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E-NEWS

Our NEW Jane Iredale line is here.

All surgery patients will have the opportunity to book a free consultation for concealing and healing after your surgery to include the other products from the line, this must be a booked appointment and it will take approximately 20 minutes.



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Why Minerals

Jane Iredale's Skin Care Makeup combines the most up-to-date colors with skin-care benefits that conventional makeup can only envy:

- Non-comedogenic, will not block pores.
- Virtually no allergy risk. All products have been sensitivity tested.
- Broad-spectrum UVB and UVA protection - up to SPF 20.
- Anti-inflammatory, helps to calm and soothe irritated skin.
- Very water resistant rating by an approved FDA lab.
- Complete coverage for skin conditions like acne, rosacea and redness following treatments like chemical peels and laser resurfacing.
- Contains no talc or parabens.
- Composed of inert minerals that cannot support bacteria.
- Environmentally aware.
- No products have been tested on animals

Known as The Skin Care Makeup, the *jane iredale* line is so safe and beneficial to use that it is recommended by Plastic Surgeons and Dermatologists throughout the world.

Jane's line is a highly-sophisticated blend of minerals and pigments that are micro-pulverized, using proprietary technology and processes to form microscopic flat crystals. These crystals overlap each other on the skin to form a filter that allows the skin to breathe and function normally while still protecting it from air-borne pollutants. The staying power of the minerals is so great that they rarely need a touch-up during the day. And because these silky-feeling powders are water resistant, they won't crease or smear even during the most strenuous exercise.

These state-of-the-art minerals are available in so many shades that there's one for every complexion no matter what the ethnicity.

The Obagi Nu-Derm System

Transforms Skin so that it Looks and Acts Younger and Healthier

Your patients come to you looking for solutions to correct unwanted signs of aging. Those signs caused by external factors and the natural breakdown in skin function as we age, include:

Now is the perfect time to look at repairing the skin from any sun damage, try our combination of IPL and Obagi for the optimum results.



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- Fine lines and wrinkles
- Sun and age spots
- Uneven skin tone
- Loss of elasticity and firmness
- Loss of natural skin hydration

You have the ability to Transform their skin with the Obagi Nu-Derm System, proven to improve skin functions so that skin looks and acts younger and healthier.

How It Works: Transformation at the Cellular Level

The Obagi Nu-Derm System uses a unique combination of active and prescription ingredients - including Tretinoin and Hydroquinone 4% - to maximize penetration to all skin layers. The specific dosage and frequency are determined and monitored by you, according to your patient's skin condition, needs and lifestyle.

The System triggers our Therapeutic Cascade™ that:

- Increases cellular turnover of abundant, healthy keratinocytes, pushing fresh cells to the surface more quickly and promoting old cells to exfoliate faster
- Suppresses melanocyte production reversing and preventing hyper-pigmentation
- Promotes the even distribution of melanin, eliminating unwanted dark patches and age spots
- Improves intracellular transcription of keratinocytes, producing healthy, uniform cells for better skin structure
- Stimulates fibroblasts to increase collagen and elastin formation, resulting in stronger, more resilient skin
- Increases GAG synthesis, providing natural hydration and necessary nutrients to the epidermis
- Increases angiogenesis, improving blood flow

Selecting Patients for the Obagi Nu-Derm System

The Obagi Nu-Derm System is best for patients who are willing to commit to a comprehensive skin care protocol and will tolerate side effects. They also can be identified by the following:

- Concerned about mild to severe photo damage
- Want to eliminate sun or age spots and have hyper-pigmentation
- Have fine lines, wrinkles and laxity
- Experience adult acne

Saline versus Silicone for Breast Augmentation Today

Breast implants: Silicone or Saline

1. Why the U.S. Food and Drug Administration ban of silicone breast implants? The ban occurred for a number of reasons. Pressure from the media, trial lawyers, and various activist groups was intense after the Connie Chung show in 1990. There was a fear that they were not safe. They were never "approved" by the U.S. Food and Drug Administration to begin with. They were "grandfathered" in 1976 when the U.S. Food and Drug Administration began the process of approval as a formal process. Even though there was a large amount of research including animal data and human data on the safety of these devices, The U.S. Food and Drug Administration elected to take the implants off the market entirely at first and then allowed their use in reconstruction only.

2. Silicon (no "e") is an element that exists nearly everywhere in nature. Silicone is a generic name for a family of silicon-carbon based polymers. Depending on the length or complexity of these polymers, silicone can be liquid, gel, or solid rubber. Silicone does not exist naturally but must be compounded in the chemical laboratory. Saline is a salt and water. Normal saline has a concentration of 0.9% and approximates the concentration of human extracellular fluid. Seawater, in contrast, has a concentration of approximately 5 % salt in the water.

3. The difference between silicone and saline implants is simply what is contained within the envelope of the implant. All the breast implants have the same outer shell that is made from silicone rubber. Most implants are smooth, whereas some implants are textured. These days, it seems that most plastic surgeons prefer the smooth implants for a variety of reasons. The silicone implant contains silicone gel and comes prefilled from the factory with a specified amount. The sizes vary in increments of 25 to 30 cc (roughly 1 oz) depending on the manufacturer. The saline implant contains normal saline and the implant is filled to its designed volume in the operating room. The sizes also vary in increments of 25 to 30cc, but because they are filled during surgery, some additional adjustments can be performed.

4. As of November 17, 2006, the U.S. Food and Drug Administration has lifted the ban on the use of silicone implants for breast augmentation surgery. That means that women desiring breast augmentation surgery may have the option of choosing a silicone gel-filled implant for her augmentation. The choice will have a number of requirements imposed by the U.S. Food and Drug Administration. The U.S. Food and Drug Administration is required magnetic resonance imaging examinations after the first 3 years and every 2 years after that, and the patient must be a minimum of 22 years of age (18 years of age minimum for saline implants).

There is no age minimum in Canada and the Silicone implants were never banned in Canada- they just had a restriction of access and required approval for use by Health Canada. There is no requirement for MRIs in Canada.



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5. For more information, check out the U.S. Food and Drug Administration web site (www.fda.gov/cdrh/breastimplants). The web site has a wealth of information regarding breast implants and is helpful to women trying to make a rational choice about breast augmentation surgery. It also spells out the new requirements for long-term follow-up of silicone gel-filled implants (in the United States, not in Canada).

6. There are potential complications with either saline or silicone breast implants which are similar for both: Among the potential complications are bleeding, hematoma formation, infection, capsule contracture formation, chronic pain, implants deflation or leakage, implant rupture, changes or loss of sensation, asymmetry, possible interference with breast feeding, possible difficulties with mammography, and the possible causation (none known at this time) of other diseases. Because of the above, it is possible (probable) that a woman undergoing breast augmentation will need additional surgery at some time in the future depending on her age at the time of the augmentation. There has not been any link found between breast implants and any disease process.

7. Comparison of breast implants: Saline-filled versus silicone gel-filled

Saline-filled

Rippling-palpable / visible
Less natural feel
Shape control, negative
Natural substance
Adjustable
Small incision
Leaks easily detectable
Implant less cost

Silicone gel-filled

Natural feel/minimal rippling
More natural feel
Shape control, positive
Foreign substance
Not adjustable
Slightly larger incision

>>Both will have to be replaced at some point in the future - 10 to 15 years.<<

8. Thoughts on choosing between saline versus silicone: For women choosing breast augmentation who already have a modest amount of normal breast tissue and subcutaneous fatty tissue, either type of implants will normally be very satisfactory and often almost indistinguishable. This also applies to women desiring a very minimal augmentation. For women choosing breast augmentation who are relatively thin or have relatively little breast tissue, sub muscular placement of the implant can hide or greatly minimize the undesirable properties of saline implant. This is why sub muscular placement is virtually always used in patients who have had mastectomies undergoing reconstruction even with silicone gel-filled implants. For women choosing breast augmentation that are "extremely thin" and with "minimal breast tissue," the silicone gel-filled implants has a number of advantages, particularly when it comes to the issues of rippling and "feel". These implants may be placed sub muscularly or under the

breast tissue depending on what the patient decides with their surgeon. There is an option to add micro-fat grafting to the breast tissue to enhance the shape of the breast and help "disguise or hide the edge of the implant and possibly avoid going under the muscle- this may be preferred in patients who are very physically active.

9. We do recommend that a patient have a pre-operative mammogram as per the guidelines by Health Canada and especially in cases where patients have a family history of Breast Cancer.

If you have any questions please contact the office and schedule a consultation.



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