IPL Skin Treatment Melbourne - Intense Pulsed Light - Me Clinic

Canonical: https://www.meclinic.com.au/face/laser-skin-rejuvenation/intense-pulse-light-ipl/

Details:

IPL is not a laser. It is a light-emitting device that uses a broad range of wavelengths, filtered to a band chosen for the condition being treated.

That distinction matters. A laser emits one precise wavelength; IPL emits many at once. The consequence is that IPL is versatile — one device can address several different targets by changing the filter — but less precise than a single-wavelength laser aimed at one target.

How it works

The principle is selective absorption: certain wavelengths of light are absorbed by the structures that need treating — pigment in a sun spot, haemoglobin in a small blood vessel — but much less by the surrounding healthy tissue. The absorbed light converts to heat and damages the target, which the body then clears.

Because surrounding tissue is largely spared, recovery time is shorter than with treatments that resurface the whole skin surface.

What the trade-off actually means for you

Versatility and precision pull in opposite directions, and knowing which side of that you are on is most of the decision.

IPL covers ground. A broad beam over a broad spectrum treats a whole cheek, chest or forearm in one pass. For scattered superficial pigment and diffuse redness across an area, that is exactly what you want, and a targeted laser would be an absurdly slow way to do it.

A laser hits a point. One distinct vessel, one stubborn spot, one lesion sitting deeper — a single-wavelength device aimed precisely will do more, in fewer sessions, than a broad pass.

The breadth is also the risk. Because IPL delivers many wavelengths at once, more of the energy is absorbed by the melanin in your skin on the way to whatever it was aimed at. That is why skin type governs this treatment more strictly than it governs a long-wavelength laser , and why darker skin is usually served better by something else.

If your concern is…	Usually
Scattered superficial brown spots across an area	IPL
Diffuse redness with no single vessel to aim at	IPL , or Laser Genesis if you want it gentler and slower
One distinct visible vessel	Yag or another targeted vascular laser
Pigment sitting deeper than the surface	Yag
A darker skin type	A longer-wavelength laser, usually not IPL

Texture, scarring or lines	Fractional resurfacing or needling — neither IPL nor a vascular laser

Devices used at Me Clinic

Alma Harmony

Cutera Limelight

Cutera ProWave

Which is used depends on your skin type and the condition being treated. That is decided after assessment, not before.

Conditions it may help

Sun damage and skin ageing

Age spots , freckles and hyper-pigmentation

Capillaries and skin redness and facial veins

Rosacea

Birthmarks and skin vessels

Uneven skin texture and fine lines

Acne

Hair reduction

IPL is often used alongside photodynamic therapy (PDT) for acne, sun damage and certain skin cancers , where the light activates a topical medication.

The hair point, which catches people out

The last item on that list is not only a treatment — it is also something that happens whether you asked for it or not, and it is the single most under-warned consequence of IPL.

IPL is absorbed by the pigment in hair as well as the pigment in skin. Treating an area that has visible hair will reduce that hair, at least temporarily and sometimes durably. If the hair was wanted, that is not a side effect you can undo quickly.

The areas where this matters:

The beard area in men. The most common problem. IPL across the cheeks and jaw for sun damage or redness can leave patchy hair loss through a beard, and a patchy beard is considerably more conspicuous than the pigment being treated. If you have or might grow facial hair, say so before anything is planned.

Eyebrows and the hairline. Treated around rather than over, and worth confirming.

Forearms and the chest in men , where treating sun damage across a hairy area will thin it.

Anywhere you want the hair. It is a simple question and it is rarely asked.

This is not a reason to avoid IPL. It is a reason to raise it at consultation, because the plan can work around a beard, and a plan made without knowing cannot.

When results appear

It usually takes about six weeks to see the full improvement from an IPL treatment, though improvement is often visible earlier.

With pigmented lesions, treated spots typically darken first over several days, then flake away over one to two weeks. That temporary darkening is expected and is part of how the treatment works — not a sign it has gone wrong.

What the first fortnight actually looks like

When	What is normal
During	A flash of light with each pulse — visible even with eyes closed behind eyewear — and a sensation like a warm elastic band snap. Usually 15 to 30 minutes for a face.
Straight after	Redness and warmth, sometimes mild swelling, particularly around treated spots. Most people go back to work.
Days 1–3	Treated pigment darkens, sometimes markedly — often described as looking like coffee grounds or freckles gone very dark. This is the treatment working.
Days 3–10	Those darkened spots lift and flake away. Make-up over the top is fine once any swelling has gone.
Weeks 2–6	Redness settles and the result becomes apparent.

If you have something on in the next fortnight, plan around days one to ten , which is when treated pigment is at its most visible. Two to three weeks before an event is the sensible window; three days before is not.

How many treatments

Depending on your skin type and condition, one to six treatments are generally needed. Ask at consultation what the whole course is likely to cost, not just one session.

Time it for the cooler months

Worth saying plainly on an Australian page. IPL is a light-based treatment on skin that must not be tanned before it and must be protected after it, which makes a summer course an uphill exercise.

Before: recent sun means the appointment is deferred, so a course run through summer is a course of rescheduled appointments.

After: treated skin is more sun-sensitive and pigments unpredictably, and the result is undone by the exposure that caused the problem in the first place.

The practical answer: start in autumn or winter, finish the course before the weather turns, and protect it through summer.

If you are booking in November with a beach holiday in December, the honest advice is to wait.

Assessment before treatment

Because IPL delivers a broad spectrum of wavelengths, skin pigment absorbs more of the energy than with a precisely targeted laser. That makes assessment of skin type particularly important here.

Skin type , usually classified on the Fitzpatrick scale. IPL is generally less suitable for darker skin types, where a longer-wavelength laser is often preferred.

Recent sun exposure, tanning or fake tan — treatment is deferred.

Medications that increase photosensitivity.

Cold sore history , if treating around the mouth.

Melasma , which can be worsened rather than improved by heat and light in some people — this needs specific discussion.

Any suspicious lesion in the treatment area, which must be assessed before treatment rather than treated over.

Whether there is hair in the area you want to keep.

A no-obligation consultation with one of our cosmetic physicians, nurses, clinicians or aestheticians is required so your skin can be examined and assessed for suitability. A patch test is standard before a first full treatment.

What the patch test is actually for

Not an allergy test. It is a test of how your skin responds to these settings — a small area treated and then looked at days later, because the responses that matter most, blistering and pigment change, do not appear at the time.

It costs one short appointment and it finds an unexpected reaction on a patch rather than across a face. If a patch test is not offered before a first treatment, ask why.

Who this suits, and who it does not

Fair to olive, sun-damaged Australian skin. The group IPL serves best — scattered pigment and diffuse redness on a light background, treated across a whole area efficiently.

Darker skin types. Usually served better by a longer-wavelength laser. This is not a matter of caution; it is that a broad spectrum deposits more energy in your skin on the way to the target.

Melasma. Discussed specifically before anything is done. Heat and light can worsen it, and a rebound is harder to treat than the original patch.

Rosacea. Often helps the redness and visible vessels. The flushing tendency continues, so this is maintenance rather than cure.

Men with facial hair, or who might grow it. See above. Raise it first.

Anyone with a recent or fake tan. Deferred, without exception.

Anyone on photosensitising medication. Bring the complete list, including anything over the counter.

Pregnancy. Elective light-based treatment is deferred.

Aftercare

Avoid sun exposure and use daily broad-spectrum sunscreen. Avoid hot showers, saunas, spas and strenuous exercise for a short period. Do not pick or scrub darkened spots — let them flake off on their own. Avoid retinoids and acids for a few days.

That third instruction is the one that matters most. A darkened spot lifted off before it is ready leaves a mark where a treated spot would have been , and it is the commonest way a good IPL result is spoiled

by the person who had it.

What sits outside this treatment

We do not treat over an unassessed or suspicious lesion.
We do not treat recently tanned or fake-tanned skin.
We do not use IPL where a longer-wavelength laser is the safer choice for your skin type.
We do not treat a bearded area without raising the hair consequence first.
We do not promise permanence. New pigment and new vessels continue to form.

What you receive

An assessment recording your skin type and naming the target
A patch test before a first full treatment
Baseline photographs in standard conditions
The device chosen and why, rather than by brand preference
A quote for the course and the likely maintenance, not one session
Written aftercare including the instruction not to pick
A review before the next session

Risks

Redness, swelling and a warm or stinging sensation after treatment
Blistering and burns
Changes in pigmentation — darkening or lightening, temporary or persistent
Worsening of melasma in some people
Scarring
Crusting or scabbing
Infection, including reactivation of cold sores
Unintended hair loss in a treated area
Eye injury without proper protective eyewear
Little or no response, or an uneven result
Risk of burns and pigment change is higher in darker skin types and in recently tanned skin.
Please read our information on the risks and complications of cosmetic surgery before proceeding.

Expected, versus call us

Expected: redness and warmth on the day, mild swelling around treated spots, pigment darkening over days one to three and flaking away over the following week.

Call us: a blister, a raw or weeping area, pain developing or increasing after the first day, spreading redness or swelling, pus or fever, a cold sore outbreak, unexpected hair loss, or a patch that becomes lighter or darker than its surroundings in the weeks afterwards.

Cost and booking

Cost depends on the area, the device and the number of sessions. As at September 2024 and including GST, a skin assessment with a nurse or aesthetician is $50 and is redeemable on products or services; a consultation with a Cosmetic Doctor is $150.

Because pigment and vessels recur, ask for the cost of the course and the likely maintenance each year rather than a single-session price. Cosmetic treatment is not covered by Medicare, and we are not a no-gap provider.

We have over 35 years of experience in cosmetic medicine and 20 years with laser and light-based treatments. We are at 4 Burke Road, Malvern East VIC 3145. Phone 1300 852 050, or use the online consultation form .

Related: laser skin rejuvenation , Yag laser , Laser Genesis .

Common questions about IPL

Is IPL a laser?

No. A laser emits one precise wavelength; IPL emits many at once, filtered to a band chosen for the condition. That makes it versatile but less precise.

How does it work?

By selective absorption — certain wavelengths are absorbed by pigment in a sun spot or haemoglobin in a small vessel, but much less by surrounding tissue. The absorbed light becomes heat and damages the target, which the body clears.

When is IPL the right choice?

Scattered superficial brown spots across an area, and diffuse redness with no single vessel to aim at. A broad beam covering a whole cheek or forearm is exactly what those need.

When is a laser better?

One distinct visible vessel, pigment sitting deeper than the surface, and darker skin types — all of which are usually better served by a targeted, longer-wavelength laser.

Why does skin type matter more with IPL?

Because a broad spectrum means more of the energy is absorbed by the melanin in your skin on the way to the target. That is why IPL is generally less suitable for darker skin.

Will it affect my hair?

Yes, potentially. IPL is absorbed by the pigment in hair as well as in skin, so treating an area with visible hair will reduce that hair — at least temporarily and sometimes durably.

Where does that matter most?

The beard area in men. IPL across the cheeks and jaw can leave patchy hair loss, and a patchy beard is more conspicuous than the pigment being treated. Also eyebrows, the hairline, and hairy forearms or chest.

What should I do about it?

Raise it at consultation. The plan can work around a beard; a plan made without knowing cannot.

What does the treatment feel like?

A flash of light with each pulse — visible even with your eyes closed behind eyewear — and a sensation like a warm elastic band snap. Usually 15 to 30 minutes for a face.

Why did my spots go darker?

That is the treatment working. Treated pigment darkens over days one to three, often looking like coffee grounds, then lifts and flakes away over the following week.

Can I pick the dark spots off?

No. A darkened spot lifted before it is ready leaves a mark where a treated spot would have been, and it is the commonest way a good IPL result is spoiled by the person who had it.

How long before I see the result?

About six weeks for the full improvement, though it is often visible earlier.

How many treatments will I need?

Generally one to six, depending on skin type and condition. Ask what the whole course will cost.

When should I have it before an event?

Two to three weeks, so days one to ten — when treated pigment is most visible — are well clear. Three days before is not a plan.

What time of year is best?

Autumn or winter. Recent sun means the appointment is deferred, treated skin is more sun-sensitive afterwards, and summer exposure undoes the result. If you are booking in November with a December beach holiday, wait.

Why is a patch test done?

It is not an allergy test. It is a test of how your skin responds to these settings, looked at days later — because the responses that matter most, blistering and pigment change, do not appear at the time.

What if I am not offered one?

Ask why. It costs one short appointment and it finds an unexpected reaction on a patch rather than across a face.

Can I have IPL with melasma?

It needs specific discussion first. Heat and light can worsen melasma in some people, and a rebound is harder to treat than the original patch.

Does it help rosacea?

It often helps the redness and visible vessels. The flushing tendency continues, so this is maintenance rather than a cure.

Can I have it with a tan?

No, and that includes fake tan. Treatment is deferred without exception.

What should I disclose?

Any photosensitising medication, a cold sore history if treating near the mouth, melasma, pregnancy, and any lesion in the area — which is assessed rather than treated over.

What is the aftercare?

Avoid sun and use daily broad-spectrum sunscreen; avoid hot showers, saunas, spas and strenuous exercise for a short period; do not pick or scrub darkened spots; and avoid retinoids and acids for a few days.

What are the risks?

Redness, swelling and stinging; blistering and burns; pigment changes that can persist; worsening of melasma in some people; scarring; crusting; infection including cold sore reactivation; unintended hair loss; eye injury without proper eyewear; and little or no response or an uneven result.

When should I call us?

A blister, a raw or weeping area, pain developing or increasing after the first day, spreading redness or swelling, pus or fever, a cold sore outbreak, unexpected hair loss, or a patch becoming lighter or darker than its surroundings in the weeks afterwards.

What does it cost?

It depends on the area, device and number of sessions. A skin assessment is $50 and redeemable, and a Cosmetic Doctor consultation $150, as at September 2024 including GST. Ask for the cost of the course and the likely annual maintenance. 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.