醫學美容培訓班

日期：4 月 28 - 29 日
時間：12:00 - 19:00
課程人數：30 人

地點：澳門科技大學健康科學學院專業醫療發展中心

課程完成後，學員將獲發澳門健康管理及促進學會培訓證書

- 課程是以面對面的形式進行，約 14 小時。
- 參加者必 須年滿 18 歲，學員需於開始上課前至少 10 分鐘到達。

查詢電話 (853 2855 6207),
報名請於 4 月 26 日前把姓名、工作單位名稱及聯絡電話電郵 aizza.event.vivian@gmail.com
報名費：$300/人 (包括培訓器材及相關餐飲)
此培訓班由 澳門基金會資助部份活動經費

支持單位

澳門科技大學健康科學學院
專業醫療發展中心

澳門美容專業協會

課程內容

4 月 28 日:

1. 何謂醫學美容?
2. 皮膚狀態及風險評估
3. 基礎病理、成因及治療選擇：
   - 痤瘡
   - 敏感/屏障功能受損
   - 玫瑰斑
   - 毛孔及凹凸洞
4. 手把手培訓班:
   化學煥膚

4 月 29 日

5. 非入侵式、入侵式、微創式醫美療程概覽
6. 醫學美容技術簡介：
   - 冷凍溶脂
   - LED 光療
   - 礦物藥妝產品
7. 手把手培訓班:
   - 冷凍溶脂
   - LED 光療
   - 藥妝

授課語言：粵語和英語

講者/導師

黃鐵漢藥劑師（英國）
林澎普通科醫生（香港）
劉家堅普通科醫生（香港）
麥皚淇普通科醫生（香港）
吳詠儀美容導師（香港）
梁禮雄影像技術員（香港）

周安安醫生（澳門）
澳門健康管理及促進學會
醫學顧問

醫學美容？

你們愛美嗎？

你們想變得更美嗎？

THE HISTORY OF AESTHETIC MEDICINE

- Originating in India over 2000 years ago the forehead flap for reconstruction for noses mutilated by war and criminal punishment is the oldest known procedure in aesthetic

The 19th Century

- In 1845, the Prussian surgeon Johann F. Differbach started publishing several monographs about facial reconstruction, where he mentioned the term "rhinoplasty" for cosmetic reason for the first time.
- In 1871, Tilbury Fox described the use of 20% phenol in order to lighten the skin, which became the first chemical peel.
- The first injections for tissue augmentation were described in the last decade of the 19th century. In 1893, Franz Neuber was the first physician who used autologous fat as filler material.

THE HISTORY OF AESTHETIC MEDICINE

The 1950s and 1960s

- The first study of silicone as a filling agent for tissue augmentation was published by Thomas P. Rees et al in 1965.[22] Unfortunately, over the following years, it was noted that the injected silicone could migrate and fistulize. Due to several severe events injectable liquid silicone was restricted by the FDA in 1976.
- One other significant innovation of this time period was the use of lasers in dermatology. In 1965, Leon Goldman published a visionary article regarding the treatment of tattoos with a ruby laser.

THE HISTORY OF AESTHETIC MEDICINE

The 1970s and 1980s

- The 70's and 80's were important decades in the progression of lipoplasty.
- Another idea that influenced cosmetic surgery significantly was Rox Anderson and John Parrish's theory of **selective photothermolysis(選擇性光熱解)** in 1981.
- In 1981, bovine collagen was the first facial filler approved for cosmetic use in the United States

THE HISTORY OF AESTHETIC MEDICINE

The 1990s

- In 1992, the Canadian ophthalmologist and dermatologist Jean and Alastair Caruthers published their article on the treatment of glabellar frown lines with **Clostridium botulinum-A**.
- In 1998 began in Sweden when Michael Olenius presented the first clinical study on skin augmentation with **hyaluronic acid**.
- Another dermal filler that emerged around the same time was **poly-L-lactic acid**.
- The 90s were the decade when light-based devices such as laser and IPL grew large in cosmetic surgery. In 1991, Q-switched Nd:YAG laser with 1064 nm were approved for tattoo removal in the USA and many authors published articles about new laser systems and areas of application.

THE HISTORY OF AESTHETIC MEDICINE

The 21st Century

- the injection of phosphatidylcholine to reduce localized fat
- Cryoliposis
- calcium hydroxylapatite (CaHA)
- Fractional laser

Reference: The History of Aesthetic Medicine and Surgery J Drugs Dermatol 2013;12(7):737-742

何为醫學美容？

- 醫學美容: (又稱：醫美)是一種藉由醫療行為，包括：手術、藥物、醫療儀器、生物醫用材料以及其他具有創傷性、侵入性或非侵入性的醫學技術，針對人體的容貌、毛髮及各部位形態等進行美化、改善、修復與再生。
- 醫學美容是一門多樣化的學科, 當中包括皮膚科學, 激光醫學, 整型外科學, 解剖學,美學,心理學, 藥妝品學,醫學倫理學等

醫學美容項目

侵入性:

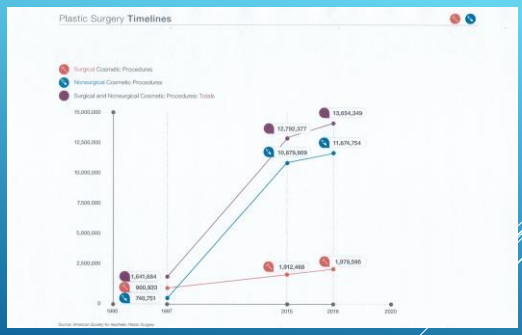
- 隆乳
- 抽脂
- 鼻部整形
- 眼部整形
- 削骨
- 自體脂肪移植
- 拉皮
- 植髮

非侵入性/微創

- 注射類
  - 皮膚填充劑
  - 肉毒桿菌素
  - PLLA
  - PRP
  - 水光注射
  - 溶脂針
- 化學換膚
- 激光療程
- 電波拉皮
- 超聲刀
- 埋線提拉

醫學美容？

美容醫學？

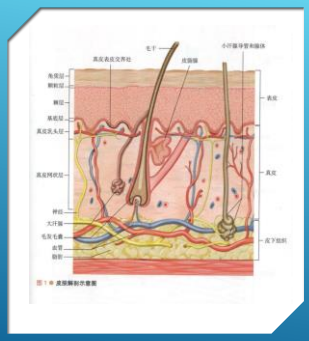


According to the American Society for Aesthetic Plastic Surgery (ASAPS)

- In 2016, Americans spent more than 15 billion dollars on combined surgical and nonsurgical procedures for the first time ever.
- There was a 1.5 billion dollar increase in expenditures over the past year alone.

Source :American Society for Aesthetic Plastic Surgery (ASAPS)

皮膚狀態及風險評估



皮膚解剖

皮膚的油脂分泌

干性皮膚: 常主訴清潔皮膚後有輕微緊繃感, 檢查時可見膚色暗黃, 缺少光澤, 可有 脫屑。

油性皮膚: 常主訴整天油光滿面. 尤其前額,鼻和下頜。

FITZPATRICK SKIN TYPES

- 於1975年，一位名叫Thomas Fitzpatrick的美國皮膚科醫生發表一份研究報告，將所有種族的人的皮膚分為六類，即一至六類（Type 1 - 6）。這種分類用皮膚原本的顏色（非受光位置）、眼和頭髮的顏色、以及皮膚對光的反應而定。
- 這種分類方法可以分辨得出何種皮膚較易患上黑色素皮膚癌（melanoma）
- Fitzpatrick Scale除了有助確定致癌機會，更對做皮膚治療有指導作用

FITZPATRICK SKIN TYPES

PART 1: GENETIC DISPOSITION

- **Your eye color is:**
- Light blue, light gray or light green = 0
- Blue, gray or green = 1
- Hazel or light brown = 2
- Dark brown = 3
- Brownish black = 4
- **Your natural hair color is:**
- Red or light blonde = 0
- Blonde = 1
- Dark blonde or light brown = 2
- Dark brown = 3
- Black = 4
- **Your natural skin color (before sun exposure) is:**
- Ivory white = 0
- Fair or pale = 1
- Fair to beige, with golden undertone = 2
- Olive or light brown = 3
- Dark brown or black = 4
- **How many freckles do you have on unexposed areas of your skin?**
- Many = 0
- Several = 1
- A few = 2
- Very few = 3
- None = 4
- **Total score for genetic disposition: _____**

PART 2: REACTION TO EXTENDED SUN EXPOSURE

- **How does your skin respond to the sun?**
- Always burns, blisters and peels = 0
- Often burns, blisters and peels = 1
- Burns moderately = 2
- Burns rarely, if at all = 3
- Never burns = 4
- **Does your skin tan?**
- Never – I always burn = 0
- Seldom = 1
- Sometimes = 2
- Often = 3
- Always = 4
- **How deeply do you tan?**
- Not at all or very little = 0
- Lightly = 1
- Moderately = 2
- Deeply = 3
- My skin is naturally dark = 4
- **How sensitive is your face to the sun?**
- Very sensitive = 0
- Sensitive = 1
- Normal = 2
- Resistant = 3
- Very resistant/Never had a problem = 4

Resources from :www.skincancer.org

Fitzpatrick Skin Types

Type 1(0-6)

You always burn and never tan in the sun.

Type 2 (7-12)

You almost always burn and rarely tan in the sun.

Type 3(13-18)

You sometimes burn and sometimes tan in the sun.

Fitzpatrick Skin Types

Type 4 (19-24)

You tend to tan easily and are less likely to burn.

Type 5 (25-30)

You tan easily and rarely burn,

Type 6(30+)

Although you do not burn, you are still at risk for skin cancers

皮膚老化

- 皮膚老化原因
  - 生理因素(內在因素)
  - 環境因素(外在因素)
    - 紫外綫(UV)
    - 吸烟
    - 飲食
    - 睡眠習慣
    - 飲酒

光老化表現

- **膚色變化**
  - 色素沉著 (色斑, 斑駁樣色素沉著)
  - Civatte 黃色症
  - 色素減退
  - 黃褐色色素沉著
- **皮膚質地變化**
  - 皺紋
  - 毛孔粗大
  - 皮膚乾燥,粗糙
  - 日光性彈性纖維變性
  - 下垂和鬆弛血管改變
- **毛細血管擴張和紅斑**
- **退行性改變**
  - 良性(脂溢性角化病, 皮脂腺增生, 樱桃狀血管瘤)
  - 癌前病變和皮膚惡性腫瘤

GLOGAU PHOTOAGING SCALE

Type 1: 'No Wrinkles'

- Early photo-aging
- Mild pigment changes
- Minimal wrinkles
- No 'age spots'

GLOGAU PHOTOAGING SCALE

Type 2: 'Wrinkles in Motion'

Patient age: 30s to 40s
- Early to moderate photo-aging
- Appearance of lines only when face moves
- Early brown 'age spots'
- Skin pores more prominent
- Early changes in skin texture

Notice the lines that develop around the eyes and mouth
when the face is in motion

GLOGAU PHOTOAGING SCALE

- Type 3: 'Wrinkles at Rest'

Patient age: 50s & older
- Advanced photoaging
- Prominent brown pigmentation
- Visible brown 'age spots'
- Prominent, small blood vessels
- Wrinkles now present with face at rest

GLOGAU PHOTOAGING SCALE

- Type 4: 'Only Wrinkles'

Patient age: 60s or 70s
- Severe photoaging
- Wrinkles everywhere, at rest or moving
- Yellow-gray skin color
- Prior skin cancers
- Pre-cancerous skin changes (actinic keratosis)

風險評估

- 懷孕/哺乳期
- 過敏史 (水楊酸, 肉毒杆菌等)
- 治療區域有活動性感染 (如:單純疱疹)
- 開放性傷口
- 肥厚性疤痕/蟹足腫
- 治療區域有惡性腫瘤疑似皮損
- 治療區域有皮膚病(例如:白癜風, 銀屑病, 濕疹)
- 治療區域6個月內接受過深度化學換膚
- 近期所接受的美容醫學療程(注射, 激光, 換膚等)

風險評估

- 近6個月曾口服A酸
- 防曬習慣
- 傷口癒合不良(例如免疫抑制導致)
- 皮膚萎縮變薄
- 出血性傾向(例如:血少板減少症,服用薄血藥)
- 患者心理狀態(過度抱怨, 猶豫不決, 盡善盡美)
- 身體畸型恐懼症
- 不合理期望 (缺乏認知)

併發症及處理

- 疼痛
- 色素沉著
- 感染
- 粟丘疹Milia
- 過敏反應
- 瘢痕