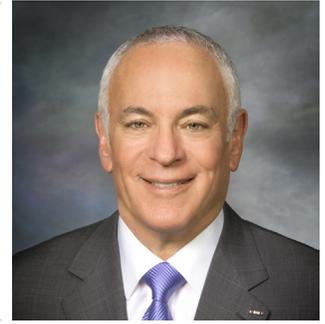


# Growing a Practice with the Lumenis M22:

## A Case Study with Dore Gilbert, MD



### Newport Dermatology and Laser Associates:

- 1 dermatologist
- 1 Physician's Assistant
- 22 Staff Members
- 50/50 cosmetic/regular dermatology
- 150 photofacial clients per month

Over \$1.8 billion dollars were spent on non-surgical skin rejuvenation procedures in the United States in 2012, with Intense Pulsed Light (IPL) quickly becoming one of the most popular treatment methods due to the broad range of effects/options. The wide range of wavelengths allows treatment of multiple components of photoaging including fine rhytides, telangiectasia, pigmented lesions, piokiloderma, actinic keratosis and scar modification.

Located in Newport Beach, CA, my patient population has a lot of exposure to the sun, both due to work and recreation. Accordingly, we see a lot of patients with sun-related pigmentary disorders such as telangiectases and rosacea associated with chronic photo damage. Over the last 15 years, we have performed over 35,000 photofacials using the IPL application on the M22 and former IPL systems by Lumenis (San José, CA). Photo-rejuvenation is a mainstay in my practice, providing a quality service for my patients and a recurring revenue stream for my practice.

### M22

There are other multi-application platforms on the market, but the M22 is the gold standard to which all others attempt to match up. The M22 combines three technologies in one platform, Intense Pulsed Light (IPL), ResurFX non-ablative fractional skin resurfacing and Nd:YAG Laser, enabling its indication for over 30 different treatments. Having one device with a modular design is incredibly efficient. It takes less space within the practice, saves time with combined treatments and decreases capital expenditures on equipment. Some primary features include:

1. Limited handpieces. With only the Universal IPL handpiece and one other, using the M22 is uncomplicated. Rather than storing, searching for and switching out numerous handpieces, 6 ExpertFilters can be changed in seconds to allow the treatment to be tailored to the condition. In the best-case alternative, nurses and technicians lose time locating distinct applicators and switching them, lowering the overall number of treatments that can be performed in a day. In the worst-case, patients are sent away and asked to schedule the second treatment separately, increasing the possibility that they do not return and the practice loses revenue.
2. Optimal Pulse Technology (OPT) and Multiple Sequential Pulsing (MSP). OPT allows the delivery of both low and high fluences over the entire range of both short and long pulses, controlling the IPL pulse shape, and MSP controls the delivery. For example, 18 joules of energy can be delivered in a single pulse, or divided equally between multiple pulses. If I choose two pulses, the energy will be equally distributed into two pulses of 9 joules of energy each. This uniform delivery is unique, as with most systems the first pulses is the strongest and the energy decreases with each succeeding pulse. By lowering the fluence of the individual pulses, the treatment is gentler, more comfortable, and more patient-friendly.

3. Presets. I spent quite a bit of time when the M22 first came out, helping Lumenis establish the wide variety of presets. Skin type, targeted treatment, depth of lesion and other specific patient data are input into the device, and the safest, most efficient treatment parameters are generated. The user remains in control, able to change the parameters at any time during the treatment, as their professional judgment deems necessary. While I initially spent quite a bit of time training all of my nurses, the presets definitely increase the comfort and ease with which I delegate to my staff.

### Applications

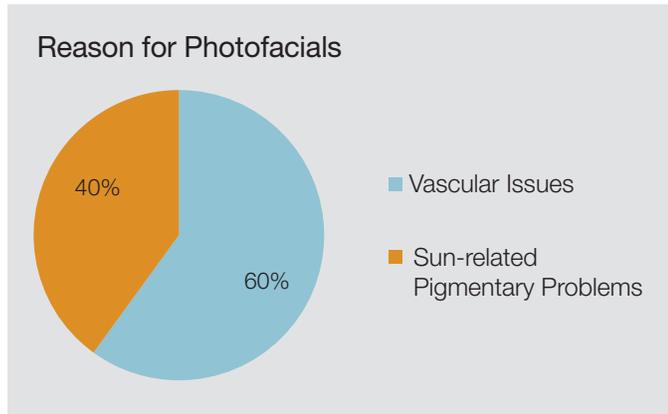


Figure 1. Over half of Dr. Gilbert's photofacial patients need treatment for a vascular issue such as rosacea or telangiectasias.

The majority (60%) of IPL treatments performed in our practice are for vascular problems such as telangiectasias and rosacea. Generalized redness of the skin is treated with the IPL module on the M22, and localized, larger veins on face or other areas are treated with the Nd:YAG module.

The other 40% of IPL treatments are dedicated to pigmentary problems, such as pigmented lesions, solar lentigines, melasma, etc. While we see an extraordinary number of photofacial clients monthly, I estimate that practices in other areas of the country average around 20 photofacial patients per month. Our photofacial clients have been returning for maintenance treatments for over 10 years, and approximately half of our photofacial appointments each month are maintenance visits, while the remaining are new patients. Patrick Bitter, MD, who coined the term "photofacial," reported that in patients he treated for 10 years, blinded judges could not tell that they had aged. I have seen the same results with my patients. Their skin is obviously more luminescent, and patients are so pleased that they become a renewing source of revenue.

IPL treatments for rosacea remain a large and non-penetrated market. This is likely due to lack of insurance coverage for IPL treatment of rosacea, in spite of the fact that it is one of the most simple and successful therapies. Medical therapy is the standard of care, but as the disease process is vascular in nature, lasers can be an excellent adjunct to treatment. IPL targets blood vessels and capillaries and reduces the redness associated with the disease. It can also be very effective with patients whose rosacea is controlled, but are left with pigmentary issues. Due to my large patient base and long-standing community reputation, I see rosacea patients daily. The M22 offers a square pulse, which has a lower, more balanced energy emission, enhancing the safety of the treatment. Those that suffer from the disease and are financially able, pay for IPL because it works.<sup>2,3</sup>

Revenue Generated					
Procedure	# of treatments/month	Price	1 Month	1 Year	5 Years
IPL - Vascular Issues	12	\$381.00	\$4,572.00	\$54,864.00	\$274,320.00
IPL - Other Pigmentary Issues	8	\$381.00	\$3,048.00	\$36,576.00	\$182,880.00
<b>TOTAL:</b>	<b>20</b>		<b>\$7,620.00</b>	<b>\$91,440.00</b>	<b>\$457,200.00</b>

Figure 2. Based on ASAPS National Average of \$381/IPL treatments and Dr. Gilbert's assumed 20 treatment monthly average.

**\$7,620** = Average Monthly Revenue from IPL, **\$3,810** from returning patients.

## Combined Treatments

Photofacial with IPL is a straight-forward procedure, which doesn't result in any peeling and only three hours of down time. This makes it an excellent entry-level procedure for many people, and once a patient is in my office, it is up to my team to make them aware of other services that might benefit them. Internal marketing is very important and we use formal questionnaires, in-office advertisements and pamphlets, and simple discussions with doctors or staff.

For patients with fine lines and wrinkles in addition to rosacea or other "red" skin disorders, I offer patients a combination of resurfacing and photofacial. I first perform resurfacing with UltraPulse DeepFX, which puts deeper holes in the skin in a less dense pattern. I then comeback with ActiveFX, which is more superficial but places target spots closer together. The deeper treatment addresses the wrinkles with the superficial treatment addresses the skin irregularities. I then follow-up with IPL to remove any rosacea, telangiectasia or other pigmentary issues.

Combining IPL with an injectable filler or toxin can enhance rejuvenation of the face and provide patients with immediate results, without necessitating any down time for the patient. When I am combining IPL with an injection, I first perform IPL treatment and then follow with the filler or toxin. This ensures that the heat from the IPL treatment does not diffuse the product that has been injected, diminishing its effect.

One of the advantages of IPL is that it can be combined with anything, making it a true staple in a dermatologist's office. The M22 is the gold standard for the treatment of skin conditions and hair removal because it enables you to treat more types of patients and more conditions, always with the best outcomes. Our patient satisfaction is outstanding, represented by the high number of return patients and patient referrals that we receive, which eliminates the need for any external marketing on our behalf.

### References

1 American Society for Aesthetic Plastic Surgery. Cosmetic Surgery National Data Bank Statistics 2012. | 2 Taub, AF. "Treatment of rosacea with intense pulsed light." Journal of Drugs in Dermatology. 2003 Jun;2(3):254-9. | 3 Mark KA et al. "Objective and quantitative improvement of rosacea-associated erythema after intense pulsed light treatment." Dermatologic Surgery. 2003 Jun;20(6):600-4.

### Telangiectasia



Before Treatments



After 4 Treatments

### Rosacea



Before Treatments



After 4 Treatments

### Lentigines



Before Treatments



After 1 Treatment

### Spider Veins



Before Treatments



After 2 Treatments

### Dyschromia



Before Treatments



After 4 Treatments

### Freckles



Before Treatments



After 4 Treatments

### Hair Removal



Before Treatments



After 6 Treatments

\* Photos courtesy of Mariela Nazar, MD