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Can Eyelid Filler Injection Cause Blindness?

Various soft tissue fillers, also called dermal fillers, injectable facial implants, or wrinkle fillers, are FDA-approved to reduce the appearance of wrinkles or to augment lips or cheeks. They are used off-label, very effectively, in other parts of the face and around the eyes to create more youthful appearance.



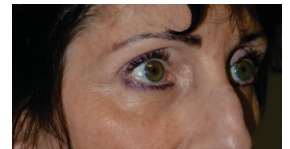
Upper eyelid hollowness



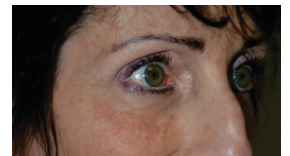
After filler injections in upper eyelids-brows

The US Food and Drug Administration (FDA) recently issued a warning to healthcare providers and the public about the possibility of rare, but serious, injuries that may occur as a result of unintentional injection of a soft tissue filler into blood vessels in the face. According to their report, unintentional injection can block blood vessels and restrict blood supply to tissues and lead to embolization, which could cause vision impairment, blindness, stroke, and damage and/or necrosis of the skin and underlying facial structures.

The good news is that there has never been a reported case of blindness with filler injection in the upper or lower eyelid area (tear trough, etc). There have been extremely rare occurrences of vision loss with filler injection in certain other parts of the face, including area between the eyebrows and nose (glabella), in and around the nose, and the forehead/temples. There has been a number of cases of skin necrosis in other parts of the face, such as the nasolabial folds.



Lower eyelid hollowness



Immediately after Belotero filler injection

There are few key points worth noting: 1) Vision loss from facial filler injection is extremely rare and it has never been reported with eyelid filler injection; 2) Certain areas of the face should be avoided such as the glabella/nose; 3) Fillers should be injected only by health care providers, who not only have appropriate training and experience, but also expert knowledge of the pertinent anatomy at and around the injection sites. When it does come to your eyes, an oculoplastic specialist is skillfully qualified.

Negative Risk Factors for Developing Thyroid Eye Disease Among Graves Disease Patients



Thyroid eye disease (TED, thyroid-associated ophthalmopathy) is a common and debilitating manifestation of Graves disease (GD). A recent retrospective study found two risks that may reduce the risk of developing thyroid eye disease in those with Graves disease. The study identified those who developed manifestation of thyroid eye disease (proptosis or bulgy eyes, eyelid retraction, etc) among a cohort of newly diagnosed Graves disease patients and followed.



A young female with bulgy eyes from thyroid disease.

After orbital decompression.

Of 8404 patients with Graves disease who met the inclusion criteria, 740 (8.8 %) developed thyroid eye disease (mean follow-up, 374 days since initial GD diagnosis). After adjustment for potential cofounders, surgical thyroid-

ectomy, alone or in combination with medical therapy, was associated with a 74 % decreased hazard for TED compared with radioactive iodine therapy alone. Statin use (for >60 days in the past year vs <60 days or nonuse) was associated with a 40 % decreased hazard. No significant association was found for the use of nonstatin cholesterol-lowering medications or cyclooxygenase 2 inhibitors and the development of TAO. The study concluded that thyroidectomy and statin use are associated with substantially reduced hazards for TED among patients with GD. Further prospective studies are necessary to validate this study and settle preventative measures for this burdensome manifestation of GD, and its subsequent traditional surgical therapy (orbital decompression, eyelid retraction surgery, etc).

Reference: JAMA Ophthalmol, 2015; 133(3):290-296, doi:1001/jamaophthalmol.2014.5103

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Cosmetic Surgery and Social Media Influence in 2015

Are patients really feeling the influence of social media on their decisions to have cosmetic surgery procedure?

According to a recent survey conducted by RealSelf, the answer is simple and resounding “yes”. The online info-sharing community suggests that more and more, social media is bringing to light the self-percieved need for cosmetic surgery. A selfie here, a selfie there and those sagging jowls or forehead wrinkles are all over Facebook and a constant reminder of just how much older you look. Thoughts naturally turn to what can be done to make



Most tweeted selfie.

improvement. In fact, not only are they doing it, but they are also sharing it all and posting physician

too. The survey asked “Has social media influenced you to consider or choose to have a cosmetic procedure?” Nearly half confirmed the social media impact, with 15.37 % answering a flat out “yes,” and 33.40 % saying, “somewhat, I knew I wanted a change, but photos on social media made me more aware.” Patients today are highly influenced by what others say. They look to partner with you in the decisions about their procedure or treatment, notes Tom Seery, CEO of RealSelf. “In aesthetics, we’ve seen that half of consumers researched a treatment for more than one year. In this information gathering, people trust opinions of their peers, mainly reviews, and information posted by medical experts. And that means doctor reviews too.

Reference: <http://dermatologytimes.modernmedicine.com/dermatology-times/news/cosmetic-surgery-and-social-media-influence-2015?page=full>

