

**COMBINED PEELS FOR SKIN REJUVENATION**  
**A NEW PROPOSAL FOR THE DEEP REVITALIZATION OF THE SKIN,  
WITH MINIMUM EXFOLIATION.**

**YELLOW PEEL - Light Exfoliant Peel**

**1<sup>ST</sup> Step CHECK UP PEEL - Skin Cleanser**

**2<sup>ND</sup>. Step: A B C PEEL - Non-Exfoliant**

Yellow Peel Facial contains the following active ingredients: Salicylic Acid, Retinol, Phytic Acid, Kojic Acid, Azelaic Acid, Vitamin C & Bisabolol

YELLOW PEEL FACIAL is a progressive peel, resulting from the application of a yellow cream, every 20 to 30 minutes. The increase in the levels of the GAG'S (GLYCOSAMINOGLYCANS), which is a POLYSACCHARIDE that HELPS RETAIN WATER at the dermis layer level, is the principal factor of the immediate increase of DERMAL TURGOR, which promotes an expansion of the skins volume, temporarily correcting surface wrinkles and flaccid skin. A slight epidermolysis (peeling) will occur after 48-72 hours and the skin shows signs of being VISIBLY RENEWED AND FRESH.

The skin must be moisturized INTENSILY with a healing ointment for the next 8-10 days (post Peel Recovery Formula from SKIN RENU.

The dermal turgor will remain enlarged for the next 45-90 days,

**OUR PROCEDURE**

- Detailed Anamnesis
- Diagnoses and treatment proposals.
- Photographic Documentation
- Treatment Planning

The depth of the peeling can be classified in accordance with the DEGREE OF PROGRAMMED VASODILATATION

- **VERY SUPERFICIAL PEELING** is suitable for use on: EPIDERMAL MELASMA, SENSITIVE SKINS, ASIAN SKINS, DARK SKIN, SKINS HYPERPIGMENTATION DISORDERS. – Halt when the skin becomes **HOT, BUT WITHOUT SIGNS OF ERYTHEMA.**
- **SUPERFICIAL PEELING** – indicated for **INICIAL PHOTOAGING.** Halt when the skin **SHOWS AN INTENSE, PINK COLORED ERYTHEMA**
- **MEDIUM PEELING** – indicated for **MIDDLE PHOTOAGING** in phototypes I, II & III
- Halt when the skin **SHOW A STRONG ERYTHEMA** (similar to intense sunburn).
- **DEEP PEELING** - Indicated for **SEVERE PHOTOAGING.** Halt when the skin develops a **STRONG ERYTHEMA AND A SLIGHT EDEMA**

**CAUTION ON MELASMA TREATMENT**

With EPIDERMAL MELASMA, we recommend that the correct diagnosis of the depth of the melasma, and the patient be told about the possibility of treatment with YELLOW PEEL FACIAL.

Generally, melasma is mixed, meaning the melanin is present in both the epidermal and dermal layers.

The melanin in the dermal layer cannot be remove with any type of therapy known today. Deep peelings, Laser Resurfacing, Phenol or TCA Peel, can cause serious pigmentation (Hypoigmentation or Hyperpigmentation).

### **VERY SUPERFICIAL PEELING PROTOCOL**

1. Apply the yellow cream to the facial skin, and leave to work for 20-30 minutes.
2. Remove the inactive cream with a neutral soap and reapply a new layer of yellow cream, leaving it to act for the same time.
3. Repeat these steps until the skin becomes **HOT, BUT WITHOUT SIGNS OF ERYTHEMA**.
4. Apply **POST PEEL RECOVERY FORMULA** for the next 8-10 days; use a neutral soap for washing.

### **SUPERFICIAL PEELING PROTOCOL**

Repeat 1, 2 and 3 steps until the skin **SHOWS AN INTENSE, PINK COLORED ERYTHEMA**.  
Apply **POST PEEL RECOVERY FORMULA** for the next 8-10 days; use a neutral soap for washing.

### **MEDIUM PEELING PROTOCOL**

The ideal peel for photoaging in phototypes I, II & III  
Repeat 1, 2 and 3 steps until the skin **SHOW A STRONG ERYTHEMA** (similar to intense sunburn).  
Apply **POST PEEL RECOVERY FORMULA** for the next 8-10 days; use a neutral soap for washing.

### **DEEP PEELING PROTOCOL**

This should be indicated for clearer, lighter skins, and those with severe photoaging in phototypes I & III.  
Inform the patients about the principals objectives of deep peel.  
The **INFLAMMATORY PROCESS** that is developed with the use the deep peel is normal and is expected for a better result.

Repeat 1, 2 and 3 steps until the skin shows a **STRONG ERYTHEMA AND A SLIGHT EDEMA**  
Apply **POST PEEL RECOVERY FORMULA** for the next 8-10 days; use a neutral soap for washing.

Apply hydrocortisone cream (**Berlison<sup>®</sup>**, **Westcort<sup>®</sup>**) 2 or 3 time a day, (if there is a strong erithema)  
If necessary use a sun block and try to use one that uses physical components. **FACIAL SUNBLOCK<sup>®</sup>**.  
(Try to avoid the use of sun blocks during the first 6 days).

### ***ROUTINE FOR THE 11<sup>th</sup> to the 30<sup>th</sup> DAY OF TREATMENT.***

- 1- *Always* wash the skin with **neutral soap**..
- 2- Apply **NUTRI CREAM<sup>®</sup>** or **ANTIOXIDANT C LOTION<sup>®</sup>** ( morning and evening).
- 3- If the skin does not show sensitivity, creams or gels can be used that contain Glycolic Acid and Phytic Acid (**LIGHTENING CREAM** or **SKIN BLACHING GEL**) morning and evening)..
- 4- As a general rule use a physical sun protector (**Facial Sunblock SPF 30**)

### ***PLEASE NOTE; GENERAL SAFETY CONSIDERATIONS DURING THE PEELING:***

- 1- Use only once or twice on the area around the eyes, during the peeling stages.
- 2- Do not use this peeling on skin that has been damaged by, or has scars caused by zoster herpes.
- 3- Warn the patient that there may be a strong inflammatory reaction on the skin, with a strong erithema and a burning sensation, and that this is normal, and is part of the objectives of this peel.
- 4- Avoid the sun and always use a physical sun protector (**FACIAL SUNBLOCK SPF 30<sup>®</sup>**).

***PLEASE NOTE THAT THIS PEELING CAN BE REPEATED EVERY 30-60 DAYS.***