Skin Ageing Treatment Melbourne - Me Clinic

Canonical: https://www.meclinic.com.au/skin/skin-conditions/skin-ageing/

Details:

Skin is the body's largest organ, made up of three main layers - the epidermis on the surface, the dermis beneath it, and the subcutis below that. Like the rest of the body, it changes with age: it thins, heals more slowly, loses elasticity, and produces less collagen, elastin and oil.

Ageing cannot be stopped. What can be influenced is how much of it is avoidable - and in Australia, a large share of what people call ageing skin is sun damage, which is a different thing with a different remedy.

Two kinds of ageing

Intrinsic ageing

The internal, genetically programmed process. Produces gradual thinning, dryness, dullness, loss of elasticity and fine lines. It happens on skin that has never seen the sun - compare the skin on your inner upper arm with the back of your hand , and the difference between the two is mostly the second kind.

Extrinsic ageing

Damage from outside - overwhelmingly ultraviolet light, plus smoking, pollution and poor nutrition. Produces deep wrinkles, coarse texture, mottled pigmentation, broken capillaries, leathery thickening and yellowing (solar elastosis).

This is the important distinction on this page. Intrinsic ageing you can slow only modestly. Extrinsic ageing is largely preventable - and prevention does more than any treatment will later recover.

Other contributors: hormonal change, particularly the fall in oestrogen at menopause, which reduces collagen, skin thickness and barrier function; and chronic illness, which diverts the body's resources from skin maintenance.

The inner-arm test

Worth doing before you spend anything, because it tells you which of the two you are actually looking at.

Put the inner surface of your upper arm next to the back of your hand, in the same light. Both are the same age. The difference between them is sun.

If the two look broadly similar, most of what you are seeing is intrinsic ageing, and the realistic targets are texture, hydration and fine lines. If the back of the hand is markedly more mottled, coarser and more lined, then most of what bothers you is sun damage - which responds better to treatment, and which you can stop adding to today.

The signs, and what actually causes each

Sign	Main driver	What helps
Age spots and mottled pigment	Sun	Laser, IPL, peels, pigment inhibitors
Lines and wrinkles	Muscle movement plus collagen loss	Injectables for dynamic lines; resurfacing for static
Dryness	Reduced oil and lipid production	Barrier-repairing skincare
Dull, uneven tone	Slowed cell turnover	Exfoliation, retinoids, peels
Sagging, jowls, volume loss	Collagen and elastin loss, fat pad descent	Fillers, thread lift, or surgery
Easy bruising	Thinner skin and more fragile vessel walls	Largely unavoidable; sun protection helps
Visible capillaries	Sun damage to vessel support	Vascular laser, IPL

The practical value of this table is that the row you are in determines the treatment . Someone treating pigmentation when their main change is descent will be disappointed by a technically successful course, and the reverse is equally true.

Ageing skin and skin cancer

Sun-damaged skin does not just look older - it carries a higher risk of solar keratoses and skin cancers , including basal cell carcinoma, squamous cell carcinoma (which arises from keratinocytes in the epidermis) and melanoma.

Any new, changing, scaly or non-healing spot should be assessed rather than treated cosmetically. A lesion that could be a cancer is examined and, if removed, removed whole and sent to pathology - never lasered off, which destroys the evidence.

This is the part of the page that matters most. If you are booking a rejuvenation consultation and you also have a spot you have been wondering about, mention the spot first.

Treatments

Cosmeceutical skincare - retinoids, vitamin C and other antioxidants, and daily sunscreen. The unglamorous foundation, and the part with the strongest evidence.

Laser resurfacing - for texture, pigment and lines

Skin needling - collagen stimulation

Chemical peels and microdermabrasion

Dermal fillers - to replace lost volume; from $590 including GST as at September 2024

Muscle-relaxing injectables for dynamic lines - prescription-only medicines requiring a doctor's consultation, which is why they cannot be named in advertising

Thread lift - from $4,600

Surgery - facelift , blepharoplasty , brow lift - where laxity is the dominant problem

A sensible order

Sequence matters more than choice of product, and the common error is starting at the expensive end for a problem that sits at the cheap one.

Sun protection, daily. Everything else on this page works against continuing damage if this step is skipped.

A basic routine - gentle cleanser, moisturiser, sunscreen, and a retinoid if your skin tolerates it. Give it three to six months before concluding it does nothing.

Treat pigment and texture , which are the most treatable and the most responsive.

Dynamic lines and volume , as indicated.

Surgery , where descent is the actual problem and nothing non-surgical addresses it.

Anyone who reaches step five without doing step one will be back sooner than they expect.

Prevention, which is where the leverage is

Sun protection. Daily broad-spectrum SPF 30 or higher, hat, sunglasses, shade, no solariums. Nothing else on this list comes close.

Don't smoke. Smoking degrades elastic fibres and accelerates every aspect of skin ageing.

Diet. Fresh fruit and vegetables with antioxidants and vitamin C; less sugar and refined carbohydrate.

Hydration and adequate sleep.

Moderate alcohol.

A consistent skincare routine - gentle cleanser, moisturiser, sunscreen, and a retinoid if your skin tolerates it.

Vitamin D matters, but it is obtained safely with incidental exposure rather than deliberate sun-seeking - and in Australia most people get enough without trying.

What sits outside any of this

Stopping ageing. Nothing here does that, and anything marketed as doing it is misrepresenting itself.

Your bone structure , which changes with age too and is not addressed by skin treatment.

Genetics. Intrinsic ageing can be slowed modestly, not prevented.

Damage already done. Treatment improves the appearance of sun damage; it does not undo the cellular change underneath, which is why surveillance still matters.

Weight and general health , which affect facial volume more than most people expect.

What results are realistic

Skin quality - texture, tone, fine lines, pigmentation - responds well to a consistent routine plus appropriate in-clinic treatment, gradually and over months.

Laxity and descent respond least. Non-surgical options soften the appearance rather than reversing it, and where tissue has genuinely moved down, surgery is the only thing that moves it back. An honest assessment will say which of the two you are dealing with.

Everything here is maintained rather than permanent. Results vary with your skin, your history of sun exposure, your age and how consistently you follow the plan.

Cost over time

As at September 2024 and including GST, a skin assessment is $50 and a consultation with a Cosmetic Doctor is $150. Dermal skin treatments start from $130, dermal fillers from $590 and thread lift from $4,600.

Ask for the annual figure. Anti-ageing work is ongoing by definition - the skincare, the maintenance sessions, the filler top-ups as product absorbs. A course price tells you what the first few months cost, not what you are committing to. Not covered by Medicare. We are not a no-gap provider.

What you should leave the consultation with

Which of the signs in the table above are actually driving what you see, and in what proportion

How much is sun damage rather than intrinsic ageing

Whether anything on your skin needs assessing rather than treating

A written routine, and how long to give it

Which in-clinic treatment addresses which sign, and in what order

The total cost and the annual maintenance figure

Written risk information

Baseline photographs and a review date

Risks

Redness, swelling, peeling and crusting after resurfacing treatments

Changes in pigmentation, more likely in darker skin types, which can persist

Blistering and burns from light-based treatment

Infection, including reactivation of cold sores after facial resurfacing

Scarring, uncommon

Irritation from actives introduced too quickly

Lumps, asymmetry or vascular complications after filler

Incomplete response

See risks and complications of cosmetic surgery .

Expected, and not expected

Expected: redness and peeling after resurfacing, some dryness when a retinoid is introduced, and gradual change over months rather than a visible difference next week.

Call us for spreading redness or heat, pus, a fever, blistering you were not warned about, a cold sore outbreak in a treated area, or pigmentation that is darkening rather than settling.

Booking

Me Clinic, 4 Burke Road, Malvern East VIC 3145. Phone 1300 852 050 or (03) 9569 3511, or use the online consultation form .

Common questions about ageing skin

What changes as skin ages?

It thins, heals more slowly, loses elasticity, and produces less collagen, elastin and oil.

What are the two kinds of ageing?

Intrinsic, the internal genetically programmed process; and extrinsic, damage from outside - overwhelmingly ultraviolet light, plus smoking, pollution and poor nutrition.

Which one can I do something about?

Intrinsic ageing can be slowed only modestly. Extrinsic ageing is largely preventable - and prevention does more than any treatment will later recover.

How do I tell how much of mine is sun?

Put the inner surface of your upper arm next to the back of your hand, in the same light. Both are the same age, so the difference between them is sun.

What does it mean if they look similar?

Most of what you are seeing is intrinsic ageing, and the realistic targets are texture, hydration and fine lines.

And if the hand looks much worse?

Most of what bothers you is sun damage - which responds better to treatment, and which you can stop adding to today.

What causes age spots?

Sun. They respond to laser, IPL, peels and pigment inhibitors.

What causes sagging and jowls?

Collagen and elastin loss with fat pad descent. Fillers, thread lift or surgery address it.

Does hormonal change affect skin?

Yes - particularly the fall in oestrogen at menopause, which reduces collagen, skin thickness and barrier function.

Why does the table of signs matter?

Because the row you are in determines the treatment. Treating pigmentation when your main change is descent gives a technically successful course and a disappointed patient.

Does sun-damaged skin carry other risks?

Yes - a higher risk of solar keratoses and skin cancers, including basal cell carcinoma, squamous cell carcinoma and melanoma.

What should I do about a spot I have been wondering about?

Mention it first, before the rejuvenation discussion. Any new, changing, scaly or non-healing spot should be assessed rather than treated cosmetically.

Why can such a spot not be lasered off?

Because that destroys the evidence. A lesion that could be a cancer is removed whole and sent to pathology.

Which treatment has the strongest evidence?

Cosmeceutical skincare - retinoids, vitamin C and other antioxidants, and daily sunscreen. The unglamorous foundation.

What order should I do things in?

Sun protection daily, then a basic routine given three to six months, then pigment and texture, then dynamic lines and volume, then surgery where descent is the real problem.

What is the most common mistake?

Starting at the expensive end for a problem that sits at the cheap one. Anyone who reaches surgery without doing sun protection will be back sooner than they expect.

What prevents skin ageing best?

Sun protection - daily broad-spectrum SPF 30 or higher, hat, sunglasses, shade, no solariums. Nothing else comes close.

Does smoking matter?

Yes. It degrades elastic fibres and accelerates every aspect of skin ageing.

What about vitamin D?

It matters, but it is obtained safely with incidental exposure rather than deliberate sun-seeking - and in Australia most people get enough without trying.

What will treatment not do?

Stop ageing, change your bone structure, override genetics, or undo the cellular damage already done - which is why surveillance still matters even when the skin looks better.

Which signs respond least?

Laxity and descent. Non-surgical options soften the appearance rather than reversing it, and where tissue has genuinely moved down, surgery is the only thing that moves it back.

Are results permanent?

No - everything here is maintained rather than permanent.

What does it cost?

A skin assessment is $50 and a Cosmetic Doctor consultation $150, both including GST as at September 2024. Dermal skin treatments start from $130, dermal fillers from $590 and thread lift from $4,600.

Which cost figure should I ask for?

The annual one. Anti-ageing work is ongoing by definition - skincare, maintenance sessions, and filler top-ups as product absorbs.

What are the risks?

Redness, swelling, peeling and crusting after resurfacing; pigment change more likely in darker skin; blistering and burns from light-based treatment; infection including cold sore reactivation; uncommon scarring; irritation from actives introduced too quickly; lumps, asymmetry or vascular complications after filler; and incomplete response.

When should I call us?

For spreading redness or heat, pus, a fever, unexpected blistering, a cold sore outbreak in a treated area, or pigmentation darkening rather than settling.

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.