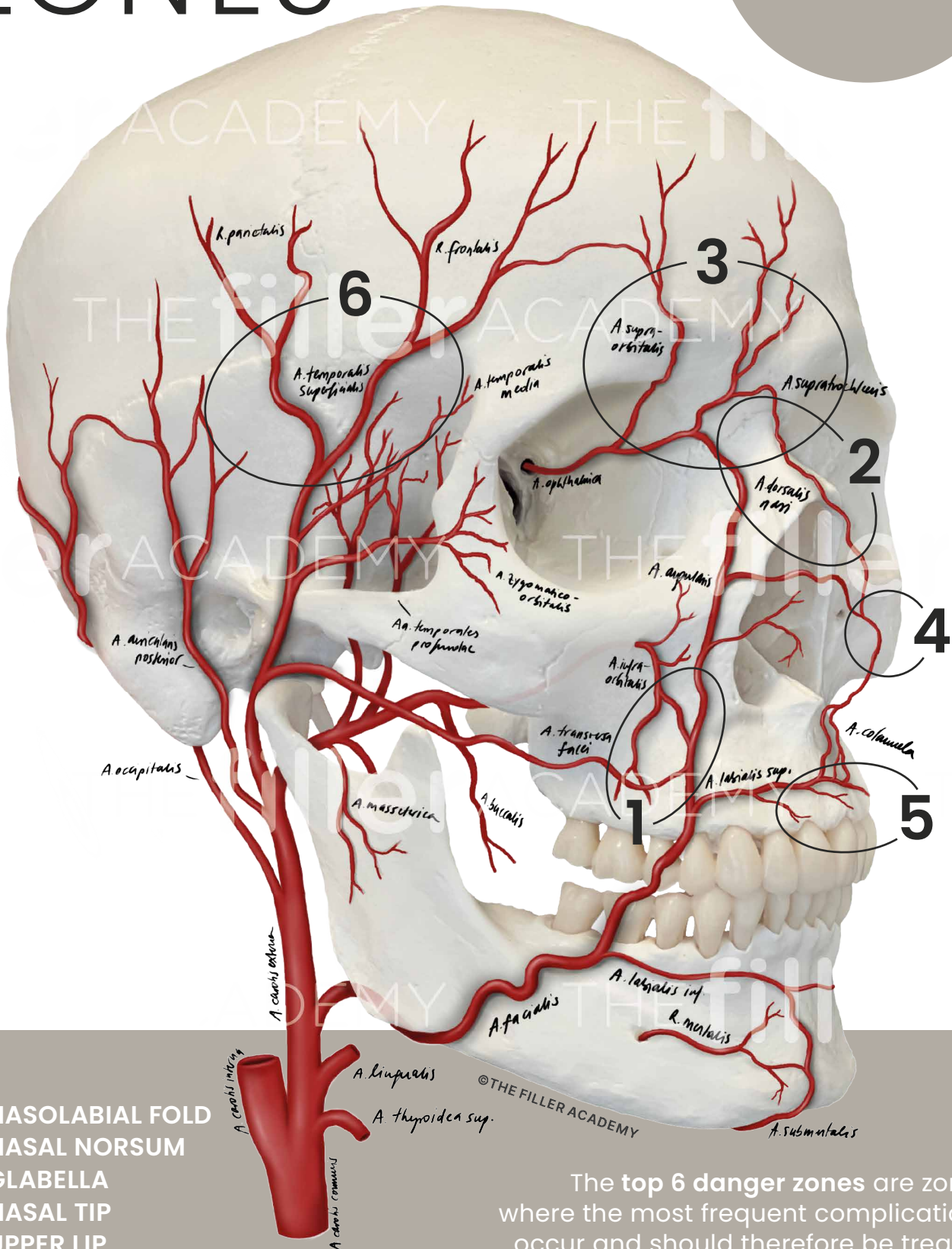


# DANGER ZONES

THE  
filler  
ACADEMY

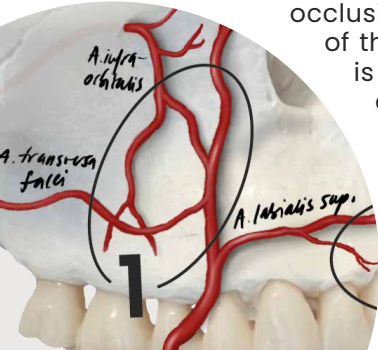


- 1 NASOLABIAL FOLD
- 2 NASAL NORSUM
- 3 GLABELLA
- 4 NASAL TIP
- 5 UPPER LIP
- 6 TEMPLE

The top 6 danger zones are zones where the most frequent complications occur and should therefore be treated with special care.

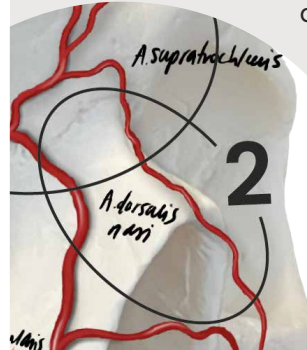
# 1. NASOLABIAL FOLD

This region is one of **the most frequently treated areas** on the face. The vascular course of the angular artery is irregular, so the use of a cannula is mandatory in this region. Vascular occlusions in this region can lead to local circulatory problems. Should the hyaluronic acid thrombus reach further, occlusion of terminal branches of the internal carotid artery is possible. One symptom could be, for example, occlusion of the retinal artery, which may result in blindness.



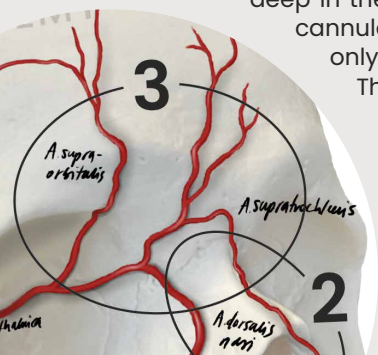
# 2. NASAL NORSUM

The popularity of injecting the bridge of the nose continues to grow. The important vessel that runs here – the dorsal nasal artery – is responsible for supplying the tip of the nose. Both compression of the vessel from the outside and blockage of the vessel can lead to permanent damage and associated disfigurement. Even the use of the cannula does not provide 100% safety, which is why many small amounts of hyaluronic acid should be applied to different areas in any case.



# 3. GLABELLA

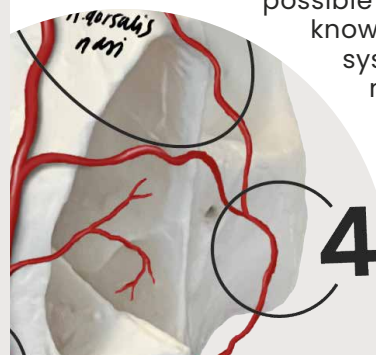
The glabella and the treatment of the frown line should be performed **primarily with botulinum toxin**. Only when the two corrugator muscles and, if necessary, the procerus have been immobilized, can further injection with hyaluronic acid lead to an improvement here. Since the branches of the supraorbital artery can run very superficially here, but also deep in the subcutis, an injection with cannula under the muscle is the only recommended technique.



This region carries a high risk for possible blindness. Therefore, special training for the treatment with hyaluronic acid is essential, for example our F3 course.

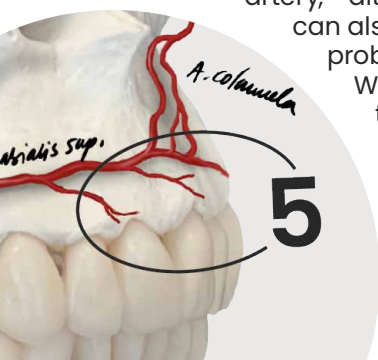
# 4. NASAL TIP

The nasal tip is supplied by a **network of vessels** from the columella, angular, and dorsal nasal arteries. Circulatory disturbances in this region occur more frequently from external compression than from direct injection into the vessel. Therefore, it is important to use hyaluronic acid fillers as sparingly as possible in this region. Anatomical knowledge of the vascular system, cartilage and musculature is essential before approaching this region.



# 5. UPPER LIP

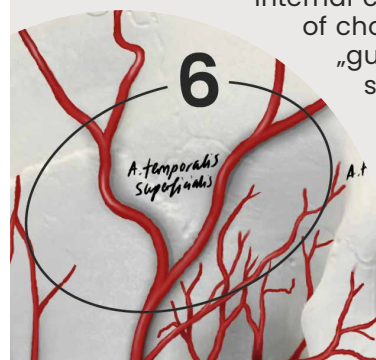
The upper lip is probably **the most common region** for hyaluronic acid treatments. In a large proportion of cases, the artery runs in the submucosa, which is why the application of fillers is safer primarily in the subcutis. This vessel also has connections further cranially to branches of the internal carotid artery via the angular artery, although direct occlusion can also lead to pain and further problems in the upper lip.



We teach cannulation techniques in the upper lip in our F2 course, as these carry less risk of injury to the vessels and significantly reduce potential downtime.

# 6. TEMPLE

The anterior temple in the hairless area is one of the regions that is **gaining popularity**. Treatment of the anterior temple aims to treat age-related volume loss, which can make the face look bony and older. The superficial temporal artery is a vessel that should be avoided here, as it too has a connection to branches of the internal carotid artery. The method of choice may be the so-called „gun-shot“ technique or a superficial cannulation technique in the subcutis.



Both techniques should be performed slowly and with caution to avoid injuries and vascular occlusion.