



# EYE TRENDS



Highlights of new and unique treatments for the eyelid area.

BY WENDY LEWIS

**T**hanks to a robust pipeline, a flurry of new products along with inspired uses of existing techniques and technology, the eyelid area are having a moment.

### New and Developing Treatments.

Peregrine Ophthalmic is developing an injectable drug that seeks to reduce unwanted under-eye bag fat, which would improve the overall aesthetic appearance of patients' treated eyes, says Steve Yoelin, MD, an ophthalmologist in Newport Beach, CA.

DelNova is developing a novel drug that would allow practitioners to reverse adverse events that are caused by neurotoxins including ptotic eyelids, heavy eyebrows, and worsening mylar edema.

STRÖMA MEDICAL is developing a non-invasive laser system for permanent eye-color change, Dr. Yoelin says. Their technology lightens eye color progressively with each treatment.

UPNEEQ (oxymetazoline hydrochloride ophthalmic solution), 0.1% is a prescription eyedrop used to treat acquired blepharoptosis in adults that entered the market in 2020 from RVL Pharmaceuticals, Inc.

"UPNEEQ is instilled as an eye drop and corrects mild to moderate eyelid ptosis," says Brian Biesman, MD, an oculoplastic surgeon in Nashville. "The duration of effect is 6-8 hours, and the major-

ity of patients in my experience will use it daily to maintain the results, although some use it twice daily."

**Toxin Injections.** For lid ptosis, Steven Fagien, MD, an oculoplastic surgeon in Boca Raton, FL, typically uses Jeuveau or Botox. "At least once a day I treat patients who present with lid ptosis. We can treat mild degrees of lid ptosis right above the lashes. The biggest fear of patients when having toxins is getting a drooping lid. We can also treat aperture asymmetries of the eyelids. The orbicularis muscle closes the lid at the lid margin towards the lashes. If you weaken the orbicularis, or the antagonists, the antagonists lift it up. It's critical to respect the relationship between these two muscles," he adds.

**Fillers.** The recent FDA approval for Allergan Aesthetics' Juvederm Volbella XC for the improvement of infraorbital hollows in adults was widely considered a milestone. "This is the first hyaluronic acid that is now on the label so Allergan can promote it directly to consumers which is a very big deal," says Dr. Biesman. "Contrary to what many believe, the Infraorbital area is one of the safest areas to inject from a vascular adverse event perspective, especially with respect to vision loss."

His workhorse product in this area is Restylane-L. He also uses Restylane Lyft, Belotero Balance +, and RHA Redensity.

Bryn Mawr, PA-based facial plastic surgeon Jason Bloom, MD uses a lot of the new RHA Redensity filler for infra-orbital hollow/tear trough filler. "I am finding that Redensity is soft, moldable, and doesn't have a significant amount of swelling," he says. "The company is now looking to pursue this indication from the FDA."

"The most common complications around the eyelid are heavy eyebrows and droopy eyelids, and heavy eyebrows are more common than droopy eyelids. Dermal filler injections, particularly when injected into the glabella, the nasal bridge and the forehead, carry a risk of blindness," says Dr. Yoelin. "It's important for practitioners to exercise caution when injecting fillers into the face, and especially when injecting them into these 3 anatomical regions."

The ideal filler doesn't hydrate and is easy to dissolve, says Julie Woodward, MD, Division Chief of Oculofacial and Orbital Surgery at Duke University in Durham, NC. "It should also be moldable and but not migrate, doesn't create a tinkle effect, and can be used to address fine lines. There is no perfect filler for every indication," she says "From the hydration studies that we performed at Duke and published in Dermatologic Surgery the lowest hydrators are NASHA, VYCROSS15, and Thiofix wet milling technology in Revanesse Versa." ■

*This article was excerpted from "The Eyes Have It" in Practical Dermatology® magazine (practicaldermatology.com). Read the full article for more, including the role of lasers and PRP.*

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