

CHEMICAL PEEL

What is a Chemical Peel?

A chemical peel is a non surgical technique designed to revitalise damaged skin in people that have signs of sun damage, fine lines, wrinkles, uneven skin tones acne and scarring. The aim is to resurface the skin resulting in a softer, smooth more youthful look. Chemical peels are most commonly performed for cosmetic reasons, to enhance appearance and self-confidence. Chemical peel therapy may be performed in conjunction with other treatments, however it is not a substitute for a face lift and does not prevent the ageing process. Chemical Peels need not be aggressive but they should be progressive. Optimum results are achieved following a course of 3-6 peels and the strength of each peel may vary accordingly. Chemical Peels can be performed every 2-4 weeks. You may be required to pre treat your skin to give a better peel penetration and prolonged results.

Procedure Peels from Rationale Skin Care embrace medical research and utilise Ascorbic acid, Lactic acid (AHA), Salicylic acid (BHA) and Pyruvic acid (PA) to facilitate a penetration of self neutralising, anti-inflammatory exfoliants. Procedure Peels are designed to maximise skin rejuvenation with minimal downtime. These chemicals combine to calmly resurface the dead layer of skin cells and speed cell turnover to return skin to its more youthful function. Most patients experience no side effects. Erythema may be present but is minimal and of short duration. Dryness and shedding may be experienced on days 3, 4, and 5 post peel. Procedure peels can be uniquely customised and tailored to individual patient needs. A course of 3-6 peels is recommended for optimum results.

What Happens During Treatment

At your consultation one of Mr Banwell's team will devise a treatment plan specifically tailored for you. The peel application itself, only takes a few minutes but please allow 30 minutes for your consultation as a full history, consent and photographs will be taken.

Your skin will be cleansed and de-greased. Your eyes will be protected and the peel solution will be applied with an applicator. Following this Sun protection will be applied. Patients may experience a mild to moderate stinging for a few minutes post peel. Shedding/dryness may occur on days 3/4/5 and you are advised to moisturise well. You should not use any skincare regime that night but continue the following day as usual. Make up may be worn the following day.

After Care/Side Effects

After your Chemical peel, it is normal to experience the following:

In the first 24 hours:

Mild redness to the skin, a tight dry feeling and mild itching.

Days 3-4:

Mild to moderate skin peeling/ flaking. Occasionally a minor breakout may occur. Skin may still feel a little itchy.

You are advised to maintain skin hydration as often as necessary throughout the day for the first few days after your treatment.

Protect your skin on a daily basis using a high protection sun screen.

Do not pick at your skin, let it shed naturally.

Recommence your skincare regime after 24 hours.

If you have a history of cold sores, a chemical peel may precipitate an attack. You are advised to use an anti viral treatment should this occur. A chemical peel will not be performed if you have an active cold sore.

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What Type Of Peels Are Used?

Ascorbic Acid (Vitamin C)

Ascorbic Acid is a mild peeling agent ideally suited to use on highly pigmented skin. (Fitzpatrick skin types 1V-V1). Performed regularly the Ascorbic acid peel can help resolve uneven pigmentation and provide exfoliation benefits for more reactive skin types. It can be used alone or in conjunction with other procedure peels if skin type Fitzpatrick 1V or below. It is recommended that Ascorbic Acid crystals are solubilised in Procedure Delivery Serum.

Lactic Acid

The L-lactic Acid peel is a hydrophilic acid of the Alpha-Hydroxy acid group. It is a light superficial peel which promotes cleavage of corneocytes from the stratum corneum and stimulates epidermal differentiation. This hydrating peel lowers the stratum corneum pH which promotes activation of enzymes that degrade corneosomes, facilitating shedding of superfluous surface cells. This results in a reduction of fine lines and uneven pigmentation, giving an overall improvement in skin tone and texture. Performed on a monthly basis, there will be increased skin hydration, reduced visibility of pores and lightening of epidermal hyperpigmentation. This peel can be used alone or to augment the strength and effects of other Procedure Peels

BHA (Salicylic acid)

BHA is attracted to the lipid content of skin, particularly sebum, found predominantly in follicles. This peel helps to regulate the turnover of epithelial cells and shed unwanted cellular debris. This helps to unclog pores, reducing blackheads and spots. BHA peels helps in the treatment of acne, seborrhoea and excess surface oil. These peels are performed on a monthly basis in clinic and can be used alone or in conjunction with other Procedure Peels.

Pyruvic Acid

Pyruvic Acid is a new peeling agent for actinically damaged skin. Pyruvic Acid is a metabolite of glycolysis, found naturally in the skin. P.A. breaks down corneodesmosome bonds and improving skin texture. P.A helps to re-establish superficial microcirculation, reducing sallowness and restoring a healthier, refined and more youthful skin tone. Clinically, this benefit can be seen as a restoration of healthy skin tone and texture. There will be a reduction of fine lines and superficial pigmentation , further benefits include softening of acne scarring and fortification of the skin barrier function with a reduction in sensitivity to topical irritants.

Important Notice

Mr Banwell strongly advises you stop smoking prior to surgery as this can affect the outcome of surgery and increase complication rates. Nutritional supplements, anticoagulant medication and blood thinners (eg. aspirin and brufen) all increase the risk of bleeding and should be stopped prior to surgery unless otherwise instructed.

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NOTES & QUESTIONS

AT A GLANCE

SURGERY TIME

30 - 60 minutes

HOSPITAL STAY

Out-patients

ANAESTHETIC ASSESSMENT

No

PRE ADMISSION TESTS

No

SLEEPING POSITION

Sleeping on back recommended

REASONABLY MOBILE

Immediately

WASHING

Shower after 1 day

DRIVING

Immediate

EXERCISE INCLUDING GYM

2 weeks

SEXUAL ACTIVITY

Restricted Activity

FULL RECOVERY

Immediate

TIME OFF WORK

None