

A close-up photograph of a woman's lips, which are full and have a natural pinkish-red color. The lips are slightly parted, showing the dark space between them. The skin around the lips is smooth and has a natural glow. In the upper center of the image, there is a rectangular area with a gold, textured background. Overlaid on this gold area is the text 'DR MATTEO VIGO' in a black, sans-serif font. Below this, the words 'PLASTIC SURGERY' are written in a smaller, white, sans-serif font.

DR MATTEO
VIGO

PLASTIC SURGERY

EVERYTHING YOU
EVER WANTED TO
KNOW ABOUT LIP
INJECTIONS



Full lips have always been associated with youth and beauty. Because of this, lip enhancement is one of the most frequently requested procedures in a cosmetic practice.

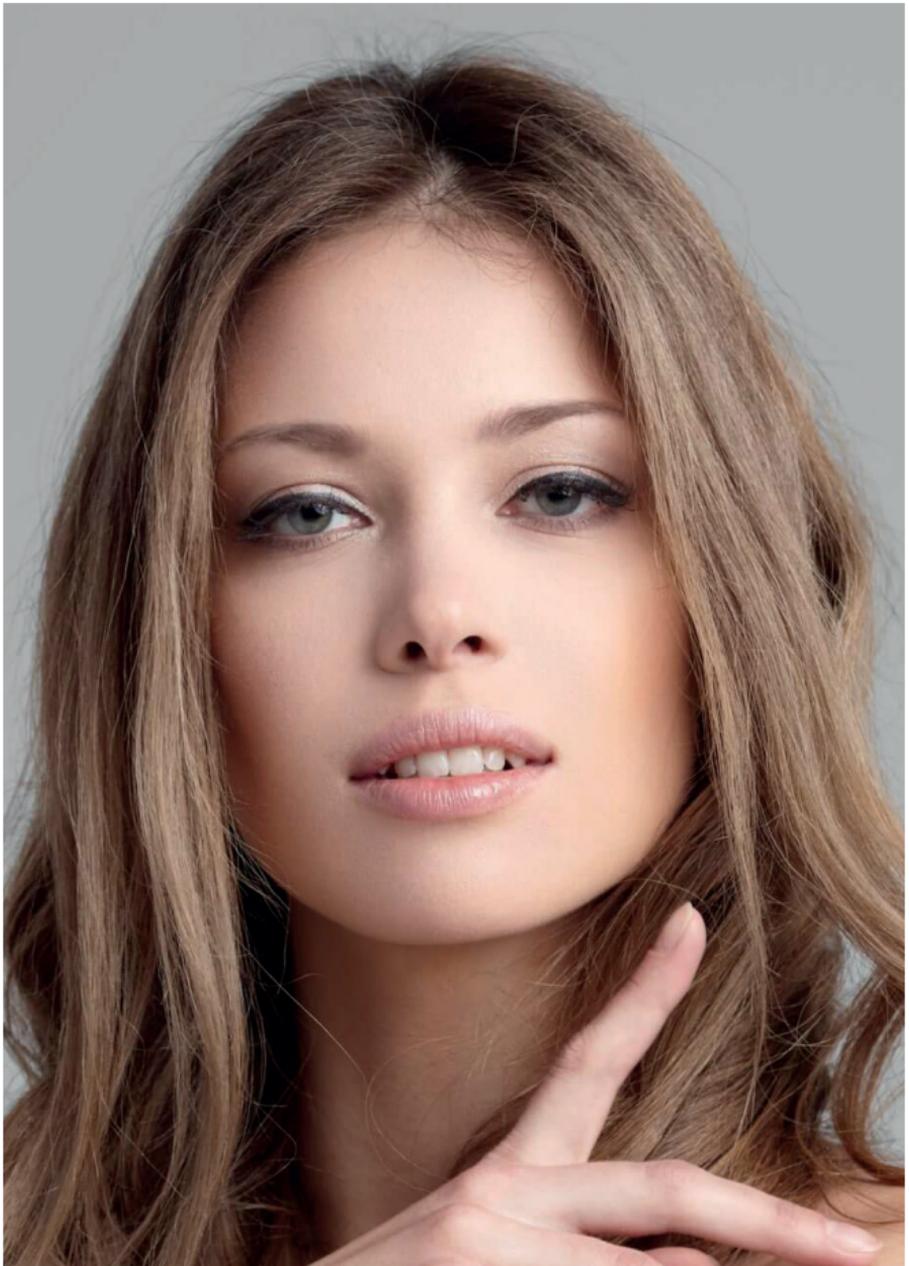
The objective in treating the upper lip is to artistically create a form that harmonizes with the patient's unique facial features and takes into account the age and ethnic background of the patient. The goal in treating the lower lip is to create bulk and greater prominence and artistic projection of the vermilion. The physician must establish appropriate guidelines and patient expectations for augmentation relative to normal lip proportions in order to avoid a cartoon-like appearance.

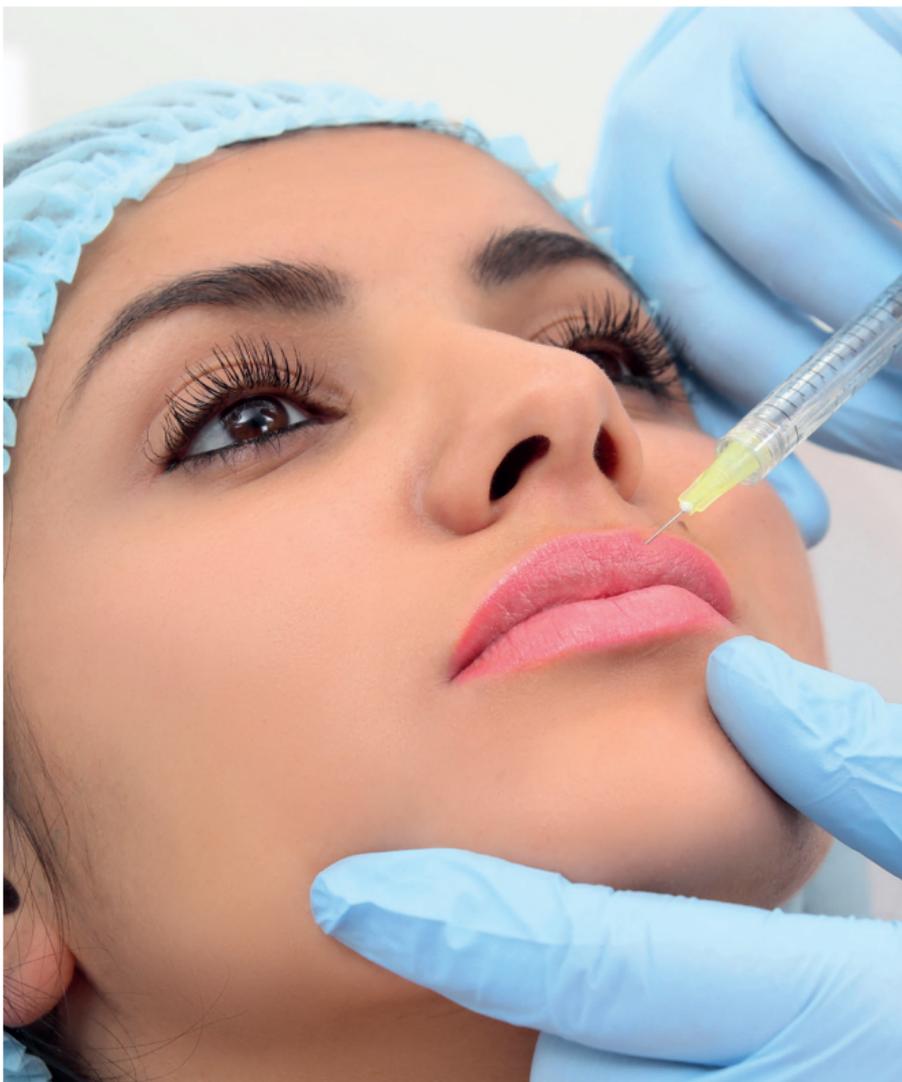
Any physician performing lip augmentation should recognize that temporary fillers can cause permanent stimulatory effects in tissues. After 2 or 3 sessions of lip augmentation, full correction may be obtained and persist indefinitely. Patients may return for additional filler merely because a certain amount of time has elapsed since their last injection, but the physician must evaluate the proportions of the lips to truly determine if additional filler is warranted. It is helpful to have a hand mirror for the patient to observe her lip proportions as the doctor seeks to determine whether more filler is needed. It is also beneficial to show the patient her lips from the lateral view; digital photography is extremely useful in this regard.

THE PROCEDURE

It's important to see your box of injectables opened in front of you and to be sure only your dermatologist or plastic surgeon is doing the injections. Avoid blood thinners, like aspirin and fish oil, for at least a day beforehand, which can increase bruising. If you opt for numbing cream, expect it to be placed on the lips for approximately 10 minutes. The lips absorb quickly and do not require lengthy topical anaesthesia. Then, the skin surface should be cleansed properly and then injections are performed. Your doctor should go very slowly, often pausing to show you the progress that he or she is making. There is a real balance and art to it, I find that you really need to go little by little, so you normally inject the top lip first, balance it out on the other side, then inject the bottom lip. It takes about 15 to 20 minutes. What you see is what you get, you're not waiting for it to work, like Botox.

Some doctors will gently mould the filler with their fingers after it is injected by squeezing and patting it into place, while others aim to inject it exactly where they want it and avoid moulding, since it can increase bruising and swelling. Based on my extensive experience, there is no single stance on moulding - it's a technique that some like, while others do it sparingly.





Your doctor should let you chime in along the way and help decide whether or not to add more or stop. I even recommend my patients go lighter than they think they may want, live with it for a week, and then decide whether or not to do more. "It's best to start with baby steps."

After the injections, ice packs are applied. That evening, I suggest patients sleep on two pillows to decrease swelling. Use ice sparingly at home (getting the H.A. too cold or hot can prevent it from settling properly) and ask your doctor if additional anti-swelling measures are right for you, like oral antihistamines, pain relievers, or topical corticosteroids.

The entire procedure should take under 30 minutes.

NATURAL RATIO

It's no secret that some lip augmentations look incredibly natural and some look not so incredibly natural. This is partially because of the size that you and your doctor select, but it goes deeper than that. The fact of the matter is that some doctors have a better feel for nuance and aesthetics than others.

It's something you have to have an appreciation for, to get the proportions right for each person. There is a lot more artistry to injecting lips than just injecting a wrinkle or a line. That is another reason why the consultation is so important. I show actual before and afters of my patients, so that everyone has a realistic expectation for the type of filler I do.

Selecting where, and at what volume, to inject the lips is also an important decision to make in the consultation. The lips are supposed to be filled in a natural ratio, where the upper lip is approximately 2/3 the size of the lower lip.

That means that sometimes, only one lip needs to be filled, sometimes both, and often at different volumes, since not everyone's pout is symmetrical. Where to inject is also a delicate matter. The lips can be injected into the skin surrounding the lips (to define the Cupid's bow, for example), into the lips (for fullness), and into the lipline (for definition). It's like sculpting.

Creating Philtrum Columns

Sculpted philtrum columns are in style today. As we age, these well-defined longitudinal pillars are lost, leading to a flattened, ill-defined, unattractive upper lip. If the patient still has discernible philtrum columns, the object is to further enhance them. If the philtrum columns have been completely effaced, it is imperative to re-create them. This is accomplished by superficial vertical injection of filler into each philtrum column. It is important to realize that the philtrum columns are not parallel to each other, but rather they form an inverted "V" that narrows as it approaches the nostril sills and columella of the nose.

Creating Cupid's Bow

The pouty, Cupid's bow appearance of the central portion of the upper lip is considered sexy, desirable, and very much in fashion today.

Creating Lower Lip "Pillows" or Tubercles on Each Side of the Midline

Here I ask the patient to evert the lower lip. I deposit approximately -0.1 cc of filler as a depot injection into the orbicularis oris muscle at the vermilion-mucosal junction on each side of the midline. The depot injection is about one third of the distance from the midline to the oral commissure. This is gently massaged to prevent superficial lumpiness.

Supporting or Bolstering the Oral Commissures

Placing a small amount of filler in the most lateral aspect of the cutaneous lower lip so as to provide upward support to the commissures. Injectable neuromodulating agents (botulinum toxin A) placed into the depressor anguli oris muscles can be used as an adjunct to further elevate the commissures. This combines structural support with chemical neuromodulation to shape the oral commissures.

Filling the Nasolabial Creases

Placing a small amount of filler in the upper portion of the nasolabial crease helps to evert the upper lip. Augmentation lateral to the nasolabial crease only serves to deepen the appearance of the crease.

POST-INJECTION CARE

Cool compresses and ice packs can be used to minimize swelling and bruising. Patients should be advised to avoid ASA, NSAIDs, and other medications associated with an increased risk of bleeding. If anti-HSV I medication was prescribed, it should be continued according to physician recommendation. Because HAs are hydrophilic, they attract water from the surrounding tissues and further augment the soft tissue volume beyond that expected from mere implantation. The significant swelling of the vermilion in the immediate post-operative period may be camouflaged by applying flesh-toned foundation or concealer to the entire vermilion. Lipstick can then be applied to a smaller portion of the vermilion than usual so as to not exaggerate the swelling that may be present.



SELECTING THE RIGHT FILLER

There are a lot of difficult decisions you have to make when it comes to getting lip injections, but fortunately, picking the right filler isn't one of them. Hyaluronic acid, in a few different forms, is both the industry standard for temporary lip injections and the only temporary lip filler approved by the FDA.

They're marketed under different brand names - Restylane Kisse, Neauvia Lips, Juvederm Volbella - but they're all made from the same molecule, which is hyaluronic acid, as you may already know, naturally occurs in skin and is a top ingredient in hydrating skin-care products, since it plumps skin by capturing and holding onto water. Picking which of the formulas is best for you is really up to your doctor. Hyaluronic acid is not only the best option, but the only option for those new to the world of injections, since it will dissolve on its own and is well-tolerated, since it's already in your body. There are irreversible fillers and implants, but those are not for beginners.

PAIN MANAGEMENT

Lips are one of the more uncomfortable places to inject filler. We have a lot of nerves in our lips, so I can do a combination of topical numbing cream and, sometimes, injectable numbing medications, so patients are comfortable. However, many of the H.A. injectables come with lidocaine (a numbing pain reliever) built right in, so some doctors opt out of additional measures.

One, or a combination of the above pain-reducing options, will normally temper the pain of the actual procedure, but you're likely to experience pain later, since the skin is being stretched. The pain is mild to moderate and notes that it can last for a few days.

SIDE EFFECTS

Any time there is a needle crossing the skin, there is a risk. Bruising, swelling, and pain - all of which can last up to days and in rare cases, even weeks - may occur. There is also the risk of infection. Naturally, this makes it very important to check in with your doctor post-treatment, especially if you're feeling nervous about side effects.

While hyaluronic acid is a naturally occurring substance in your body, you can still have an allergic reaction to H.A. injectables, since there are often inactive ingredients (like carrying agents) and pain-reducing ingredients (like lidocaine) in the formula. Those prone to allergies or are just plain nervous can do a patch test on their forearm a few days before the procedure to be sure they won't have an adverse reaction.

Injecting the lips can prompt cold sores for those who are prone to them, so he normally pretreats those patients with a round of anti-viral medication, like Valtrex.

There are also less common side effects that are important to consider. More rare side effects include nodules or palpable material within the lips - basically bumps of H.A. that don't settle or feel natural. Extremely rarely, lip filler can be introduced into a blood vessel in the lip, which can have more significant consequences if not dealt with immediately and appropriately.

WHAT TO EXPECT

One of the great things about lip injections is that the results are instantaneous, so you'll leave the office with fairly accurate (albeit swollen) results. For the first 24 to 48 hours, the filler is malleable and your skin is prone to swelling, which means be gentle! This is noted as the time that your injections need to "settle." No facials, yoga, or exercise is recommended, which can alter the placement of the filler and increase swelling and bruising.

Lips often swell for one to three days after treatment, but this is highly variable and some patients will experience no swelling and some will have more dramatic swelling that will take longer to subside. Bruising can last approximately one week, but can be covered with makeup or lipstick, as needed. Some doctors will offer to treat more significant bruising with a laser treatment if necessary.

While the average length of time H.A. fillers will last is about six months, it varies for everyone, from around three months to a year. H.A. lasts different lengths, depending on where you put it and how active that body part is. I find that if the labelling says six to 12 months, patients normally come back every three to six months.

A BRIEF NOTE FROM DR MATTEO VIGO



I decided to become a doctor at early age but I was not aware of the world of Plastic Surgery. Once I have discovered it I fell in love with the whole concept behind and how this field of Medicine can be helpful for many people.

I passionately believe that, in order to improve the physical aspect of a patient, the plastic surgeon needs to combine the principles of art and science, adopting a global approach to understanding the individual desires.

Plastic Surgery is a truly fascinating, dynamic, constantly evolving field of medicine and I believe that the role of a Cosmetic Surgeon is unique and highly privileged.

My main goal is to understand the needs of a patient and try to transform their desires into reality. The role of a plastic surgeon is not only merely surgical but also supportive in the decision process of the best treatment to help patients finding themselves and their wellbeing.

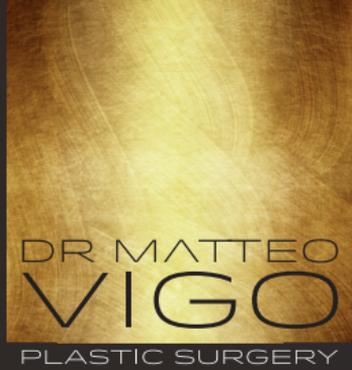
All these steps are taken into consideration once a person walks in my office and the service I am offering them is always at the top.

I am combining experience, quality and professionalism to evaluate each single case and offer the best solution for my patients.

"Because you deserve the best" is my motto and I want always to put the patient at the centre of what I am doing.

You have to feel pampered, understood, listened, loved once in my office and the feedback of this feelings from my patient is my best satisfaction.

Dr Matteo Vigo



FILLERS IN DUBAI

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To book a Dermal Fillers consultation with Dr Vigo, please contact us today.

EMAIL
booking@matteovigo.com

Telephone & Whatsapp
+971 56 282 5825

Locations

AMWAJ POLYCLINIC
Building P11
Jumeirah Beach Residence
Dubai

HEALTHBAY POLYCLINIC
Al Wasl Road, Verve Villas
Umm Al Sheif
Dubai

AIG CLINICS JUMEIRAH
Plastic Surgery Dubai
506A Jumeirah Road Jumeirah
3 Post Box 505173
Dubai

BIOSCIENCE CLINIC
Al Razi Building 64,
Block B, Ground Floor