



# News for Dermatologists

## HOW CAN LUMIXYL COMPLEMENT MY THRIVING HYDROQUINONE-DISPENSING PRACTICE?

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**L**et's face it. Hydroquinone has been the gold standard for treating hyperpigmentation for decades. In fact, hydroquinone continues to be the number one prescribed skin lightening agent globally. In years past, patients were given a prescription for hydroquinone (HQ) that they would fill at their neighborhood drugstore. Today, there is a growing number of dermatologists and other aesthetically oriented physicians who now dispense hydroquinone-based products directly to

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their patients. Once an afterthought, this practice model has become a core part of the patient offerings for physicians across the country. So why consider dispensing non-hydroquinone products to your patients?

### SKIN BRIGHTENING PRODUCTS

There are several compelling instances where prescribing a non-hydroquinone skin brightener to your patients may be appropriate or even necessary. The Lumixyl Topical Brightening System incorporates new peptide technologies developed by Stanford University dermatology researchers for just such occasions. The following instances are just a few of the more common examples of when prescribing a non-hydroquinone regimen such as the Lumixyl Topical Brightening System is recommended:

#### Avoiding Chronic HQ Use

In most cases, it is recommended that patients stop using hydroquinone after using it continuously for 4 - 6 months. It simply is not meant to be an ongoing daily skin care agent. However, it is well known that discontinuing the use of a tyrosinase inhibitor, like hydroquinone, or other skin-lightening agents may cause hyperpigmented spots to resurface. This is why it is recommended that patients begin using a non-hydroquinone maintenance regimen in order to preserve their even complexion. This is a perfect opportunity to

prescribe the Lumixyl Topical Brightening System. Clinical studies show that the Lumixyl System is capable of diminishing the appearance of melasma, solar lentigos, and post-inflammatory hyperpigmentation, making it a safe and efficacious non-hydroquinone maintenance regimen.

### Sensitive Skin Conditions

Some patients, with overly sensitive skin, just cannot tolerate using hydroquinone or hydroquinone-based skin lightening systems and therefore discontinue its use within days or a few short weeks of initiating its use. This is a perfect opportunity to prescribe the Lumixyl Topical Brightening System to address patient tolerability concerns. In fact, Repeated Insult Patch Tests (RIPT) and in-use clinical trials reveal that the Lumixyl Topical Brightening System is much better tolerated than comparable hydroquinone-based skin lightening systems.

This is also an ideal scenario to prescribe the Lumixyl Topical Brightening System as all four of the products in the Lumixyl System, even the 20% glycolic acid lotion – GlycoPeel 20, are safe for use with all skin types including darker skin tones. In fact, there is a growing number of dermatologists that prefer using glycolic acid as an exfoliating agent due to its compatibility with skin of color.

### Patients with Allergic Resistance

Interestingly enough, there are also those patients, albeit a small number, who for some unknown reason develop what one could characterize as a resistance toward hydroquinone. These cases typically involve those patients who have continuously used hydroquinone for many months or years. Although these patients see great results with hydroquinone early on, they tend to experience rebound in their hyperpigmentation as the years go by, even while continuing to use their hydroquinone products. This is also a perfect opportunity to prescribe the Lumixyl Topical Brightening System. In fact, a clinical study published in the *Journal of Drugs in Dermatology* in 2009 demonstrated that study volunteers, with moderate facial melasma who had previously failed a 6-month treatment with a leading prescription hydroquinone product, experienced improvement following twice-daily treatments for 16 weeks with Lumixyl.



*Patient before (left) and 8 weeks after (right) Lumixyl treatment.*

### Treating Skin of Color

Some patients with skin of color may actually develop post-inflammatory hyperpigmentation from the irritation caused by the topical use of hydroquinone products. For these skin types, irritation means more hyperpigmentation, increasing the very issue they are trying to treat.

### Addressing Patient Concerns

Finally, there are those patients who may choose not to use hydroquinone-based products due to a growing body of evidence demonstrating potential adverse side effects of chronic overuse of hydroquinone. Again, this is a perfect opportunity to prescribe the Lumixyl Topical Brightening System to these patients. In vitro studies, published in the *Journal of Investigative Dermatology* in 2009, demonstrate that the Lumixyl peptide (proprietary tyrosinase-inhibiting peptide) is non-toxic to melanocyte cells as opposed to hydroquinone, which proved to be highly cytotoxic. Moreover, an RIPT test and a pilot clinical study, published in the *Journal of Drugs in Dermatology* in 2009, suggest that the Lumixyl peptide does not elicit visible



*Patient before (left) and 8 weeks after (right) Lumixyl treatment.*

irritation or allergic reaction at up to 10 times the recommended dose.

Following this line of reasoning, it is easy to see why a non-hydroquinone line of skin brightening products, such as the Lumixyl Topical Brightening System, will actually complement and improve patient retention, satisfaction and results, allowing physicians to provide an alternative solution to a broader patient demographic who for one reason or other cannot or does not want to use hydroquinone products. **711**

### ABOUT THE LUMIXYL TOPICAL BRIGHTENING SYSTEM

The Lumixyl Topical Brightening System is composed of four products formulated to synergistically diminish and prevent the appearance of facial hyperpigmentation in the form of melasma, solar lentigos or postinflammatory hyperpigmentation. The first step in the system involves using:

#### LUMIXYL ACTIVE-PREP CLEANSER

This is a low pH, antioxidant-rich cleanser that gently clears away dirt and oils while its botanical antioxidants help to regulate melanin production. The second step involves twice-daily use of the following product.

#### LUMIXYL TOPICAL BRIGHTENING CREME

This Lumixyl creme contains the proprietary peptide (decapeptide-12, trade name: Lumixyl), developed at Stanford University. This creme inhibits the tyrosinase enzyme that is responsible for over-production of melanin that can lead to hyperpigmentation.

#### LUMIXYL GLYCOPEEL 20 RAPID EXFOLIATING LOTION

The Lumixyl GlycoPeel is used in progression to help exfoliate the epidermis while accelerating cellular turnover to speed up clearance of hyperpigmented layers of skin. All patients should start by using GlycoPeel just once every other day in the morning after applying the Brightening Creme, and moving to daily use in the morning after 10 days or as directed. Darker skin types may benefit by increasing to up to twice daily (morning and night) depending on skin care goals and comfort levels.

#### LUMIXYL MOISTURELOCK SUNSCREEN SPF30

The final step in the daily morning skin health regimen for the prevention of further hyperpigmentation, using a 100% broad-spectrum physical sunscreen.



For additional information on bringing the Lumixyl Topical Brightening System into your practice with a limited introductory offer, please visit [www.envymedical.com](http://www.envymedical.com) or call 1-888-848-3633.

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CLINICALLY PROVEN:

# LUMIXYL TOPICAL BRIGHTENING SYSTEM



## FEATURES:

- ✓ Decapeptide-12, the first real alternative to hydroquinone, developed by Stanford researchers
- ✓ Clinical-strength glycolic acid to stimulate cell turnover
- ✓ Potent antioxidants to optimize skin brightening
- ✓ Lumiblock dual sun protection, 100% physical block without a sunscreen smell or residue

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