

# Non-Surgical Feminine Rejuvenation Presents Significant Practice Growth Opportunity

By Jeffrey Frentzen, Executive Editor

**F**eminine rejuvenation is an umbrella term used to describe a range of aesthetic and functional procedures that correct and restore the optimum structural form of the vagina and surrounding tissues, including improved hydration and elasticity in the vaginal mucosa. Due to various causes ranging from childbirth to genetics, congenital disease and/or trauma, the labial and vulvar regions may over time become loose and lax. Traditionally, treatment has been performed by gynecologic surgeons and sometimes plastic surgeons. Recently, however, surgical procedures have been supplemented with new, non-invasive, energy-based systems, which is a welcomed development for the many women wary of surgery due to the risk, expense and downtime involved.



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“Women are very enthusiastic about the fact that they can find a solution for such complicated problems without any kind of anesthesia or an invasive procedure.”

These devices have opened up a new market for non-surgical labial correction procedures, said Alexander Bader, M.D., F.A.A.O.C.G., F.A.A.C., a cosmetic surgeon and urogynecologist in Athens, Greece. “Women are very enthusiastic about the fact that they can find a solution for such complicated problems without any kind of anesthesia or an invasive procedure,” he said. “Another main reason women want this procedure is it can help restore physical sensation during intercourse and improve overall sexual satisfaction.”

New modalities being applied to feminine rejuvenation include labia resurfacing using CO<sub>2</sub>-based lasers, fat or filler injections, and the use of radiofrequency (RF)-based energy devices. Among the latter, the Protégé Intima from BTL Aesthetics, Inc. (Framingham, Mass.) is a new system that combines focused RF based technology with innovative built-in safety features. Its collagen remodeling treatments operate at high energy levels, with temperatures reaching 40° C to 42° C on the skin’s surface without compromising patient comfort.

The RF-based ThermiVa from ThermiAesthetics, (Southlake, Texas) uses an S-shaped handpiece that tightens external and internal vulvovaginal tissue via a thermistor tip, which also controls heat delivered to the skin. Monitoring of tissue temperature is done via a minimally invasive treatment probe.

ReVive from Viora, Ltd. (Jersey City, N.J.) employs non-invasive, bi-polar RF energy that utilizes the firm’s proprietary CORE™ technology to improve labial skin laxity and texture using the unit’s V-ST handpiece, which is designed to ensure accurate energy delivery for safe and painless treatments.

The new Viveve System from Viveve Medical, Inc. (Sunnyvale, Calif.) uses a proprietary form of RF-based energy to remodel collagen and restore the tissue in the vaginal introitus. The system’s efficacy is bolstered by a strong safety profile and fast patient recovery.

Femilift™ from Alma Lasers (Buffalo Grove, Ill.) offers minimally invasive CO<sub>2</sub> laser-based treatment that induces collagen deposition via concentrated thermal heating of the inner vaginal tissue layer.

Another CO<sub>2</sub> laser, MonaLisa Touch™, which was developed in Europe by DEKA (Florence, Italy) and will now be distributed in the U.S. by Cynosure, Inc. (Westford, Mass.), is also designed to stimulate and promote the regeneration of collagen fibers, as well as restore hydration and elasticity within the vaginal mucosa.

Fotona (based in the U.S. and Europe) has released Intimalase, a 2940 nm, non-ablative Er:YAG laser with proprietary “Smooth-mode” technology that provides tightening of the vaginal canal via neocollagenesis and remodeling.

Additionally, the Action II Petit Lady from Lutronic, Inc. (Fremont, Calif.) offers a non-invasive laser-based procedure that enables practitioners to effectively treat a wide-range of vulvovaginal symptoms and conditions.



Before Tx



After one ThermiVa Tx  
Photos courtesy of Red Alinsod, M.D.



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"The accessible global market opportunity for non-surgical feminine rejuvenation could be as much as \$7 billion over the next four years. We have placed hundreds of systems with both core practitioners – OB/GYNs – and even a range of non-core physicians with aesthetic practices, such as plastic surgeons. All will benefit, as will their patients."

Aesthetic physicians interested in using lasers for this type of treatment probably already use them to do other procedures, such as facial skin rejuvenation or body shaping, noted Red Alinsod, M.D., a gynecologist in Laguna Beach, Calif., who pioneered energy-based vaginal rejuvenation and helped develop ThermiVa. "While some practitioners may be looking to just add another type of procedure to their menu of energy-based treatments, for those who want to concentrate on gynecologic use of devices, they would probably go with an RF-based system."

Regardless of the technology used, "There is talk within the industry that the accessible global market opportunity for non-surgical feminine rejuvenation could be as much as \$7 billion over the next four years," claimed Paul Herchman,

CEO and founder of ThermiAesthetics. "We don't know exactly how big the market is, but we have placed hundreds of systems with both core practitioners – OB/GYNs – and even a range of non-core physicians with aesthetic practices, such as plastic surgeons. All will benefit, as will their patients."

For example, Mr. Herchman continued, "We approached a facial plastic surgeon to adopt our vaginal rejuvenation technology and she initially said she was not interested. Then, she went back and talked with her nursing staff and they immediately said, 'Yes, we are very interested in that type of treatment.' They explained that while the women coming into the practice don't talk about it openly, they do ask for it. That's all it took and the surgeon added this treatment to her practice."

This market will continue to grow, maintained Khalil A. Khatri, M.D., a dermatologist in Nashua, N.H., who currently uses the Protégé Intima. "I think a lot of women don't



Before Tx



After one Protégé Intima Tx  
Photos courtesy of Khalil A. Khatri, M.D.

realize they have a looseness or laxity problem. Currently, many patients getting these treatments don't want to share that information with others. It is like years ago, when a woman would get a face-lift, but they would not talk about it. As vaginal tightening procedures become better known, through the media mostly, they will become more popular."

Although interest level in these procedures is expanding overall, according to Stephen A. Foley, M.D., a gynecologist in Colorado Springs, Colo., who uses Viora's ReVive, "It depends on where you live. We're in a small community where there is some interest in this treatment, but the numbers are fairly low. In larger, populous regions this procedure is more common. Consider that some physicians are charging \$5,000 to \$6,000 to do the surgical procedure, whereas with a non-surgical procedure for maybe \$1,000 or \$2,000 the patient can obtain a decent result for much less."

The procedures are tricky to market, though, Dr. Foley added. "You can't really put up a billboard that says, 'Unhappy with your vagina? Give us a call.' We are letting word-of-mouth drive the train. This is an exciting area to be working in."



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"Among vaginal tightening patients, a majority that I've treated said they had significant change. Increasingly, people don't want surgery when there are alternatives. The procedure works for any age group."

Although he has performed surgical correction for years, Dr. Bader found that some prospective patients either did not want surgery or were not good candidates for surgery. He now uses Femilift as a non-surgical alternative. "Prior to using the Femilift I used fillers, but they were more painful, not long lasting and quite expensive," he shared. "Candidates that had been in that surgical grey area now have a good option. And with this technology, I not only can tighten, but also rejuvenate the outer part of the vagina related to the labia majora. As well, I use the system to address other indications, such as scar correction. Patient satisfaction rates are quite high."

Patient satisfaction with energy-based feminine rejuvenation has been good across the board, Dr. Alinsod concurred. "Among vaginal tightening patients, a majority that I've treated said they had significant change, so much so that their partners could feel the difference," he said. "Increasingly, people don't want surgery when there are alternatives. The procedure works for any age group, such as the 20 or 30 year-olds that have kids or plan to have more childbirth in the future, or those in their 40s and 50s that are done having kids."

According to Dr. Bader, "I've been using Femilift for two years and only two patients expressed that they were not too happy with the procedure. These were cases where patient expectations were perhaps too high, although their procedures still resulted in tightening."

No matter the device, the procedure is pain free and feels like a warm massage, which is actually very relaxing for the patient, Dr. Bader expressed. "Even when we put the handpiece inside, it is still comfortable," he stated. "There is no downtime, redness or swelling. Usually, with one treatment we don't see a difference, but after two treatments the difference is quite noticeable."

Although patient satisfaction has been uniformly high across all devices, there is a strong human factor that must be considered, as well, Dr. Foley pointed out. "We did some post-procedure evaluations and in some cases, women we thought didn't show much improvement were quite happy with the outcome."

No matter how the patient might perceive the outcome, the tightening effect can be remarkable, Dr. Alinsod advised. "The vaginal mucosa has more moisture and RF energy is really effective where there is moisture. The tightening effect is even more dramatic in mucosal tissue, such as inside the vagina, than it is on the skin of the face and neck. Also, it can tighten the skin around the urethral area and those with mild incontinence say that it helps them with control."

Dr. Alinsod continued, "After years of doing these treatments, I have observed that the labia majora had increased its collagen content and grew thicker, so that the patients are less uncomfortable during sexual intercourse. The treatment creates increased blood flow and moisture inside the vagina, which improves comfort. I've observed this in most of the patients."



Before Tx



After six ReVive treatments

Photos courtesy of Steven A. Foley, M.D.



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"Almost any practitioner can do this treatment. As soon as one is trained, a nurse practitioner, physician's assistant, or someone with a license can perform the treatment, making it a profitable procedure for any aesthetic practice."

As energy-based feminine rejuvenation procedures take hold in the aesthetic field, practitioners may find they will be able to treat unexpected indications, Dr. Alinsod shared, "such as a future treatment for vaginal atrophy, also called atrophic vaginitis, which is the thinning, drying and inflammation of the vaginal walls due to a decrease in estrogen," he explained.

However, one important point patients and physicians should recognize is that, "A treatment with any energy-based device simply will not give them the tightening effect you get with major surgery, but it's pretty close," Dr. Alinsod stated.

Joseph Berenholz, M.D., a gynecologic surgeon in Farmington Hills, Mich., uses the Protégé Intima to treat patients that suffer from oversized labia majora, "As well as those that don't want to undergo surgery, but want to shrink the labial tissue 30% to 40%. We have had a great deal of success in the short term," he said, "but unfortunately, as a gynecologic surgeon and based on the limited research I've done on non-surgical energy-based vaginal rejuvenation techniques, I'm not clear on how it would work in the long-term."



Before Tx



After ThermoVa and PRP treatments  
Photos courtesy of Red Alinsod, M.D.

With vaginal tightening cases, the defect is the division between the rectum and the vagina and the division between the ladder and the vagina, he added. "Until those anatomical defects are fixed via surgery, from an anatomical / logical perspective, I don't see how RF or other energy-based sources can solve the problem long-term."

In researching how manufacturers and some physicians market non-surgical solutions, Dr. Berenholz was also disturbed by some of the claims. "Some try to scare people off of surgery, saying that surgery makes you numb or desensitized because we're cutting through nerves, and that people that

go through this surgery never regain sensation. I can tell you that among the thousands of patients that others and I have operated on, none of us have reported any loss of sensation," he concluded.

Once the misinformation and fear dissipates and non-surgical rejuvenation becomes more acceptable with patients, demand for the treatment will likely explode, Mr. Herchman opined. "With this segment, which is virtually untapped, you can draw a comparison to Viagra and Cialis, which is an enormous market. With this aesthetic procedure the side effects are practically nil and it is easy to do. It makes things better for the woman, and the couple."

Business prospects remain positive, noted Dr. Alinsod. "It's like manna. Almost any practitioner can do this treatment," he said. "It doesn't take a high skill level, frankly. We have the technique, the stroke counts and the timing down pat. As soon as one is trained, a nurse practitioner, physician's assistant, or someone with a license can perform the treatment, making it a profitable procedure for any aesthetic practice." ■