

Before you start....

- ❖ Exclusions to Peels - Specific exclusions to AHA peels include:
 - ◆ Active herpes simplex
 - ◆ Warts
 - ◆ Isotretinoin (e.g., Accutane®) use within six (6) months
 - ◆ Topical actinic keratosis treatments within the past six (6) months
 - ◆ Recent surgery (healing wounds)
 - ◆ Recent radiation treatment
 - ◆ Insufficient solar protection/sunburn
 - ◆ History of hypertrophic or keloidal scarring
 - ◆ Cryotherapy/cryosurgery within the past six (6) months
 - ◆ Pregnancy or while nursing
 - ◆ **Caution should be observed in those having a history of hyper- or hypopigmentation.** These individuals require the use of lower strength peels with short exposures in order to minimize inflammation and the risk of dyspigmentation.

- ❖ General Expectations from Superficial Peels
 - ◆ Conditions Potential Changes
 - Fine lines and wrinkles Softening in appearance
 - Hyperpigmentation
 - Mild acne scars
 - Pore size
 - Uneven/rough texture
 - Dull skin tone

- ❖ Things to consider: Your history
 - ◆ Skin type/color: Some skin types require special attention. Individuals with sensitive skin may be unable to tolerate the higher strength peel solutions due to discomfort. Darker complected individuals have an increased risk of hyper- or hypopigmentation with peels. Use a gradual treatment approach including low concentration peels and short exposures for any individual at risk for pigmentary disorders and healing concerns.
 - ◆ Allergies: A history of allergies may indicate that the your skin will be reactive to the peel. In addition, a specific allergy to any of the ingredients in the peel solutions should be reviewed. Always perform a patch test to pre-determine sensitivities.
 - ◆ History of atopic skin reactions, eczema, seborrheic dermatitis, rosacea, or other sensitivities: Use a gradual treatment approach including low concentration peels and short exposures with a history of these conditions.
 - ◆ History of collagen disease, autoimmune disease, or diabetes: Peel procedures are not recommended for these individuals.
 - ◆ Viral infections: Peel procedures can induce a herpes breakout in individuals who have had them previously. It is often recommended for those with a history of herpes simplex should be placed on an appropriate oral antiviral medication for prophylaxis. If warts exists on the targeted area, peel procedures are not recommended due to the potential of spreading the wart virus.
 - ◆ Prior photosensitivity: After a peel procedure the treated skin should be protected from sun exposure and other sources of UV radiation and heat (including heat lamps and artificial tanning booths). Any prior photosensitivity could be exacerbated. Use sunscreen and avoid sun exposure until skin is fully healed.
 - ◆ Current medications: Anticoagulant users may heal more slowly. If a peel inducing epidermolysis is inadvertently performed, the risk of bleeding may be increased. In addition, Many immune suppressing agents can affect post-peel healing times. Individuals using isotretinoin (e.g., Accutane®) should not use chemical peels due to unpredictable responses. Use of topical retinoids within four weeks prior to a peel can enhance skin sensitivity and reactivity.
 - ◆ Use of tobacco: Smokers may heal more slowly.
 - ◆ Pregnancy: While alpha hydroxy acids are generally considered safe cosmetic ingredients, they have not been tested in a pregnant population. It is not recommended to perform peels during pregnancy or while nursing.

- ❖ Concurrent Product/Treatment Use
 - ◆ Due to the potential for some products/treatments to increase the reactivity of the skin to a peel, allow for healing time after the following procedures before a peel is performed.

- Electrolysis
 - Waxing
 - Depilatories
 - Masks/facials
 - Prior peels, dermabrasion, microdermabrasion, non-ablative laser, light therapy, and ablative
 - Retin-A® (tretinoin) and other exfoliative/keratolytic drugs
 - Hair dyeing treatments
 - Permanent wave or straightening treatments
 - Topical/systemic retinoids and other exfoliative/ keratolytic drugs
 - Loofah or other types of exfoliating sponges
- ❖ Combination Use of Superficial Peels and Cosmetic Procedures
- ◆ Superficial peels may be combined with other cosmetic procedures to optimize skin benefits.
 - Microdermabrasion- light microdermabrasion performed immediately prior to the peel will increase the skin's reactivity to a peeling solution. Heavy microdermabrasion should not be performed within the same week as a peel.
 - Non-ablative laser/Intense Pulse Light (IPL) and Ablative laser- Peels are not recommended with these techniques until the skin has fully healed.
- ❖ Post-Peel Procedure
- ◆ After a peel, the skin may experience some stinging, burning, redness, tightness and sensitivity. There may also be some light swelling, superficial scabbing and peeling. These effects will gradually diminish over the course of a week. Occasionally, there is temporary dyspigmentation of skin. If you experience unusual discomfort or change in skin color, you should contact your doctor immediately.
 - ◆ Apply moisturizing cream (a non-steroid, non-AHA, emollient), immediately following the peel and then twice a day until the skin is fully healed. If there are no open sore areas you can apply emu oil and diluted CP Serum.
 - ◆ To promote the healing process, you should be advised to:
 - Avoid products containing AHAs, salicylic acid, retinoids, or other potentially irritating topicals until the skin returns to its normal condition.
 - Delay application of make-up on the peeled area if the skin is sensitive.
 - Avoid the use of abrasive or exfoliating sponges on the area.
 - Avoid sun exposure, artificial tanning devices, and direct heat sources until the skin is fully healed.
 - Use a broad-spectrum sunscreen as tolerated.
- ❖ Do not:
- ◆ Peel the skin
 - ◆ Pick the skin
 - ◆ Scrape the skin
 - ◆ Scratch the skin
 - ◆ Use a mask on the skin
 - ◆ Wear tight headbands, hats, etc.
 - ◆ Expose the skin to sun or sun lamps
- ❖ Maintain newly peeled skin using a mild facial cleanser and moisturizing creams, lotions or gels, after the skin returns to near normal appearance. Protect during the daytime by using a non-AHA moisturizer with sunscreen. Following a peel, skin may become sensitive to AHA products.
- ❖ Warnings: FOR EXTERNAL USE ONLY BY TRAINED HEALTH CARE PROFESSIONALS. Avoid contact with eyes, lips, and mucous membranes. Do not apply to broken or inflamed skin. If contact occurs, rinse well with water. If ingested, drink a glass of water and contact a Poison Control Center. Not recommended for use during pregnancy or while nursing.
- ❖ Use sunscreen and avoid sun exposure until skin is fully healed.
- ❖ Keep out of reach of children.