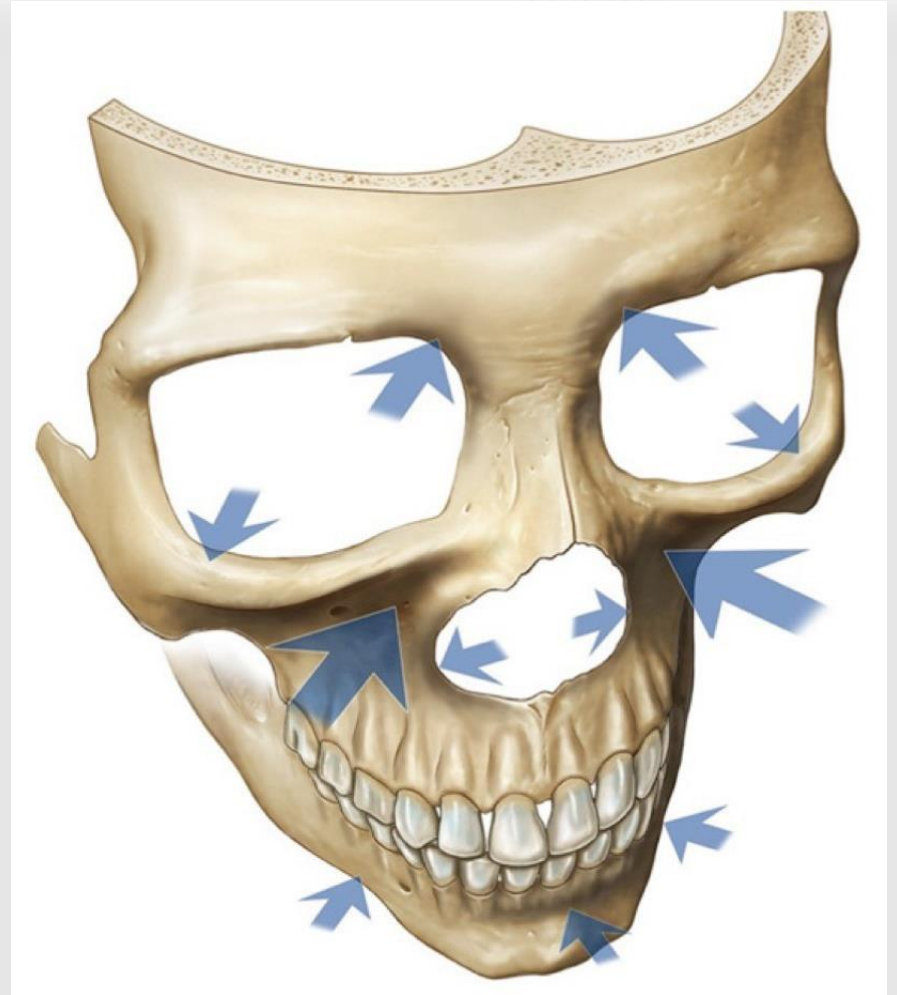
## Foundation Failure I

### Facial Bone Resorption

- Age-related skeletal changes include:
  - \* Orbital aperture enlargement
  - \* Maxillary retrusion
  - \* Pyriform aperture widening
  - \* Mandibular angle and chin remodeling
  - \* Loss of bony support for overlying soft tissue

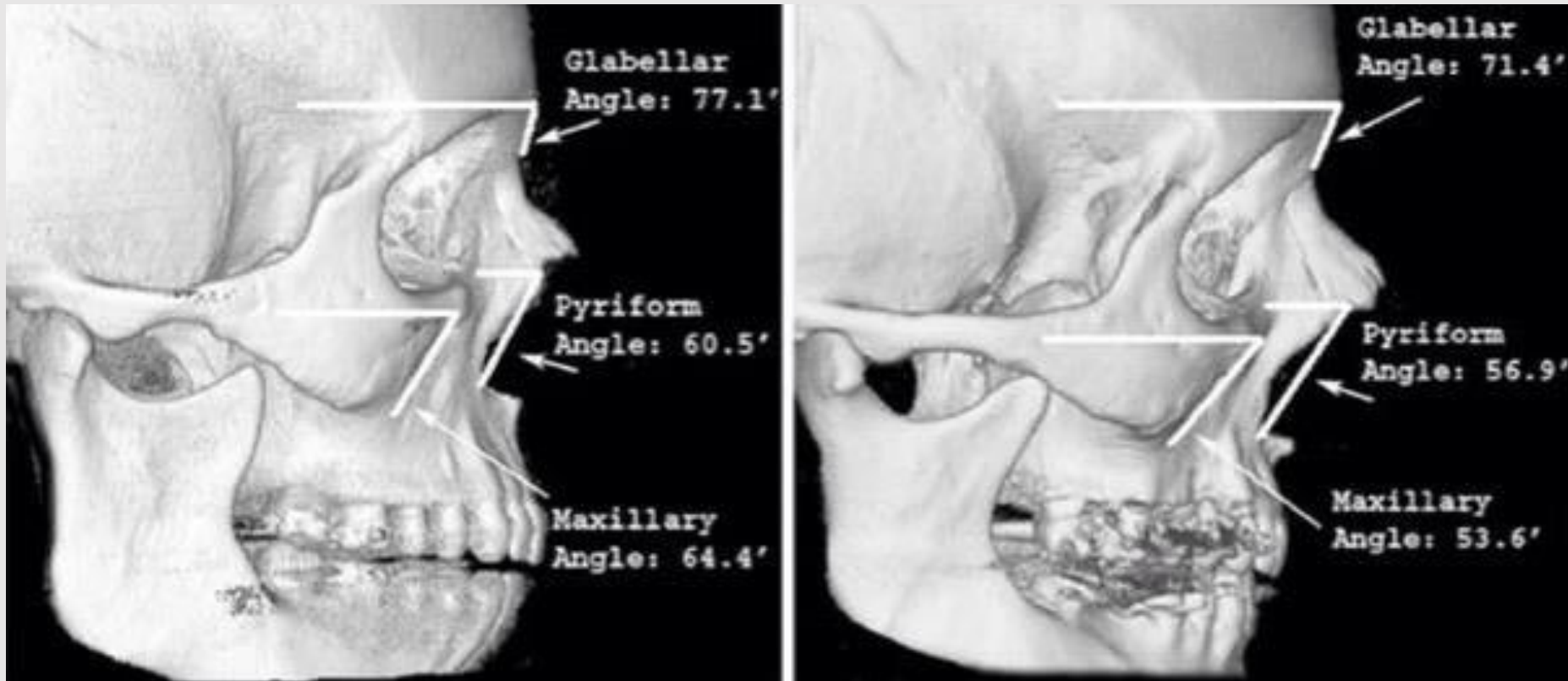
### ➤ Key message

When the bony foundation recedes, the soft tissue loses support.

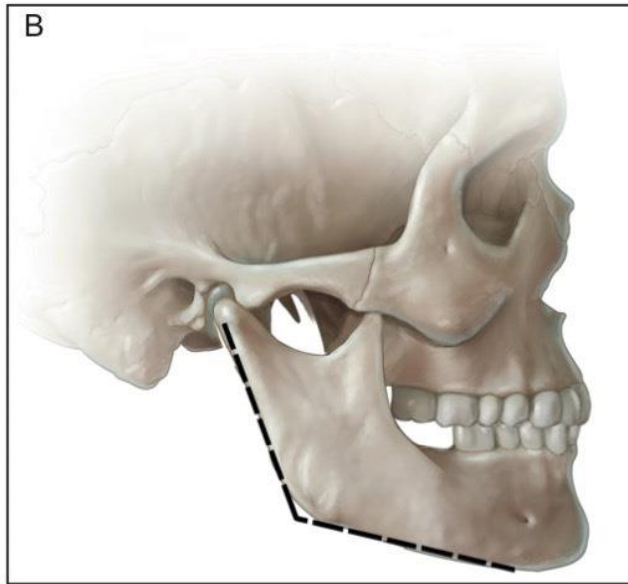
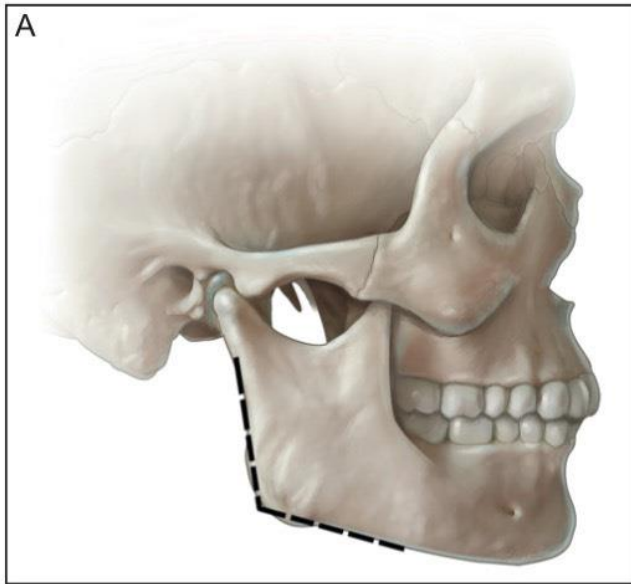


Ziai K, Lighthall JG. Periocular rejuvenation using hyaluronic acid fillers. *Plast Aesthet Res.* 2020;7:53. doi:10.20517/2347-9264.2020.151.

- The piriform (piriform angle) and the maxilla (maxillary angle) significantly recede with aging, from youth (left) to old age (right).
- The maxillary angle decreased by about 10 ° between young (age < 30 years) and old (age > 60 years) individuals.
- The maxilla is more susceptible to age-related loss than the zygoma .



Shaw RB Jr, Kahn DM (2007) Aging of the midface bony elements: a three-dimensional computed tomographic study. *Plast Reconstr Surg* 119:675–681



- \* ↓ Chin Projection
- \* ↑ Mandibular Angle
- \* Anterior Mandibular Groove
- \* Pre-jowl Sulcus

- \* Jowl Fat Descent
- \* Marionette Line
- \* Loss of Jawline Definition

Reference

Swift A, et al. The Facial Aging Process From the "Inside Out". Aesthetic Surgery Journal. 2021.

## Foundation Failure II

### Deep Fat Deflation

- Deep facial fat compartments act as structural support.
- Aging-related changes:
  - \* Deep medial cheek fat volume loss
  - \* SOOF deflation
  - \* Reduced anterior cheek projection
  - \* Increased midcheek groove
  - \* Increased nasolabial fold appearance
- Key message
  - Deep fat loss creates loss of support before visible superficial sagging.

## COSMETIC: ORIGINAL ARTICLES

# Facial Aging: A Quantitative Analysis of Midface Volume Changes over 11 Years

Boehm, Lucas M. M.D.; Morgan, Aaron M.D.; Hettinger, Patrick M.D.; Matloub, Hani S. M.D.

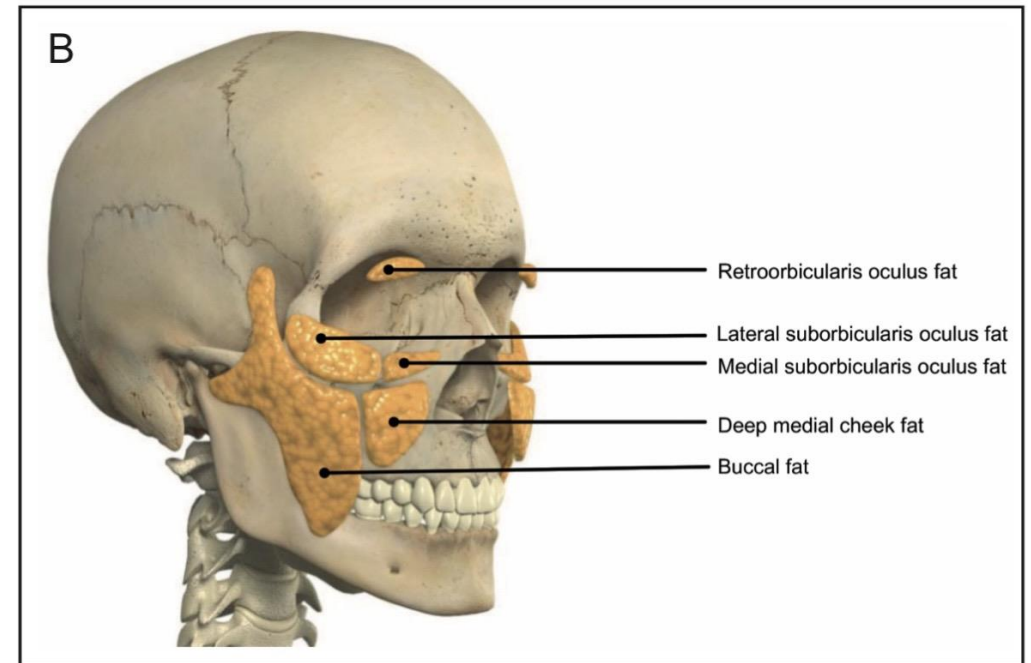
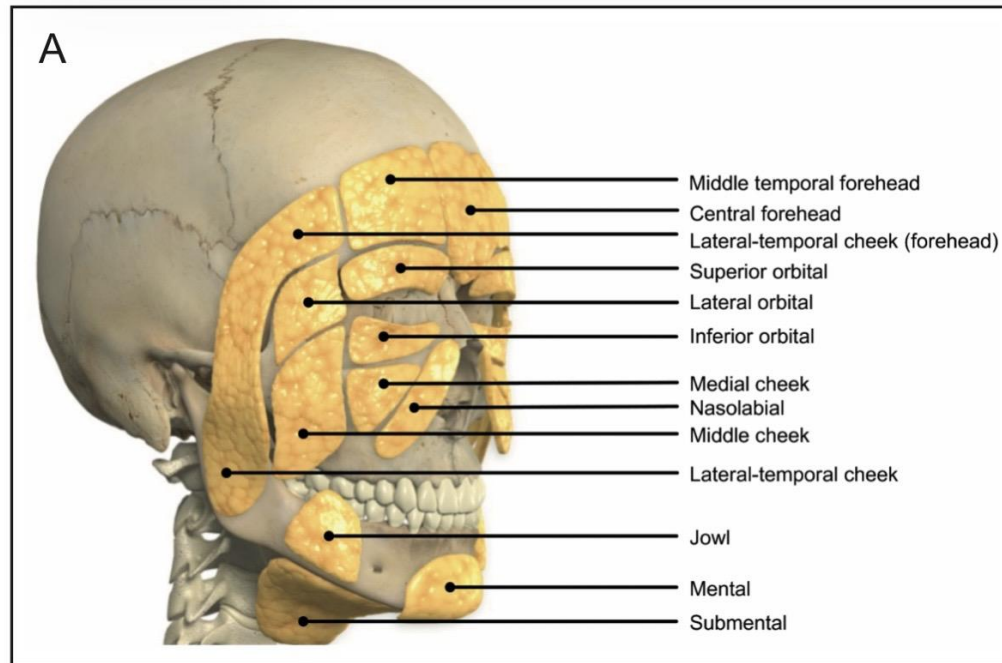
[Author Information](#) 

*Plastic and Reconstructive Surgery* 147(2):p 319-327, February 2021. | DOI: 10.1097/PRS.00000000000007518

Patients lost an average of 11.3 percent of their initial superficial fat volume and 18.4 percent of their initial deep fat volume.



Patients lost a greater percentage of deep facial fat volume



### Superficial Fat Compartments

“facial contour and dynamic movement.”

Aging leads to inferior fat descent rather than uniform atrophy, contributing to:

- Brow ptosis
- Deepened nasolabial fold
- Marionette line
- Jowl formation

### Deep Fat Compartments

“structural support and facial projection.”

Aging is characterized predominantly by selective fat atrophy, especially in:

- \* Deep medial cheek fat (DMCF)
- \* Suborbicularis oculi fat (SOOF)
- \* Retro-orbicularis oculi fat (ROOF)

Reference

Swift A, et al. The Facial Aging Process From the “Inside Out”. Aesthetic Surgery Journal. 2021.

## Deep Fat Loss Causes Superficial Pseudoptosis

Deep fat deflation causes loss of support.



Superficial fat appears to descend.



This creates pseudoptosis.

### ➤ Clinical pearl

Some “sagging” is not true skin excess, but loss of deep support.

## Contour Failure II

### Superficial Fat Imbalance

- Aging superficial fat changes include:
  - \* Atrophy in selected compartments
  - \* Hypertrophy or prominence in others
  - \* Inferior shift
  - \* Compartment separation
  - \* Jowl formation
- Key message

**Aging is not just volume loss. It is volume imbalance.**

## Is Ligament Really “Laxity”?

### ➤ Traditional view:

Ligament stretches(laxity) → tissue falls

### ➤ Modern view:

- \* Bone resorption
- \* Deep fat loss
- \* Fascial attenuation
- \* Dermal weakness



Loss of effective anchoring

### ➤ Key message

Ligament failure rarely happens alone. It is part of a support-system failure.

#### Reference

Swift A, et al. The Facial Aging Process From the “Inside Out”. Aesthetic Surgery Journal. 2021.

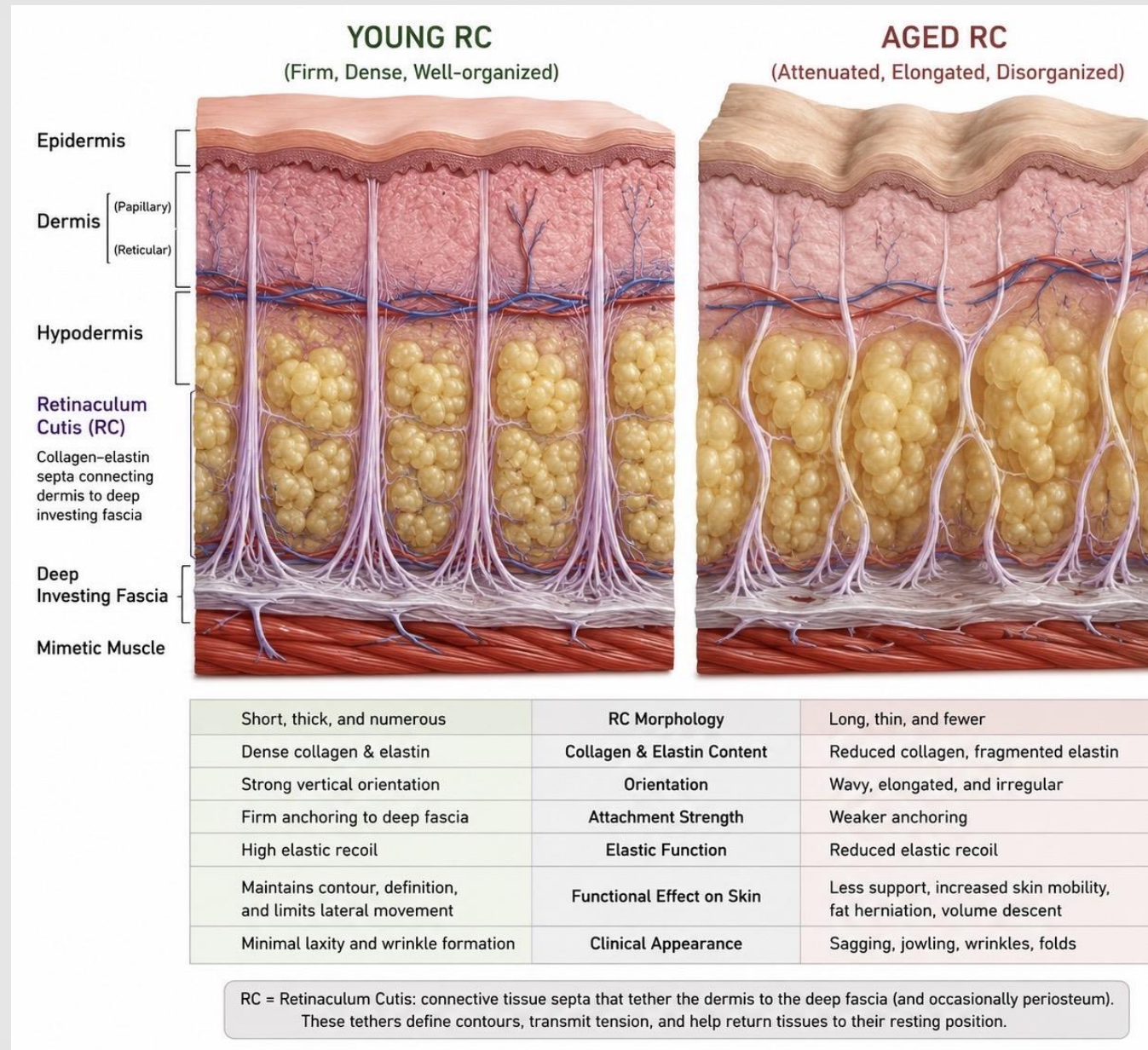
# Retinaculum Cutis: The Missing Link Between Skin and Deep Structures

## What is Retinaculum Cutis (RC)?

**Retinaculum cutis (RC)** is a three-dimensional collagen-elastin network within the hypodermis that connects the skin to deeper anatomical structures.

It may attach the dermis to:

- Deep fascia
- SMAS
- Muscle fascia
- Tendon
- Periosteum (in selected regions)



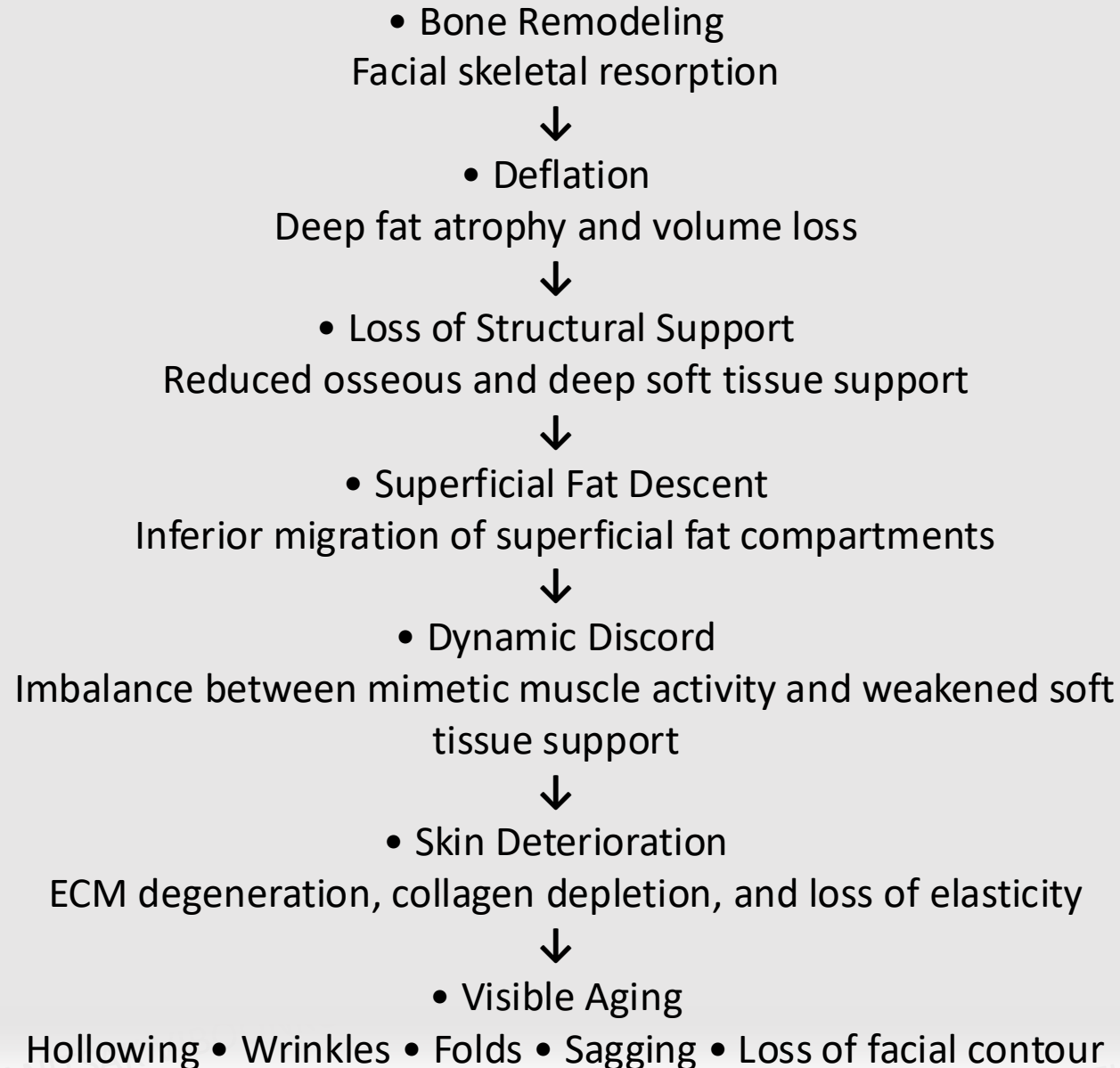


# Functional Classification of Retinaculum Cutis

The morphology of RC varies according to its mechanical function.

| Type            | Primary Function                                        | Clinical Example                 |
|-----------------|---------------------------------------------------------|----------------------------------|
| Boundary RC     | Defines anatomical boundaries and contours              | Jawline, Nasolabial Fold, Brow   |
| Anchor RC       | Firm fixation between dermis and periosteum/deep fascia | Mental crease, Mandibular region |
| Animator RC     | Transmits mimetic muscle movement to the skin           | Forehead, Cheek, Perioral region |
| Accordion RC    | Allows skin folding during joint motion                 | Elbow, Knee                      |
| Elastic-band RC | Provides elasticity and recoil                          | Neck, Axilla                     |

# The Inside-Out Cascade of Facial Aging



## LICELLVI

## Licellvi (PDO)

### ► Molding Types of Licellvi

#### Lifting

Bi-directional



TYPE S

#### Features

- Bi-directional makes function to elevate on center-cog
- Lifting first in strong and effective moving in dense tissue
- Applicable for full-face

#### Max

Multi bi-directional



TYPE SY

#### Features

- Enhance adhesion both skin tissue and thread by providing strong lifting and fixation
  - Cogs on up and down shows the strongest tensile strength and lifting force
  - Tensile force increased by more than 12%<sup>1</sup> compared to conventional PDO sutures
- <sup>1</sup>) Ref. Meat test for tensile strength conducted by internal (12/2022)



| Cannula                                                                                        |       |        |      | Thread |            |          |
|------------------------------------------------------------------------------------------------|-------|--------|------|--------|------------|----------|
| MOLDING                                                                                        | Guage | Length | Type | Length | Cog Length | USP Size |
| <b>S</b><br>  | 18G   | 100mm  | W    | 185mm  | 90mm       | 1-0      |
| <b>SY</b><br> | 18G   | 100mm  | W    | 185mm  | 90mm       | 1-0      |

### ► Patent and Certification



CE



ISO:13485



GMP



Technology Patent



Design Patent

\* J World has 4 of Technology Patents and more than 20 of Design Patents.

- A premium thread manufacturer for Molding, Wire Craft, Jamber and Cutting.
- All process of manufacturing is strictly on-going under GMP and ISO13485.

- A global leader, a specialized manufacturer in aesthetics and therapeutics, of manufacturer in Toxin, HA filler and Thread.



VDERMA SPECIALTY SERIES

# MOLD COG PLUS

BI-DIRECTIONAL



MULTI BI-DIRECTIONAL



Lifting ●●●++ Regenerating ●●●+

| PRODUCT MATERIAL     | CANNULAR |        |        | THREAD |     | TENSILE STRENGTH |
|----------------------|----------|--------|--------|--------|-----|------------------|
|                      | GAUGE    | LENGTH | TYPE   | LENGTH | USP |                  |
| BI-DIRECTIONAL       | 18 G     | 100    | W TYPE | 170    | 2   | 40.81 N          |
| MULTI BI-DIRECTIONAL | 18 G     | 100    | W TYPE | 170    | 2   | 20.85 N          |



# Face Design for Thread Lift



# Evaluation (V-sasp)

- **V**olume : chubby face, skinny face, volume loss, excess volume.
- **S**agging : evaluate from upper part to lower part and direction of sagging.
- **A**symmetrical face
- **S**kin quality
- **P**atient concern & budget

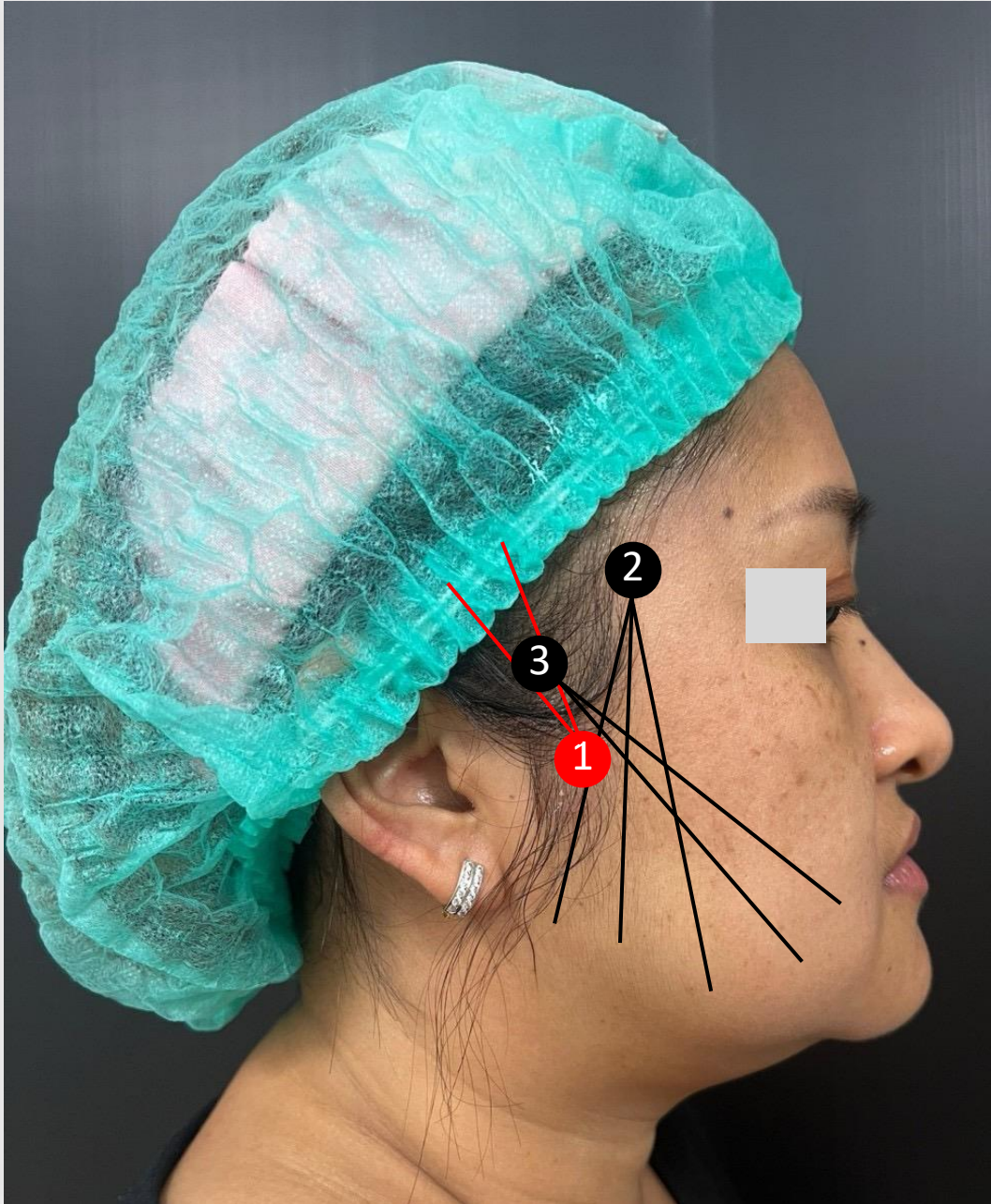
# Vector design

Lifting & Repositioning tissue >> Anchoring point & Target area

1. Temporal vertical vector : chubby face
2. Oblique vector : skinny face, sunken cheeks
3. Always correct upper part firstly.
4. Always correct sagger & bigger firstly.
5. Fix part : multi-directional thread.
6. Mobile part : bi-directional thread and multi-directional thread
7. Poor skin quality : multi-directional thread.

## Vector Assessment





# Vector design

1. Mid-face lift : reverse V-technique
2. Lower face lift : temporal vector
3. Lower face lift : pretragus oblique vector



Before

After

Case 1: malar lift , lower face lift(temporal vertical vector),Jawline lift & submental lift



Vector design

## Correction of midface using only threadlift.



- ✓ Midface has been lifted and tightened
- ✓ Lower face sagging has improved
- ✗ Midface volume loss still remains

## Case 2 : lower face lift , vertical & oblique vector



Vector design

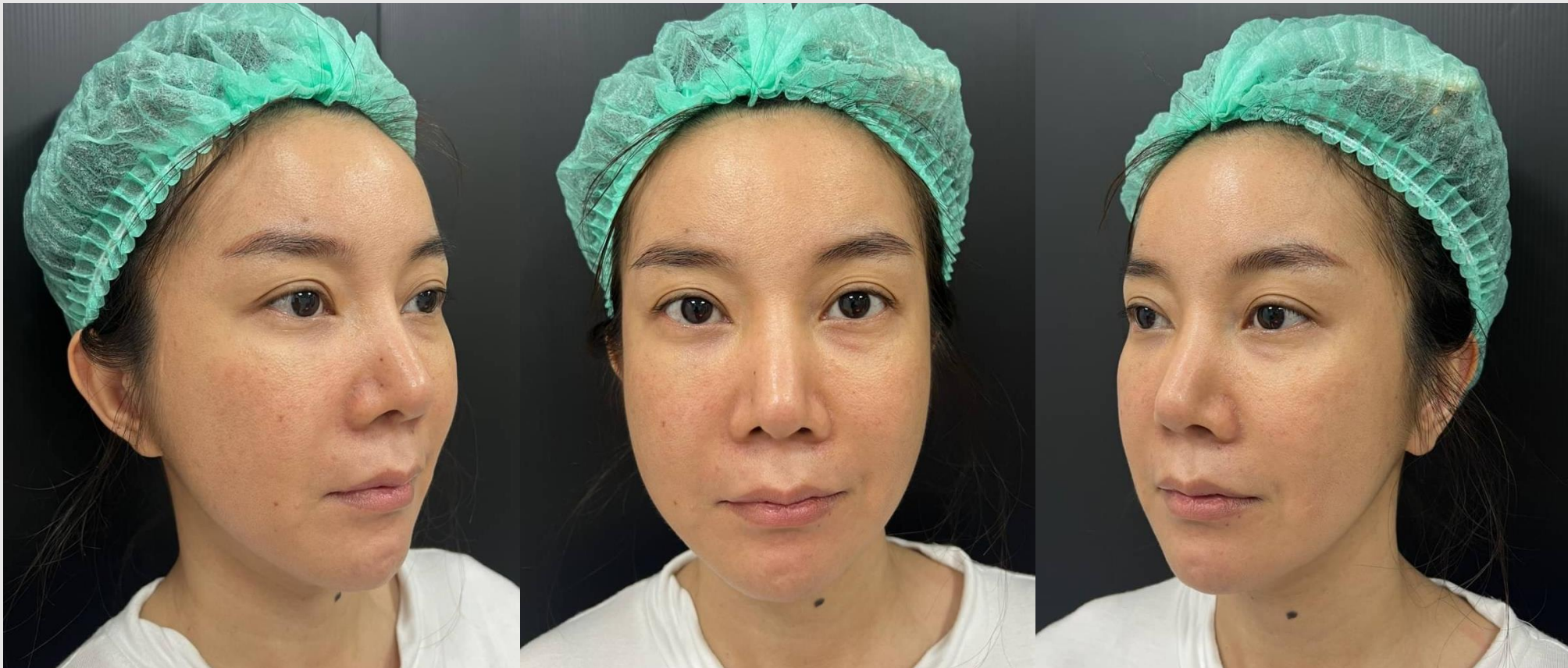
Case 2 : lower face lift ,  
vertical & oblique vector



Befor

After

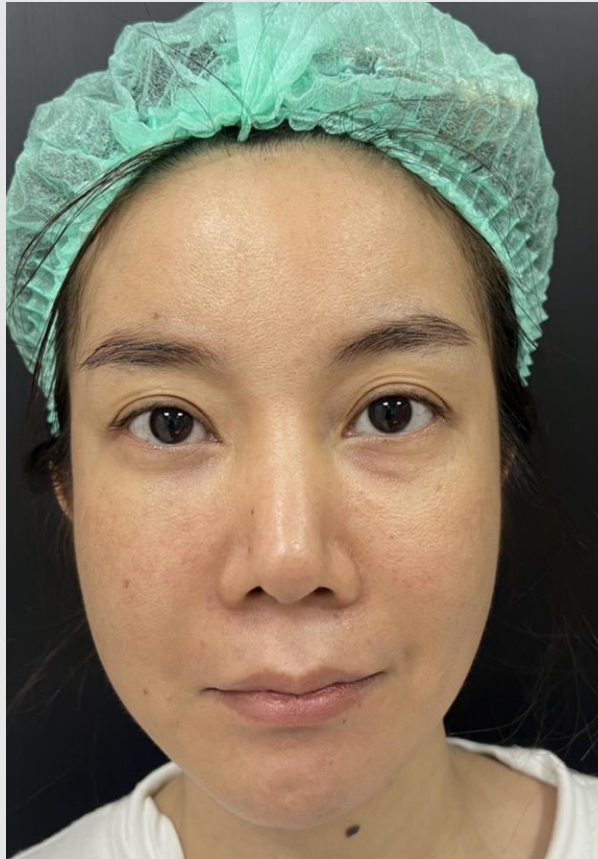
## Case 4 : Asymmetrical face , sagging malar& lower face



## Case 4 : Asymmetrical face , sagging midface & lower face midface lift, malar lift , lower face lift



Vector design



Befor



After

## Case 5 : Lower face lift , jawline + filler



Vector design

## Case 5 : Lower face lift , jawline + filler

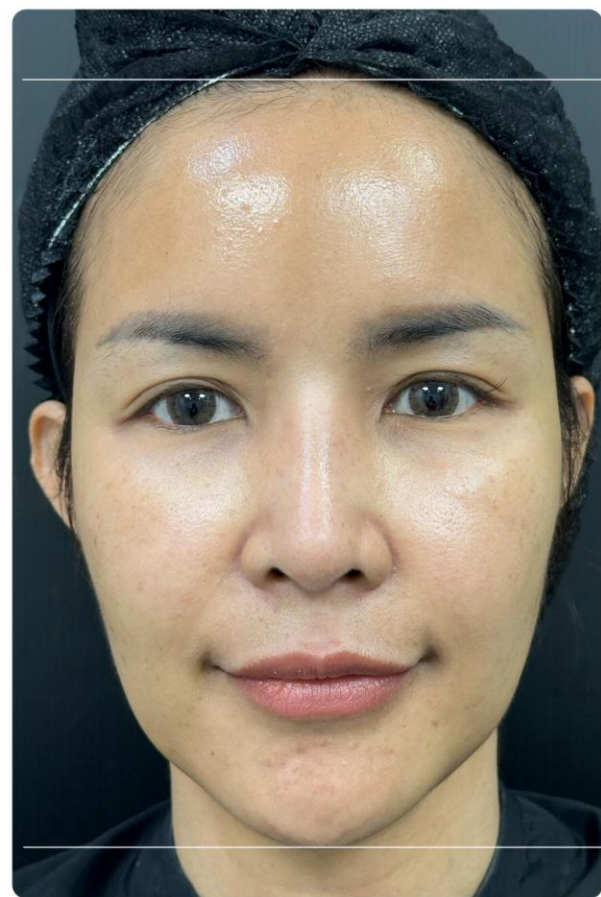


Before

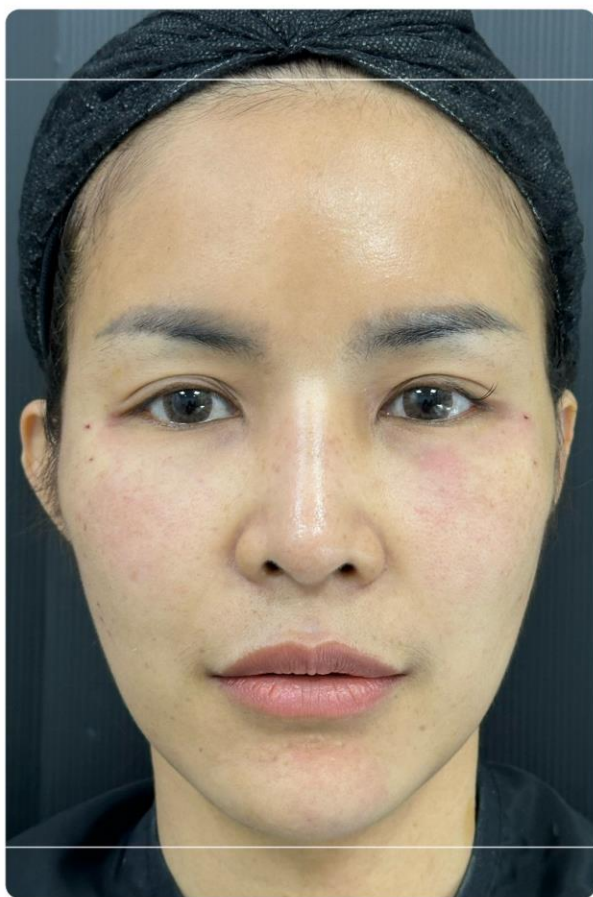


After

## Case 6 : Correction of midface using combination threadlift and cross-linked hyaluronic acid filler.



BEFORE



AFTER



BEFORE

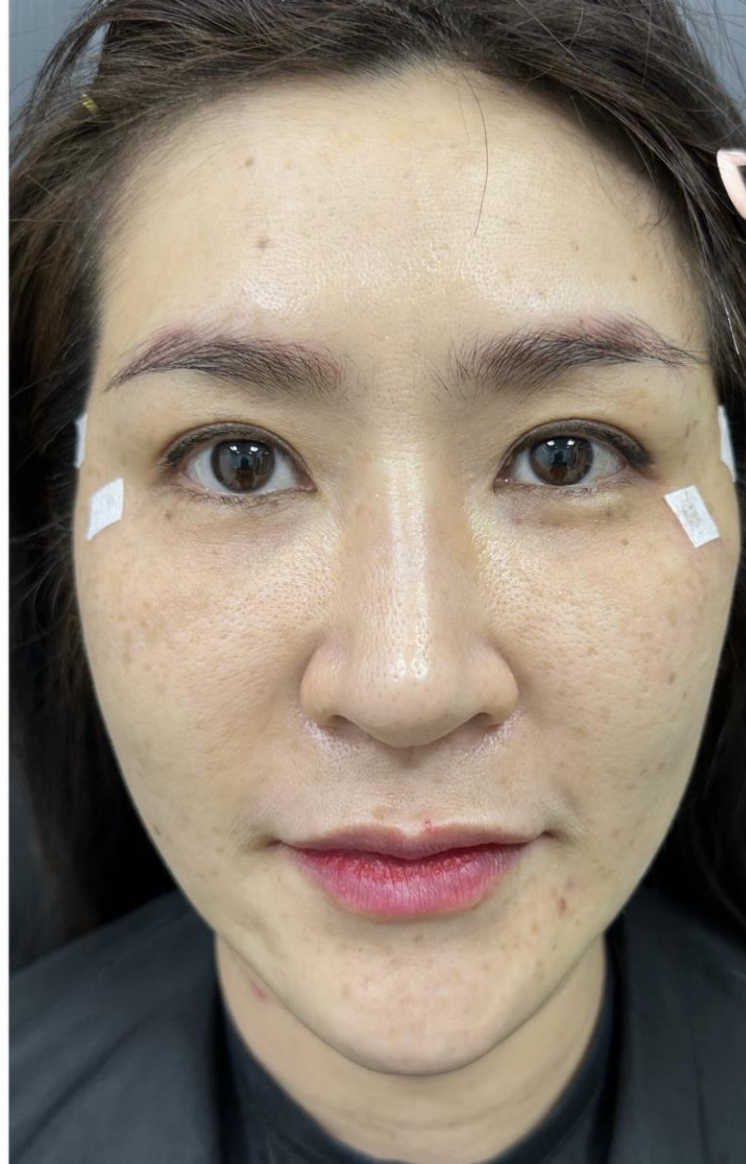


AFTER

## Case 7 :Midface , Lower face

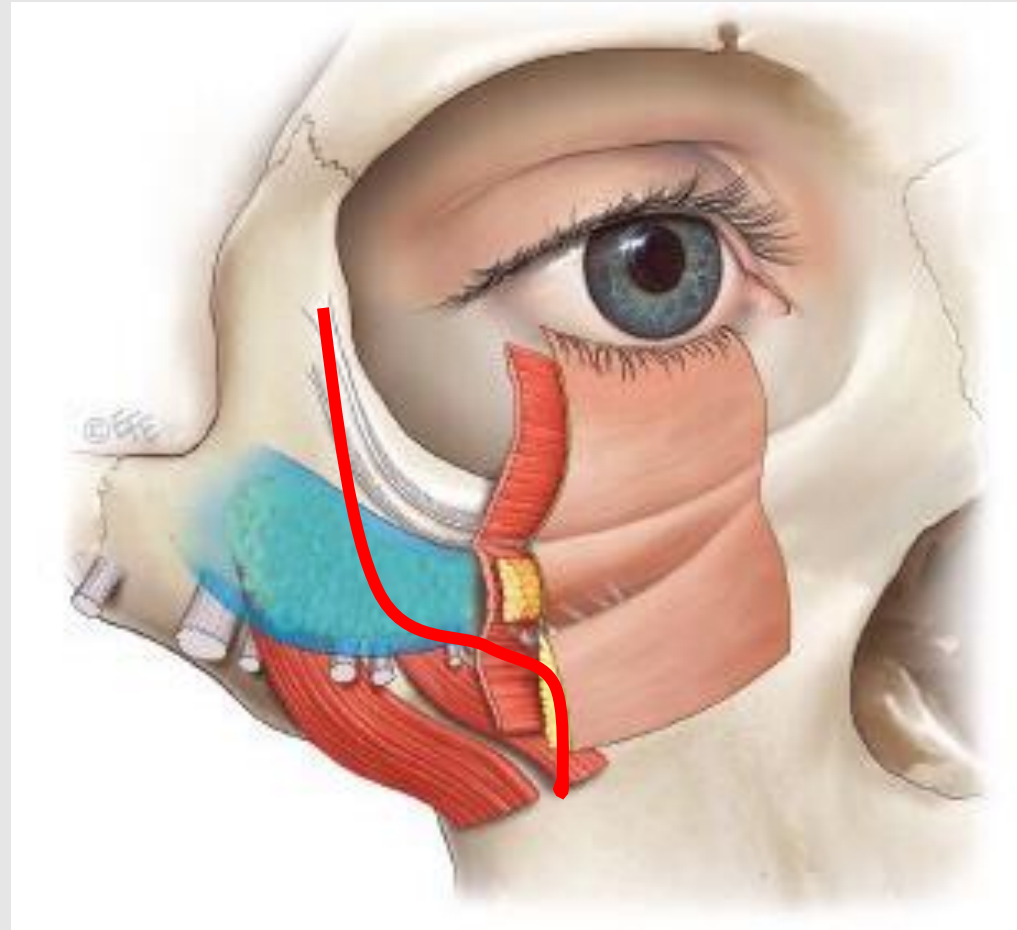


Before



After

# Correction of midface using only Thread lift.



**Lifting**

Bi-directional



TYPE S

**Max**

Multi bi-directional



TYPE SY

## Correction of midface using only threadlift.



Before

After

- ✓ Midface has been lifted and tightened
- ✓ Lower face sagging has improved
- ✗ Midface volume loss still remains

## Key points for successful of threadlift

1. Good material
2. Good technique
3. Good condidate

More information



Thank you