Wrinkle and Fine Lines Treatment Melbourne - Me Clinic

Canonical: https://www.meclinic.com.au/face/anti-wrinkle-treatments/

Details:

Wrinkles and fine lines are a normal part of ageing. They usually begin as creases that appear only during facial expression, and gradually become visible when the face is at rest.

We offer consultations to discuss non-surgical options for softening the appearance of wrinkles and fine lines. This page explains what causes them, what treatment can and cannot do, and what the risks are.

What causes fine lines and wrinkles

Repeated facial movement. Frowning, squinting and smiling crease the skin in the same places over decades. These are dynamic lines — visible on movement first, then at rest.

Collagen and elastin loss. Collagen production slows from the twenties onward, reducing firmness and elasticity.

Sun exposure. Ultraviolet light breaks down collagen fibres and is one of the largest modifiable contributors to skin ageing. Daily sun protection does more for long-term skin appearance than most treatments.

Ageing and genetics , which influence where and how quickly lines develop.

Lifestyle factors including smoking, dehydration and poor sleep.

Dynamic and static lines are different problems

This distinction matters because it determines what treatment is appropriate:

Dynamic lines appear when a muscle contracts and disappear at rest. They respond to treatments that reduce muscle movement.

Static lines are visible with the face relaxed — the crease has become established in the skin itself. Reducing muscle movement softens them over time but does not erase them; treatments addressing skin texture and volume are often more relevant.

Most faces have both. A realistic plan usually addresses them differently rather than with one treatment.

You can sort your own lines before you book. Hold your face completely still for ten seconds in daylight — genuinely relaxed, not a neutral expression, because most people are still holding a small frown at three seconds. Every line still visible is static. Then frown, raise your brows and squint; anything that appears is dynamic. Photograph both, without a filter. See deep lines and wrinkles .

Areas commonly treated

Forehead lines — horizontal lines from raising the brows

Frown lines — vertical lines between the eyebrows

Crow’s feet — creases at the outer corners of the eyes

Lip lines — fine vertical lines around the upper lip

Chin dimpling — caused by muscle tension or skin thinning

Smile lines and folds around the mouth

How it goes, step by step

Consultation with a doctor. These are prescription medicines, so a doctor must assess you and prescribe before anything is administered. Your facial anatomy, how your muscles move, your medical history and your medications are all part of that assessment. Cosmetic Doctor consultation $150.

Assessment of movement, not just lines. You will be asked to frown, raise your brows, squint and smile, because the plan depends on which muscles are doing what and how strongly — not on where the creases happen to sit.

Baseline photographs , at rest and on movement.

A written plan and quote , naming the areas and what each is expected to do.

The treatment itself. A series of very fine injections into specific muscles — usually a few minutes in total. Most people describe it as a brief sting or pinch per injection. No anaesthetic is normally required, though ice or a topical can be used.

Onset over days. Something is usually noticeable from three to seven days, with the full effect at around two weeks.

Review at about two weeks — the point of this page that people most often skip. See below.

Repeat when it wears off , assessed each time rather than on a fixed schedule.

Why the two-week review matters

Two weeks is when the effect is complete, and it is the only sensible moment to judge anything.

It is also when a small adjustment is straightforward. A top-up at the two-week review is ordinary practice, not evidence that something went wrong. Faces are not symmetrical, muscles differ in strength between the two sides of the same face, and a conservative first treatment deliberately leaves room to add. Adding a little is easy; there is no way to take any away.

Which leads to the single most useful thing you can ask for at a first treatment: start conservatively and review. If the effect is less than you wanted, it is corrected in five minutes a fortnight later. If it is more than you wanted, you wait months. Those two situations are not symmetrical, and the plan should reflect that.

The “frozen” question

The most common worry people bring to a first appointment, and it deserves a straight answer.

An over-treated appearance is a dosing and placement decision, not an inevitable property of the treatment . How much movement you keep is chosen, which means it can be discussed, and it means you are entitled to say what you want before anything is done.

Two practical things follow:

Say what you want in terms of movement, not lines. “I want to still be able to raise my eyebrows” is a far more useful instruction than “I want my forehead smooth”, because the two can conflict and only one of them describes how you will live in your face.

The forehead is the area where this matters most. The muscle that raises the brows is also the one holding them up. Treating it heavily, particularly in someone whose brows already sit low or whose lids

are a little hooded, can leave the brows heavier than before. That is why a good assessment looks at your brow position at rest before anything is planned.

If you have had a result before that you disliked, bring the details — which areas, roughly how much, and what specifically bothered you. That is far more useful than starting from scratch.

What treatment can realistically achieve

Non-surgical wrinkle treatment can soften the appearance of lines and improve skin texture. It does not stop ageing, and it does not produce the change that a surgical procedure such as a facelift produces — a facelift addresses loose skin and descended tissue, which injectable treatments do not.

Outcomes vary between individuals depending on skin type, age, the depth of the lines, and lifestyle. Anyone promising a guaranteed or unnatural-looking-free result is overstating what can be known in advance.

How to judge your own result fairly

Compare like with like. At-rest photograph against a new at-rest photograph, and on-movement against on-movement , in the same light, at the same distance, with no filter. Comparing an at-rest “after” with an on-movement “before” flatters the result and tells you nothing; doing the reverse makes a good result look like a failure.

And judge it at two weeks, not at three days.

Results, downtime and how often

How soon: depending on the treatment, improvement in the treated area may be noticed within several days to weeks, with the full effect visible over a few weeks.

Downtime: most people resume normal activities immediately. Mild redness, swelling or tenderness at the treated site is common and usually settles within a day or two. No general anaesthetic is required.

Duration: these treatments are not permanent. Effects wear off gradually and repeat treatments are needed to maintain the result. How long an individual result lasts varies.

How many sessions: depends on the treatment and your response. Some people notice a difference after one session; others need a series.

Timing it around an event

Allow at least two weeks, and preferably three to four. That gives the effect time to reach full strength and leaves room for a review adjustment if one is wanted. Treating a few days before something that matters means you attend it mid-onset, possibly with a small bruise, and with no time to change anything.

Aftercare, and why it exists

The instructions given after injectable wrinkle treatment are brief, and they all point at the same thing — keeping the product where it was placed while it settles.

Do not rub, press or massage the treated areas for the rest of the day. That includes taking off make-up vigorously, a facial, or resting your forehead on your hand at a desk.

Stay upright for a few hours. No lying flat, no face-down massage, no napping immediately afterwards.

Skip strenuous exercise, saunas and very hot showers for the rest of the day.

Do use the muscles normally. Ordinary frowning and raising your brows is fine and is not the same as rubbing.

Expect small red marks at each injection point for a short time, and possibly a small bruise.

These are not superstition. The reason for each is to reduce the chance of the effect spreading to a muscle that was not meant to be treated — which is the mechanism behind a temporarily heavy brow or an uneven result.

Who this looks different for

A first treatment. Conservative dose, review at two weeks, add if wanted. There is no advantage to a strong first treatment and a real disadvantage if it is more than you like.

Men. Stronger facial muscles and thicker skin on average, so frown lines are often deeper and need more to achieve the same effect. A receded hairline also gives a taller forehead, where a heavy brow shows more readily — which argues for restraint at the top and attention to brow position.

Anyone with low-set or heavy brows, or hooded lids. The group where forehead treatment needs the most care, because the muscle being relaxed is also the one holding the brow up.

Static lines already established. Reducing movement stops them deepening and softens them over months, but it will not erase a crease of thirty years. If that is the main concern, resurfacing or volume is the more relevant conversation. See deep lines and wrinkles .

People in their twenties asking about prevention. An honest answer: sun protection and a retinoid do more over a decade than anything on this page, and they cost less. Treatment of lines that are not yet visible at rest is a decision rather than a necessity, and it should be made with that framing rather than as maintenance.

Anyone who bruises easily or takes blood thinners. Bruising is more likely. Do not stop blood-thinning medication on your own — tell us you take it, and the plan accommodates it.

Pregnancy and breastfeeding. Treatment is avoided.

Anyone with a neuromuscular condition , or taking certain medications. Disclose everything at consultation, including anything over the counter.

What sits outside this treatment

It does not lift. Loose skin and descended tissue are a surgical problem. See lax and sagging skin .

It does not replace volume. That is dermal filler or fat transfer .

It does not improve skin quality — texture, tone, pigment. Those are resurfacing, needling and topicals.

It is not administered without a doctor’s consultation and prescription.

We do not sell it in packages or as a time-limited offer. Time-limited discounting of a prescription medical treatment is prohibited, and a clinic doing it is a clinic to leave.

What you should leave with

The name of the doctor who assessed and prescribed

Which areas were treated, and a record of it

Baseline photographs at rest and on movement

What to expect, and by when — onset at three to seven days, full effect at about two weeks

A review appointment at about two weeks, booked rather than offered

Written aftercare, and what to do if something is not as expected

An itemised quote, and the likely interval before it is repeated

Risks and side effects

All treatments carry risks. For injectable wrinkle treatments these include:

Pain, redness, swelling, bruising and tenderness at injection sites

Headache

Infection at the injection site

Asymmetry, or an uneven result

Spread of effect to nearby muscles, which can cause temporary drooping of an eyelid or eyebrow, or altered expression

Allergic reaction

Lack of response, or a weaker response than expected

Rare but serious effects associated with the spread of the injected substance beyond the treatment area, including difficulty swallowing or breathing — seek medical attention urgently if these occur

Treatment is generally avoided during pregnancy and breastfeeding, in the presence of infection at the treatment site, and in people with certain neuromuscular conditions or known allergy to the substance used.

Injectable treatments in Australia involve prescription medicines and must be prescribed by a doctor after a consultation. Australian law restricts what can be published about prescription medicines, which is why specific product names are not used on this page — your practitioner will discuss the actual product with you at consultation.

Expected, versus call us, versus seek urgent care

Expected: small red marks at injection points, mild tenderness, occasional small bruises, a mild headache in the first day or two, and an effect that builds over a fortnight.

Call us: a drooping eyelid or brow; asymmetry you can see at two weeks; an effect much stronger or weaker than expected; spreading redness, swelling or pain at an injection site after several days.

Seek medical attention urgently: difficulty swallowing, difficulty breathing, or generalised muscle weakness.

Consultation and costs

At consultation, your practitioner assesses your facial anatomy, skin quality and the areas of concern, and discusses what is achievable. Cost depends on the treatment and the areas involved. As at September 2024 and including GST, a consultation with a Cosmetic Doctor is $150 and a skin assessment with a nurse or aesthetician is $50, redeemable on products or services.

Because the effect wears off and is repeated, the figure worth asking for is the annual one rather than the price of a single treatment. Cosmetic treatment is not covered by Medicare, and we are not a no-gap provider.

We are at 4 Burke Road, Malvern East VIC 3145, five minutes’ walk from Caulfield station. Phone 1300 852 050, or use the online consultation form .

Related: before and after , dermal fillers , all anti-ageing procedures .

Common questions about wrinkle and fine line treatment

What causes fine lines and wrinkles?

Repeated facial movement, collagen and elastin loss from the twenties onward, sun exposure, ageing and genetics, and lifestyle factors including smoking, dehydration and poor sleep.

What is the difference between dynamic and static lines?

Dynamic lines appear when a muscle contracts and disappear at rest, and respond to reducing muscle movement. Static lines are visible with the face relaxed, because the crease has become established in the skin itself.

How do I tell which I have?

Hold your face completely still for ten seconds in daylight — genuinely relaxed, since most people are still holding a small frown at three seconds. Every line still visible is static. Then frown, raise your brows and squint; anything that appears is dynamic.

Does a doctor have to be involved?

Yes. These are prescription medicines and must be prescribed by a doctor after a consultation.

Why are no product names on this page?

Because Australian law restricts what can be published about prescription medicines. Your practitioner will discuss the actual product with you at consultation.

What happens at the assessment?

You will be asked to frown, raise your brows, squint and smile, because the plan depends on which muscles are doing what and how strongly — not simply on where the creases sit.

What does the treatment feel like?

A series of very fine injections, usually a few minutes in total, described as a brief sting or pinch each. No anaesthetic is normally required, though ice or a topical can be used.

When will I see something?

Usually from three to seven days, with the full effect at around two weeks.

Why is the two-week review important?

Because that is when the effect is complete and the only sensible moment to judge it — and when a small adjustment is straightforward.

Does needing a top-up mean something went wrong?

No. A top-up at the two-week review is ordinary practice. Faces are not symmetrical, muscles differ in strength between the two sides, and a conservative first treatment deliberately leaves room to add.

Should I start conservatively?

Yes, and it is the most useful thing to ask for at a first treatment. If the effect is less than you wanted it is corrected in five minutes a fortnight later; if it is more, you wait months. Those situations are not symmetrical.

Will I look frozen?

An over-treated appearance is a dosing and placement decision rather than an inevitable property of the treatment. How much movement you keep is chosen, which means it can be discussed before anything is done.

How should I describe what I want?

In terms of movement, not lines. “I want to still be able to raise my eyebrows” is far more useful than “I want my forehead smooth”, because the two can conflict and only one describes how you will live in your face.

Why does the forehead need particular care?

Because the muscle that raises the brows is also the one holding them up. Treating it heavily, particularly with low-set brows or hooded lids, can leave the brows heavier than before.

I did not like my result last time. What should I bring?

The details — which areas, roughly how much, and what specifically bothered you. Far more useful than starting from scratch.

How long before an event should I have it?

At least two weeks, preferably three to four. That allows full onset and leaves room for a review adjustment. A few days beforehand means attending mid-onset, possibly bruised, with no time to change anything.

What is the aftercare?

Do not rub, press or massage the treated areas for the rest of the day; stay upright for a few hours; skip strenuous exercise, saunas and very hot showers that day. Using the muscles normally is fine.

Why those rules?

To reduce the chance of the effect spreading to a muscle that was not meant to be treated — which is the mechanism behind a temporarily heavy brow or an uneven result.

How long does it last?

It is not permanent. The effect wears off gradually and repeat treatments are needed to maintain it, and how long an individual result lasts varies.

How should I judge my result?

Compare at-rest with at-rest and on-movement with on-movement, in the same light and at the same distance, without a filter — and at two weeks, not at three days.

Will it lift my face?

No. Loose skin and descended tissue are a surgical problem, and a facelift addresses what injectables do not.

Will it fill hollows or improve my skin?

No. Volume is filler or fat transfer; texture, tone and pigment are resurfacing, needling and topicals.

Are men treated differently?

Often. Stronger facial muscles and thicker skin mean frown lines are frequently deeper and need more for the same effect — and a receded hairline gives a taller forehead where a heavy brow shows more readily.

I am in my twenties. Should I start for prevention?

Honestly, sun protection and a retinoid do more over a decade than anything on this page, and cost less. Treating lines not yet visible at rest is a decision rather than a necessity.

I bruise easily. Does that matter?

Bruising is more likely. If you take blood-thinning medication, tell us — and do not stop it on your own.

Can I have it while pregnant?

Treatment is avoided during pregnancy and breastfeeding.

Who should not have it?

Anyone with infection at the treatment site, certain neuromuscular conditions, or a known allergy to the substance used — and during pregnancy and breastfeeding.

What are the risks?

Pain, redness, swelling, bruising and tenderness at injection sites; headache; infection; asymmetry; spread of effect to nearby muscles causing temporary drooping of an eyelid or eyebrow or altered expression; allergic reaction; a weaker response than expected; and rare but serious effects from spread beyond the treatment area.

When should I seek urgent medical attention?

Difficulty swallowing, difficulty breathing, or generalised muscle weakness.

When should I call us?

A drooping eyelid or brow; asymmetry you can see at two weeks; an effect much stronger or weaker than expected; or spreading redness, swelling or pain at an injection site after several days.

What does it cost?

It depends on the treatment and the areas involved. A Cosmetic Doctor consultation is $150 and a skin assessment $50 and redeemable, as at September 2024 including GST. Because the effect wears off and is repeated, ask for the annual figure rather than the price of one treatment. Not covered by Medicare.

Individual results may vary. Any surgical or invasive procedure carries risks. Before proceeding you should seek a second opinion from an appropriately qualified health practitioner.