Microdermabrasion Melbourne - Me Clinic

Canonical: https://www.meclinic.com.au/skin/skin-rejuvenation-and-treatments/microdermabrasion/

Details:

Microdermabrasion is mechanical exfoliation. A handpiece combines a fine abrasive surface with gentle suction to lift away loose dead cells from the surface of the skin and draw debris out of blocked pores.

Removing that build-up leaves the skin smoother and brighter immediately, helps clear congestion, and allows skincare applied afterwards to penetrate better than it would through a layer of dead cells.

It is a surface treatment. It works on the outermost layer only, which is both its limitation and the reason it has so little downtime.

What it is used for

Dullness and uneven texture

Congestion, blackheads and enlarged pores

Mild acne and post-acne marks

Superficial pigmentation and early sun damage

Fine lines

Preparing the skin before a course of other treatments, and maintaining results between them

Pores do not open and close

This is the most widely believed idea in skincare and it is not true, and almost everything people do to their pores follows from it.

A pore is an opening, not a muscle. It has no mechanism for tightening or relaxing. Steam does not open it; cold water does not close it; nothing you apply makes it smaller by contracting it. What changes — and what you are actually seeing when a pore looks larger or smaller — is two things:

How full it is. A pore packed with oil and dead cells is stretched by its contents and casts a visible dark opening. Empty the same pore and it looks markedly smaller, because it is no longer being held open from the inside.

How much shadow it casts. An opening is only visible because light falls into it. Skin that is dull and rough scatters light unevenly and every opening reads darker; smoother skin reflects more evenly and the same pores become harder to see.

Microdermabrasion works on both of those. It does not, and cannot, change the size of the pore itself — that is set by your skin, your oil production and your genetics. So the honest claim is that it empties pores and improves how light falls on the skin, and that this is temporary , because the pore refills. Anyone promising permanently smaller pores is describing something that does not exist. See open pores .

Blackheads are not dirt

A second idea worth correcting, because it drives a lot of unhelpful scrubbing.

A blackhead is a pore filled with oil and dead skin cells. It is black because the material at the surface has oxidised on contact with air — the same reason a cut apple browns — not because it is dirty. You cannot wash it away, and washing harder makes the skin drier and more irritated while the plug stays exactly where it is.

There is also a distinction worth knowing before you spend money on this. Those small grey dots across the nose and inner cheeks are usually sebaceous filaments, not blackheads. They are the normal lining of an oil-producing pore doing its job, they are present on almost every adult face, and they refill within days of being emptied because they are supposed to be there. They can be reduced in appearance. They cannot be eliminated, and treating them as a defect is a reliable way to over-treat your own skin.

The practical implication: microdermabrasion genuinely helps with true congestion, and it will not permanently clear a nose of sebaceous filaments — nothing will.

What not to do at home

Pore strips remove the surface plug and the top layer of skin with it. The pore refills within days, and repeated use irritates the skin around it.

Squeezing with fingernails pushes contents deeper as often as it brings them out, and it is one of the reliable routes from a blocked pore to an inflamed one, and from an inflamed one to a mark.

Harsh scrubs with irregular particles abrade unevenly and irritate, and irritation makes pigment, particularly in darker skin.

Over-cleansing and stripping the skin prompts more oil production, not less.

Microdermabrasion or epidermal levelling?

We offer both, they both exfoliate the surface, and most people have no idea which they want. The difference is what each one is good at.

Choose microdermabrasion if congestion is the problem. The suction is the point — it draws debris out of blocked pores, which a blade cannot do. Blackheads, congestion and oily, clogged skin are its territory.

Choose epidermal levelling if surface smoothness and fine hair are the problem. It removes vellus hair as well as dead cells, so make-up sits better — and with no suction, there is no bruising risk on thin skin.

Comfort differs. Microdermabrasion feels like mild scratching with a vacuum sensation; many people find levelling gentler.

Neither stimulates collagen. If you want scarring, deep pigmentation or laxity addressed, neither is the treatment — and a long course of either for those concerns is under-treating you.

They are also used together in a plan, alternated across a maintenance cycle. Ask which your skin actually needs rather than booking by name.

Where it sits against the alternatives

Treatment	Depth	Downtime	Best for
Microdermabrasion	Surface only	Essentially none	Dullness, congestion, maintenance

Superficial peel	Outer layer, chemically	A few days of light flaking	Tone, texture, superficial pigment
Skin needling	Into the dermis	1–2 days redness	Texture, scarring, collagen
Laser resurfacing	Superficial to deep	Days to weeks	Deeper pigment, lines, scarring

If your concern is deep — established scarring, marked pigmentation, significant lines — microdermabrasion is not the treatment for it , and a clinic recommending a long course of it for those concerns is under-treating you.

Is it right for you?

Good fit: dull, congested skin; maintenance between bigger treatments; wanting a visible improvement with no downtime before an event.

Poor fit: scarring, deep pigmentation, laxity, or fine lines you want genuinely removed rather than softened.

Not now: anything on the exclusion list below, particularly active inflammatory acne — abrasion can spread and worsen it.

Thin or fragile skin , or skin that bruises easily around the eyes, may do better with levelling, which uses no suction.

Who it suits particularly

Oily, congested skin. The treatment this was built for. The suction reaches what surface exfoliation cannot, and this group sees the clearest benefit from a course.

Anyone about to start a longer plan. Clearing surface build-up first makes peels, laser and topicals work on the skin rather than on a layer of dead cells.

Teenagers and young adults with mild congestion but no inflammation. Often a sensible, low-commitment starting point alongside a simple routine — but not while acne is inflamed.

Darker skin types. No heat and no light, so none of the melanin-related risk that governs laser choices. The risk here is irritation, which itself makes pigment, so a gentler setting over more sessions is the approach.

Thin or easily bruised skin, and anyone with prominent under-eye vessels. The suction is the issue, not the abrasion. Levelling is often the better choice, or the technique is adjusted around the delicate areas.

Rosacea, between flares. Sometimes tolerated when the skin is quiet, and definitely not during a flare — both the abrasion and the suction aggravate it.

Pregnancy. Nothing is absorbed, injected or heated, so this is among the treatments usually available — confirm with your practitioner.

What to expect

A facial treatment takes about 30 minutes . The sensation is a mild scratching or vacuum feeling; no anaesthetic is needed and most people find it comfortable.

Afterwards the skin looks pink and feels tight for a few hours, sometimes slightly sandpapery for a day. You can wear make-up the same day if you want to, though skin generally looks better without it.

For 48 hours: no sun exposure, no saunas or hot showers, no exfoliating actives, and use sunscreen daily.

Because the effect is cumulative, microdermabrasion is usually done as a course — commonly every two to four weeks — with maintenance sessions afterwards.

Crystal or diamond tip

Two common forms. Crystal systems spray fine particles across the skin and vacuum them away with the loosened cells; diamond-tip systems use an abrasive head with no loose particles, which suits work close to the eyes and nostrils and avoids the risk of stray crystals. Both do the same job, and the choice is about the area being treated rather than one being inherently superior. It is a reasonable thing to ask about.

If you are timing it around an event

Two to five days before is the sensible window — pinkness has gone, the skin is at its smoothest, and any short-lived breakout as congestion clears has had time to settle. The day before usually works but leaves no margin. If it would be your first treatment, have it several weeks out rather than close to the date.

How a course runs

Skin assessment — skin type, congestion, and whether anything on the exclusion list applies.

A written plan and quote for the course rather than a single session.

Sessions every two to four weeks , with the effect building across them.

A home routine alongside, since skincare penetrates better afterwards and that is part of the benefit.

Maintenance , because the skin re-accumulates surface cells continuously.

Tell your practitioner about any oral acne medication, recent sunburn, cold sores, or a rosacea flare — all change whether this is appropriate today.

What sits outside this treatment

We do not treat over a mole, skin tag or unexplained lesion. It is worked around, and anything needing assessment is assessed.

We do not treat active inflammatory acne with abrasion. It is treated first.

We do not claim it changes pore size, tightens skin or removes scars.

We do not sell long courses for concerns this cannot reach. If what you want needs the dermis, you will be told so.

We do not sell packages paid upfront. Sessions follow a review of the last.

What you should leave with

A written plan and quote for the course, and what maintenance costs after it

The 48-hour aftercare instructions in writing

Advice on which products to pause and when to resume them

A realistic statement of what this will and will not change

A home routine, since better product penetration afterwards is part of the point

Who it does not suit

Active inflammatory or cystic acne in the treatment area — abrasion can spread and worsen it

Active eczema, psoriasis or dermatitis in the area

Active cold sores or skin infection

Open wounds or recent sunburn

Fragile or very thin skin

Recent use of oral acne medication

Rosacea in flare — the abrasion and suction can aggravate it

What results are realistic

Immediately: smoother, brighter, cleaner-feeling skin. Over a course: improved texture, less congestion, some lightening of superficial pigmentation.

Microdermabrasion does not remove scars, deep lines or deep pigmentation, does not tighten skin, and does not permanently reduce pore size. Because the skin continually renews and re-accumulates surface cells, the effect fades and maintenance is needed. Individual results vary.

Aftercare: what is expected and what is not

Pink, tight skin for a few hours and a slightly sandpapery feel for a day are normal. A temporary breakout as congestion clears is common and settles.

Small bruises or pinpoint marks from the suction, particularly around the eyes, can happen on thin skin — mention it, because the technique or the treatment choice can be adjusted next time.

Contact us for grazing that does not settle, increasing redness or pain, any sign of infection, or a cold sore appearing after treatment.

Risks

Redness and mild swelling for a few hours

Dryness, tightness and flaking

Temporary increased sensitivity

Bruising or petechiae from suction, particularly around the eyes and on thin skin

A temporary breakout as congestion clears

Post-inflammatory pigmentation, more likely in darker skin types

Aggravation of rosacea or active acne

Grazing or abrasion injury if performed too aggressively

Increased sun sensitivity afterwards

See risks of cosmetic treatments .

Cost

As at September 2024 and including GST, a skin assessment is $50. Dermal skin treatments start from $130. Ask for the cost of a course rather than a single session. Not covered by Medicare.

Since this is a maintenance treatment, the number worth knowing is the annual one — a session every two to four weeks indefinitely is a different commitment from a one-off. We are not a no-gap provider.

Who performs it

Michelle Casey , Paramedical Aesthetician, with over 18 years' experience and more than 25,000 skin treatments performed.

Booking

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

Related: epidermal levelling , open pores , all skin treatments .

Common questions about microdermabrasion

What is microdermabrasion?

Mechanical exfoliation. A handpiece combines a fine abrasive surface with gentle suction to lift away loose dead cells and draw debris out of blocked pores.

What does the suction do?

It is the part that reaches into blocked pores. A blade or a scrub only works on the surface; the suction is what makes this the treatment for congestion.

How deep does it go?

The outermost layer only. That is both its limitation and the reason it has almost no downtime.

Will it make my pores smaller?

Not permanently, and nothing does. A pore is an opening, not a muscle — it has no way of tightening. What changes is how full it is and how much shadow it casts.

Does steam open pores and cold water close them?

No. Neither has any mechanism to do that. Warmth softens the contents of a pore, which makes them easier to remove, and cold reduces redness — but the opening itself does not change size.

Why do my pores look smaller after a treatment?

Because an emptied pore is no longer being held open by its contents, and because smoother skin reflects light more evenly so every opening reads less dark.

Are blackheads dirt?

No. A blackhead is a pore filled with oil and dead skin cells, and it is black because the material at the surface has oxidised on contact with air — the same reason a cut apple browns. Washing harder does not remove it.

What are the little grey dots on my nose?

Usually sebaceous filaments rather than blackheads — the normal lining of an oil-producing pore. They are present on almost every adult face and refill within days of being emptied, because they are supposed to be there.

Can those be removed permanently?

No. Their appearance can be reduced; they cannot be eliminated, and treating them as a defect is a reliable way to over-treat your own skin.

Are pore strips a good idea?

Not really. They remove the surface plug and the top layer of skin with it, the pore refills within days, and repeated use irritates the surrounding skin.

Can I squeeze blackheads myself?

Squeezing with fingernails pushes contents deeper as often as it brings them out, and it is one of the reliable routes from a blocked pore to an inflamed one, and from an inflamed one to a mark.

Should I use a scrub as well?

No. Harsh scrubs with irregular particles abrade unevenly and irritate, and irritation makes pigment, particularly in darker skin. Over-cleansing also prompts more oil, not less.

How is it different from epidermal levelling?

Microdermabrasion uses suction and reaches into blocked pores; levelling uses a blade and removes vellus hair as well as dead cells, so make-up sits better. Congestion is microdermabrasion’s territory; surface smoothness and fine hair are levelling’s.

Which is more comfortable?

Many people find levelling gentler. Microdermabrasion feels like mild scratching with a vacuum sensation.

Does either build collagen?

Neither. For scarring, deep pigmentation or laxity, you want needling or laser, and a long course of either surface treatment for those concerns is under-treating you.

What is the difference between crystal and diamond tip?

Crystal systems spray fine particles and vacuum them away with the loosened cells; diamond tip uses an abrasive head with no loose particles, which suits work close to the eyes and nostrils. Both do the same job — the choice is about the area.

How long does a treatment take?

About 30 minutes for a face, with no anaesthetic needed.

What happens afterwards?

Skin looks pink and feels tight for a few hours, and can feel slightly sandpapery for a day. Make-up can go on the same day.

What are the 48-hour rules?

No sun exposure, no saunas or hot showers, no exfoliating actives, and sunscreen daily.

How often is it done?

Commonly every two to four weeks as a course, with maintenance afterwards, because the effect is cumulative and the skin re-accumulates surface cells continuously.

When should I have it before an event?

Two to five days before. That allows any pinkness and any short-lived breakout to settle. If it would be your first treatment, have it several weeks out.

Why did I break out afterwards?

A temporary breakout as congestion clears is common and settles.

Why do I have tiny bruises around my eyes?

The suction, on thin skin. Mention it — the technique or the treatment choice can be adjusted next time, and levelling uses no suction at all.

Can I have it with acne?

Not while it is actively inflamed or cystic in the treatment area — abrasion can spread and worsen it. Mild congestion without inflammation is different.

Who else should not have it?

Anyone with active eczema, psoriasis or dermatitis in the area, active cold sores or skin infection, open wounds or recent sunburn, fragile or very thin skin, recent oral acne medication, or rosacea in flare.

Is it suitable for darker skin?

Generally yes — there is no heat and no light, so none of the melanin-related risk that governs laser. The risk is irritation, which itself makes pigment, so gentler settings over more sessions is the

approach.

Can I have it while pregnant?

Nothing is absorbed, injected or heated, so it is among the treatments usually available. Confirm with your practitioner.

What will it not do?

Remove scars, deep lines or deep pigmentation; tighten skin; or permanently reduce pore size.

What are the risks?

Redness and mild swelling for a few hours; dryness, tightness and flaking; temporary sensitivity; bruising or pinpoint marks from suction, particularly around the eyes; a temporary breakout; post-inflammatory pigmentation, more likely in darker skin; aggravation of rosacea or active acne; grazing if performed too aggressively; and increased sun sensitivity afterwards.

What does it cost?

A skin assessment is $50 and dermal skin treatments start from $130, as at September 2024 including GST. Ask for the cost of the course, and for the annual figure — a session every two to four weeks indefinitely is a different commitment from a one-off. Not covered by Medicare.

Who performs it?

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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.