Plastic Surgery Institute

Patient guide · Facial volume

Soft tissue fillers

An informed approach to facial volume, product choice and safety. Understand the possibilities—and the limits.



02 Understanding your options
03 Consultation & preparation
04 Procedure & fat transfer
05 Aftercare & results
06 Risks & safety
07 Cost & choosing your clinician
08 Contact & informed decisions

A medical procedure, not a routine beauty service. Decide with a qualified, experienced clinician; choosing no treatment is always an option.



Imad Shehadi MD

Plastic Surgery Institute
63 Souraty Street, Hamra Nassif Bldg., 1st Floor, Beirut, Lebanon
Phone +9611746345 · WhatsApp +9613307854
psi@psi-lb.com

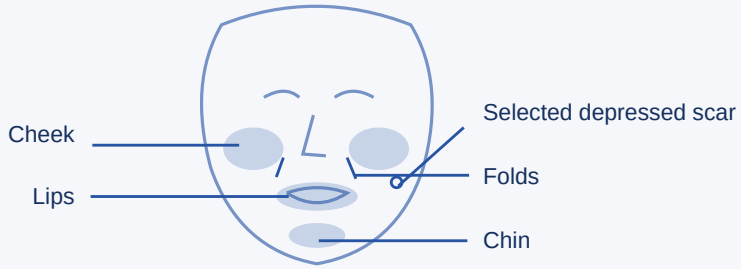
01 · The basics

Understanding your options

Fillers may restore facial volume, enhance shallow contours, add lip fullness, soften selected folds and improve some depressed scars. They cannot erase every wrinkle, bag or skin fold.

Different concerns need different plans

Facial aging reflects changes in skin, fat, support and other tissues—not one simple cause. Fillers do not relax muscles: botulinum toxin is a different injectable drug. Dynamic expression lines may need another plan. Fillers cannot reproduce a surgical skin lift; no treatment, surgery or another appropriate treatment may be better.



Regions discussed in assessment—not an indication, injection-site plan, safety map or guarantee of product availability. Every proposed site needs individual review.

Materials are not interchangeable

- **Hyaluronic acid (HA):** the most commonly used facial filler; generally absorbable, with different properties by product.
- **Calcium hydroxylapatite (CaHA) and poly-L-lactic acid (PLLA):** absorbable options; some products stimulate collagen gradually rather than giving their final effect immediately.
- **Polymethylmethacrylate (PMMA):** nonabsorbable beads in some products; permanent material can remain long term. Not all fillers are temporary.

Not every material or product is suitable for lips or every facial site. Review the current patient leaflet and exact intended use; authorization is product- and site-specific, with local rules applying.

Removal is not a reset button

A clinician may assess reduction of HA filler, but not all fillers can be dissolved. Removal can be difficult or impossible, especially for permanent material, and may need risky surgery. No intervention guarantees reversal of vision damage.

02 · Before treatment

Consultation & preparation

Healthy adults with realistic goals may be considered after assessment. Share your full history—even when a previous treatment seemed minor.

Prepare your history

- Medical conditions, bleeding problems, healing difficulties, severe allergies or prior anaphylaxis; material-specific allergies and sensitivity to lidocaine or other anesthetics.
- All medicines, blood thinners, nonprescription pain medicines, vitamins, herbs, supplements, alcohol, nicotine and other drug use. Do not stop a prescribed medicine without its prescriber's agreement.
- Previous fillers, especially permanent or unknown products; facial implants, surgery, botulinum toxin, lasers and other procedures. Bring records if available.
- Cold sores, skin inflammation or infection, recent illness, earlier reactions, and recent or upcoming dental work and vaccinations.



Health & treatment history



Product & site review



Follow-up & contact

Examination and shared choices

The clinician examines facial structure and skin, may take photographs, and discusses your goals, alternatives, product type, proposed volume, likely duration, maintenance, limits and risks. Ask why that product suits that particular site. Allergy testing may be indicated for certain materials; it is not a universal requirement for every HA filler.

When waiting is safer

Active infection or inflamed skin should be treated first, with injection deferred as appropriate. Safety during pregnancy and breastfeeding has not been established; elective treatment is generally deferred. Discuss nicotine and health factors that may affect healing or suitability.

Planning, not blanket restrictions

Inflammatory reactions have been reported after illness, dental procedures and vaccinations. Tell your clinician about recent or planned events; this is not advice to avoid vaccination or use a universal waiting interval. Preventive medicines, when appropriate, require an individual prescription—not an automatic regimen.

Consent should be unhurried and informed. Read the product leaflet, discuss discomfort and complications, and confirm the responsible clinician, after-hours contact and emergency arrangements before proceeding.

03 · What to expect

Procedure & fat transfer

Treatment is performed by a qualified clinician in a medically appropriate licensed setting. The appointment length, comfort measures and plan vary—not a guaranteed painless “lunchtime” service.

01 Assessment, consent & product check

Confirm the goals, markings if needed, consent and authentic, correctly labeled product. Review the planned sites and product-specific risks.

02 Cleansing & comfort

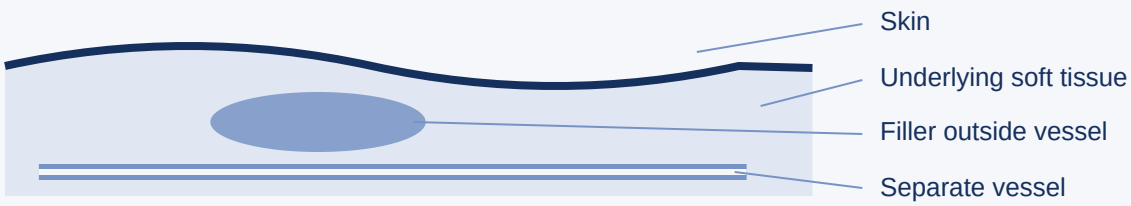
Skin is cleansed. Topical or local numbing may be used; review allergy history, including lidocaine already present in some products.

03 Controlled placement & assessment

The clinician uses a needle or cannula for controlled small placements and reassesses. A cannula does not eliminate blood-vessel risk. Gentle clinician molding is used only when appropriate.

04 Finish & review

Receive written aftercare, follow-up arrangements and an urgent contact. Keep the actual product name, batch number, volumes, treated sites, date and a copy of the patient leaflet.



Concept only: the deposit is outside the separate vessel. Plane, product and site are individualized; vessels are schematic and incomplete. Never a safe-injection map.

Optional: your own fat



Optional fat transfer: donor liposuction → preparation → graft. A surgical option, not the same as a packaged filler.

Fat transfer uses liposuction from a donor area, preparation of the harvested tissue and a facial graft. The graft must establish a blood supply to survive. Some fat is reabsorbed; survival and retained volume vary. Not all transferred fat lasts permanently, and correction is not necessarily simple.

This more surgical option needs separate consent and donor-site care. Both sites may swell or bruise; risks include infection, fat necrosis, cysts, contour irregularities and rare vascular embolism. Recovery may take longer, over weeks, and further treatment may be considered without guaranteed results.

04 · After treatment

Aftercare & results

Early fullness is not the final result. Your written, product-specific instructions and direct access to the treating team are essential.

Early days

Swelling, bruising, redness or numbness can affect the early appearance.

Settling & review

Some effects take days to weeks to settle; collagen stimulation develops over weeks to months.

Longer term

Duration and maintenance vary. Nonabsorbable material may persist, but the face continues to age.

Protect the treated tissues

- Ask when to resume makeup, skin products, exercise, alcohol and heat exposure. Discuss dental plans; there is no single timetable that fits every product and patient.
- If recommended, use a clean, wrapped, cool compress lightly. No direct ice or strong pressure. A compress is not a treatment for possible vascular symptoms.
- Do not routinely massage filler. Only follow precise clinician directions when the particular product requires it, including some PLLA regimens.
- Do not self-treat a new lump or assume a color change is ordinary bruising. Increasing redness, warmth, drainage, fever or a new persistent lump needs prompt clinical review.

Review before deciding on more

Assess results after swelling settles and at the planned review. Absorption, material, area and individual factors affect longevity. Maintenance may be discussed, but an automatic top-up or a precise endpoint is not promised. Fat transfer also requires donor-site care and often a longer settling period over weeks.

Act immediately—do not wait

Unusual or worsening pain, white, gray or blue skin, or a blotchy/mottled appearance: get IMMEDIATE medical assessment and contact the injector.

Vision loss or any vision change, signs of stroke (facial weakness or difficulty speaking), or breathing difficulty: call emergency services NOW. Contact the clinician while arranging emergency care. Do not wait for swelling to settle or try ice or massage at home.

05 · An informed decision

Risks & safety

All filler materials carry risks. Some occur early; others appear weeks, months or years later. Not every listed problem is rare, and no region is risk-free.

Discuss the full range

- **Skin and comfort:** acne-like eruptions; bruising, bleeding and swelling; redness; itching or rash; skin injury, an open wound and scarring.
- **Contour and feel:** asymmetry; lumps; filler that can be felt under the skin; under- or over-correction; migration away from the original site.
- **Infection and inflammation:** infection, delayed nodules or granulomas, including persistent hard lumps; reactions may need medicines, procedures or surgery.
- **Allergy:** material-specific reactions, including severe anaphylaxis requiring emergency care.

Rare but potentially permanent vascular harm

Accidental entry into a blood vessel can cause vascular occlusion, skin necrosis, vision loss or blindness, and stroke. A needle or cannula cannot make this risk zero. Areas such as the nose and glabella carry particularly high risks and require careful discussion—not promotion as routine treatment zones.

Review the current label and the risk of each proposed site. A schematic cannot show all vessels or establish a universally safe plane. There is no guarantee of complete reversal. Removal or correction can carry additional risks and may be difficult or impossible, especially with permanent material.

Act immediately—do not wait

Unusual or worsening pain, white, gray or blue skin, or a blotchy/mottled appearance: get IMMEDIATE medical assessment and contact the injector.

Vision loss or any vision change, signs of stroke (facial weakness or difficulty speaking), or breathing difficulty: call emergency services NOW. Contact the clinician while arranging emergency care. Do not wait for swelling to settle or try ice or massage at home.

This is not an exhaustive list. Persistent or delayed symptoms also need assessment; report new problems even long after treatment. Ask how your own history and the specific product change the risk.

06 · Planning ahead

Cost & choosing your clinician

Choose a qualified, experienced practitioner or plastic surgeon and an appropriate licensed medical setting. Product knowledge, facial anatomy and complication management matter more than a quick appointment or low price.


Personalized estimate


Licensed setting


Emergency readiness

Ask for a written total

Cost depends on the material and product, volume and number of areas, clinician expertise, setting, follow-up, correction and future maintenance. If fat transfer is chosen, include the donor procedure, anesthesia where needed and surgical care. No fee is quoted here and no financing arrangement is assumed.

Cosmetic treatment is often excluded from insurance. Check your own policy and insurer for the proposed treatment and complications; do not assume reimbursement or universal rules.

Questions before choosing a provider

- What qualifications and relevant experience do you have with this product and proposed site? Who will perform the treatment and review me afterwards?
- Why this product rather than another treatment—or no treatment? May I read its patient leaflet and confirm its current labeling and locally applicable authorization?
- How do you verify authenticity and record the product name, batch, volumes, sites and date? Will I receive a copy and written aftercare?
- What is the on-site complication protocol? Are staff trained, and is an immediate ophthalmic and emergency referral pathway ready for vascular or visual symptoms?
- Who is responsible for urgent calls, including outside office hours? What do further treatment and follow-up cost?

Avoid unsafe shortcuts

Never inject yourself, buy internet or over-the-counter filler, or use a needle-free “hyaluron pen.” Do not use liquid silicone or filler injections for body enhancement. A beauty-service setting is not a substitute for medically appropriate care. No device or technique eliminates serious complications.

Take time to compare options and ask questions. Approval is specific to the product and intended site; this guide does not claim that any particular product or service is available locally.

Arrange an in-person consultation

Let’s discuss your goals

Bring a complete treatment history and your questions. Ask what is appropriate for your anatomy, what cannot be achieved, and whether waiting or another treatment is preferable.



Imad Shehadi MD

Plastic Surgery Institute

Address
63 Souraty Street, Hamra Nassif Bldg., 1st Floor, Beirut, Lebanon

Phone
+9611746345

WhatsApp
+9613307854

Email
psi@psi-lb.com

Leave with a clear plan

Know the proposed product, its alternatives and limits, the total estimate, review arrangements and who to contact for problems. Keep your treatment record and written aftercare. Do not agree to treatment until your questions are answered without pressure.

This guide provides general education only, not individualized medical advice, diagnosis or a treatment plan. It offers no representation, warranty or guarantee of outcome and does not replace a thorough in-person consultation with a qualified, experienced practitioner or plastic surgeon. Follow your treating team’s instructions. Services and suitability must be confirmed individually; this guide does not establish local product availability or approval.

Safety references

FDA: Dermal fillers · FDA: Do’s and don’ts

FDA patient guidance, reviewed for this guide. Approval and labeling are product- and site-specific; local rules apply. These references do not establish Lebanese law.