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EST. 1981



AMI Technologies

Guidance for HCP and medical staff

About AMI Technolgies

Our vision NEW FUTURE

- היום, כשאומרים טכנולוגיות רפואיות – אומרים אמי טכנולוגיות. כבר למעלה משלושה עשורים (ליתר דיוק החל מ-1986), מובילה החברה את התחום בישראל כנציגה בלעדית של יצרניות הטכנולוגיות הרפואיות המובילות בעולם (אירופה וארה"ב).
אמי טכנולוגיות חרטה על דגלה להטביע חותם על עולם הרפואה בישראל, באמצעות מומחיותה בבחירת והטמעת טכנולוגיות חדשניות ומתקדמות לבתי החולים, מרפאות וחדרי טיפולים. הטכנולוגיות החדשות המקודמות בארץ על ידי אמי טכנולוגיות מאפשרות לצוותים הרפואיים להעניק טיפול מתקדם יותר להבטחת שיפור איכות החיים של המטופלים.
- המוניטין ממנו נהנית החברה כיום נבנה בשנים של צבירת ידע וניסיון, שותפות לדרך עם יצרנים בינלאומיים מומחים, מקצועיות חסרת פשרות של אנשי המקצוע וחתימה למצוינות בכל שלבי העבודה.
כל אלה מגיעים עם מעטפת שירות אישית וצמודה, הקפדה יוצאת דופן על עמידה בלוחות זמנים ויכולת ייחודית להעניק ערך מוסף משמעותי מקצועי ושירותי ללקוחותיה.
חדשנות, מקצועיות, שירות, עבודת צוות ויושרה, מהווים את הערכים המייצגים את פעילות החברה ובאים לביטוי בממשק מול כל אחד מעובדיה, החל ממערך קשרי הלקוחות ועד לליווי הצמוד בתפעול והטמעת הטכנולוגיות מול כל לקוח ולקוח.



Galderma at a glance

With a unique heritage in dermatology as well as decades of cutting-edge innovation, Galderma is the leading company solely dedicated to advancing dermatology for every skin story.

We are strategically positioned in attractive, consumer-driven segments of the dermatology market, characterized by high growth fundamentals. Through trusted partnerships with healthcare professionals, we ensure to meet individual consumer and patient needs with superior outcomes.

KEY FACTS ABOUT GALDERMA

3.760 B USD

2022 net sales

620+

clinical trials funded across 30+ countries since 2020

4

manufacturing sites

131

major health authority approvals since 2020

Global presence

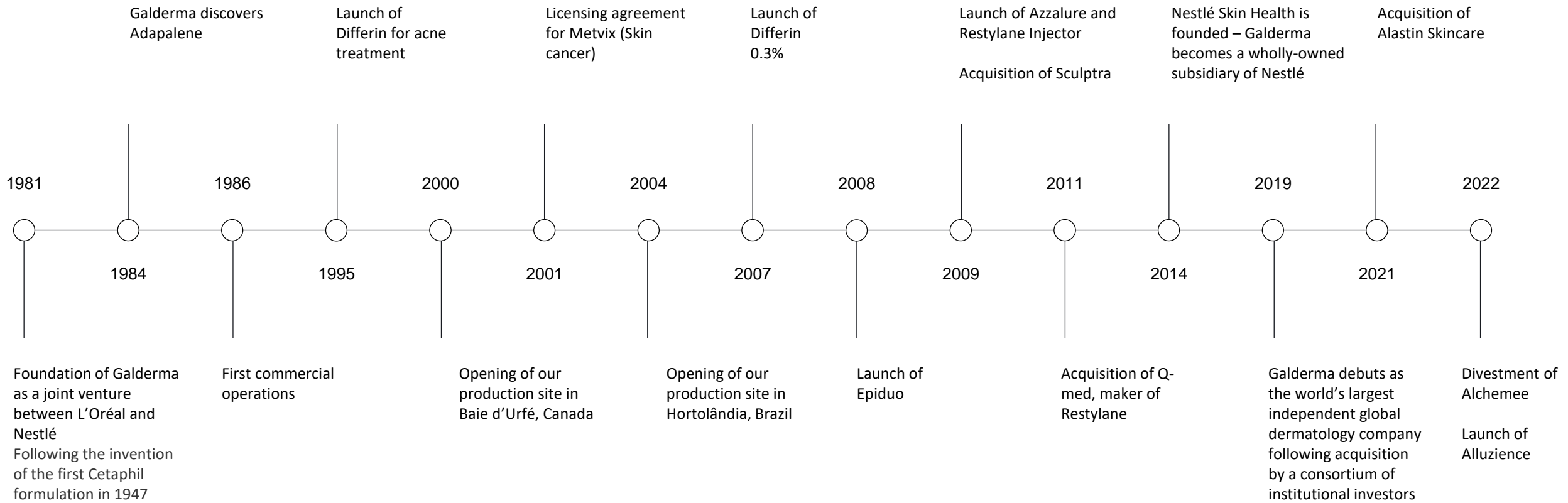
we operate from 50 sites in 40 countries, with our headquarters in Switzerland

100,000+

aesthetics healthcare professionals trained via our Global Aesthetic Injector Network (GAIN) program in 2022

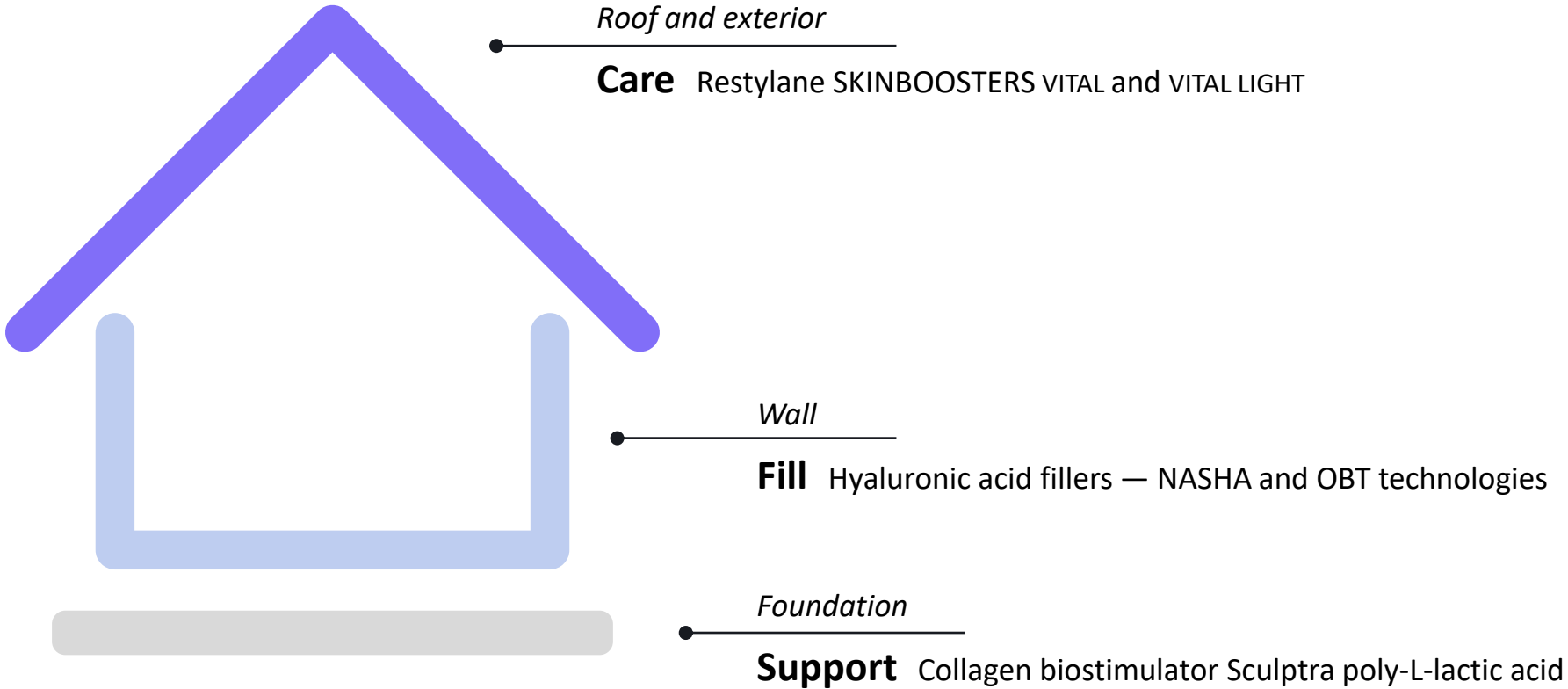
A Timeline of our history

GAIN

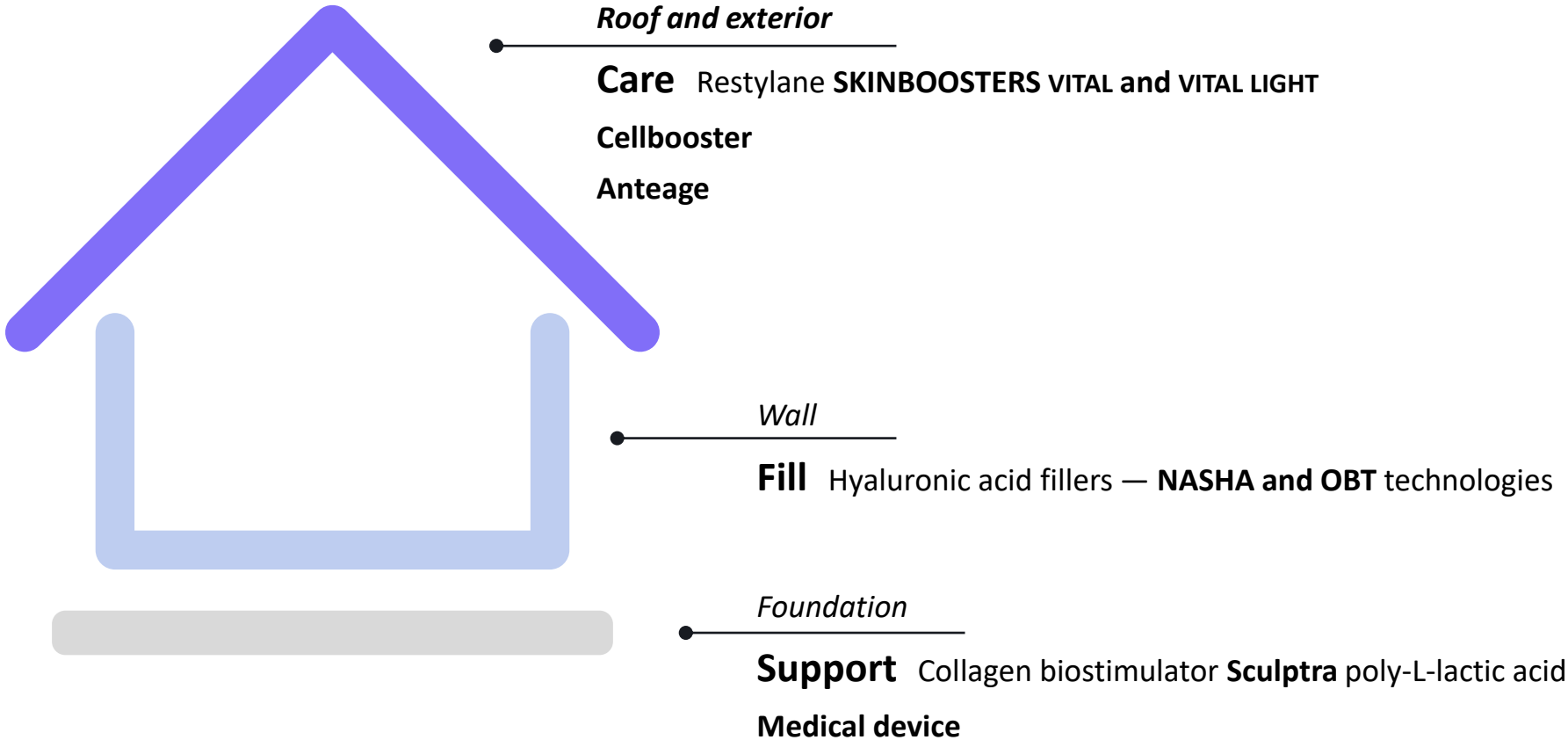


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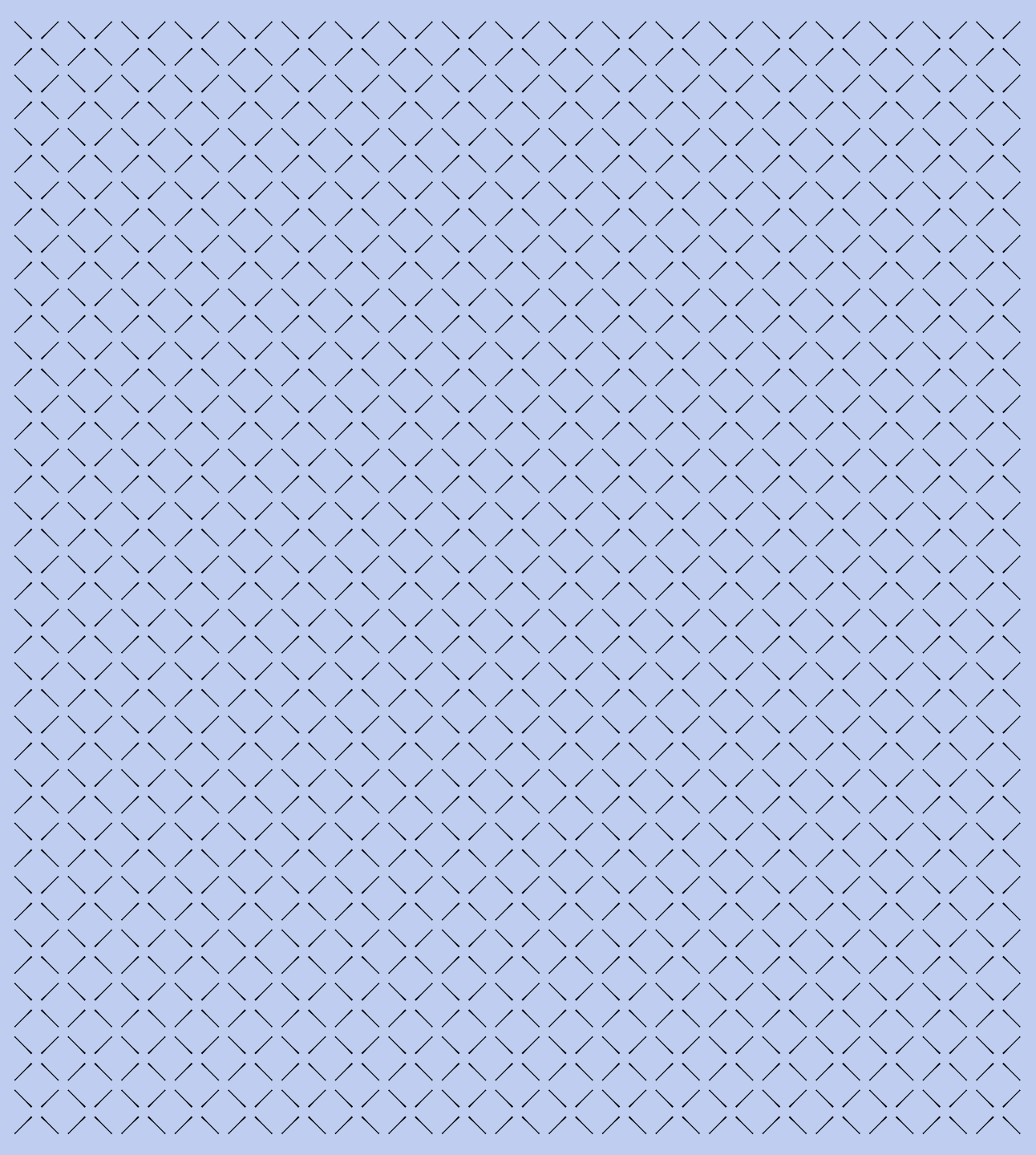
The Galderma's full-face approach portfolio



AMI Technologies full-face approach portfolio



Pathophysiology of Aging





BONE STRUCTURE

VOLUME LOSS
(fat pads)

**TISSUE
DISPLACEMENT**
(ligaments)

MUSCLE ACTIVITY

SKIN QUALITY

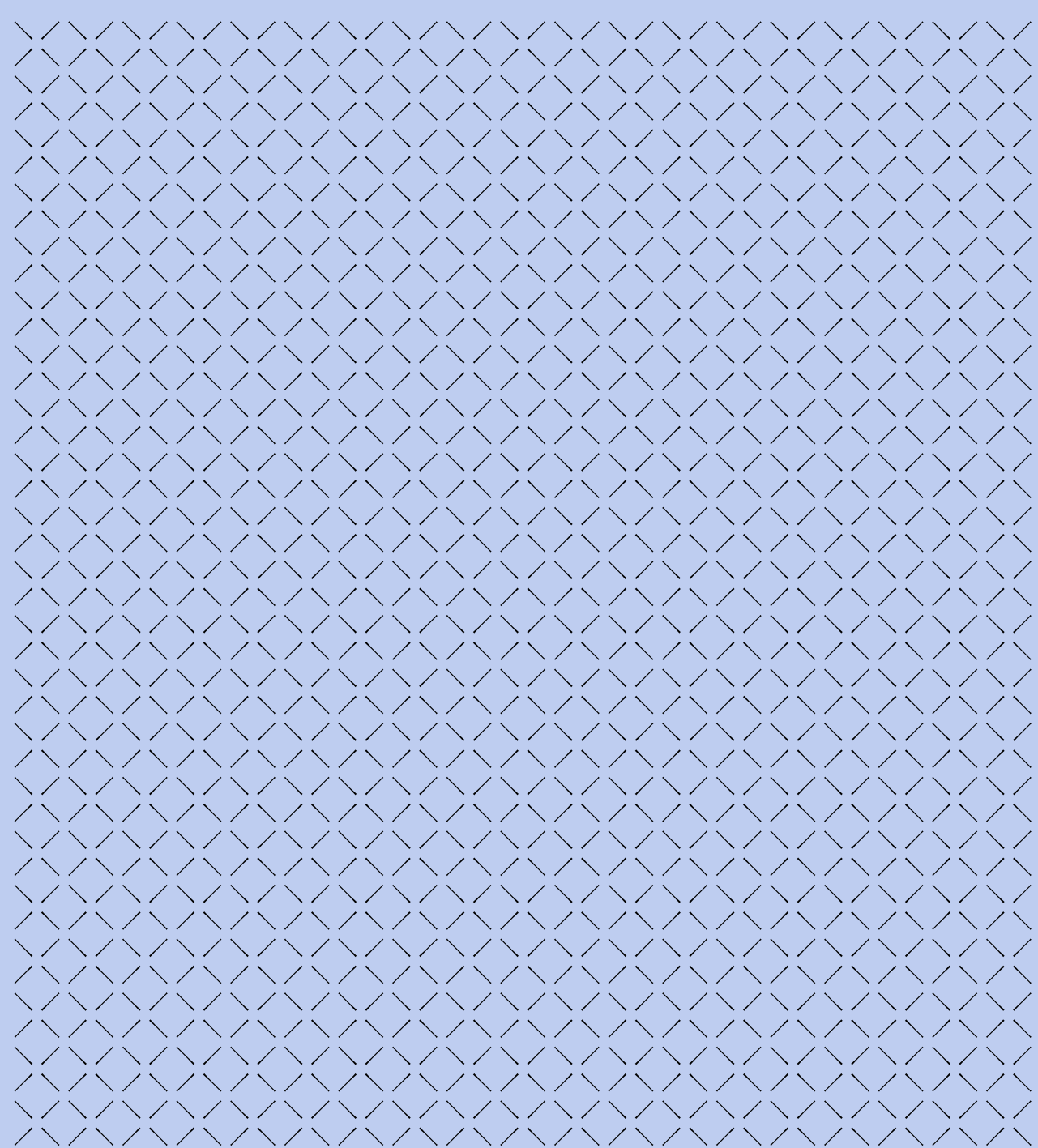


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Facial Aging Involves Structural Changes

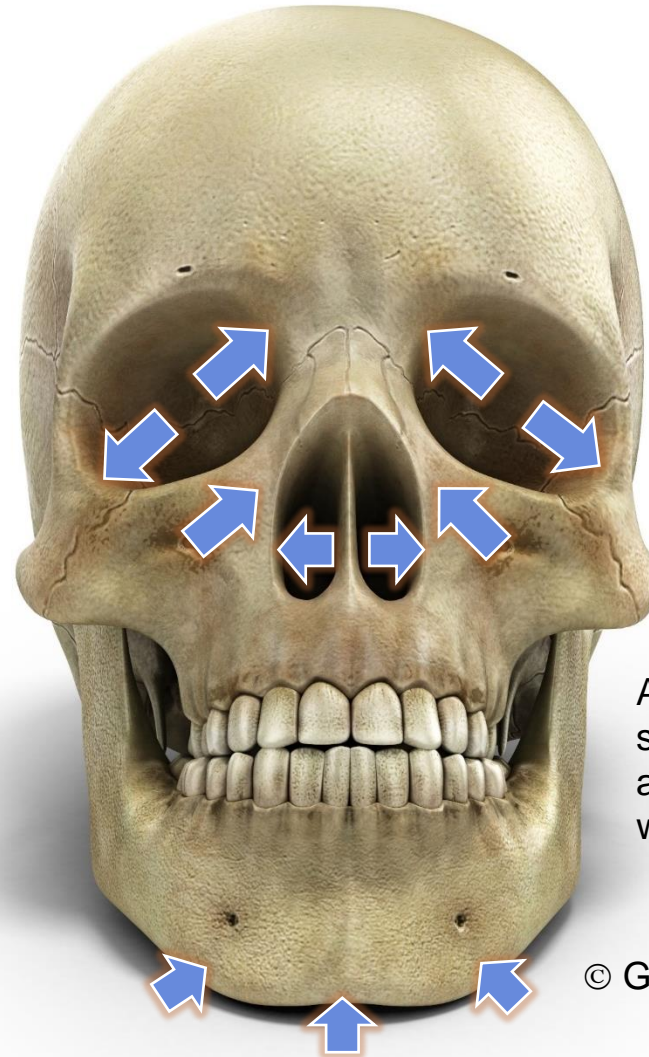
To surfaces and
sub-surfaces

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Facial Skeleton Is Susceptible to Resorption

- Changes occur mainly in the periorbital and mid cheek and specifically include the superomedial and inferolateral aspects of the orbit, the medial suborbital and pyriform areas of the maxilla and the prejowl area of the mandible.



Arrows indicate the areas of the facial skeleton susceptible to resorption with aging. The size of the arrow correlates with the amount of resorption.

© Galderma

Orbit aging



Male, 18 years



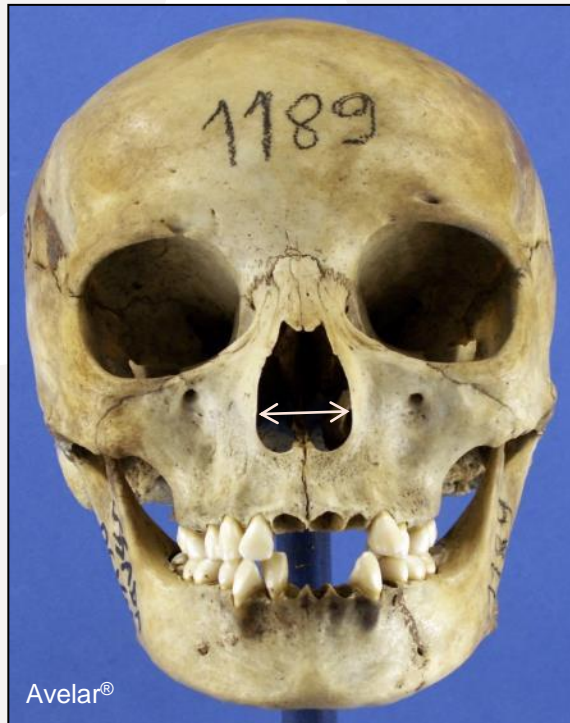
Male, 41 years



Male, 63 years

Bone structure – Piriform Aperture

Piriform aperture aging



Male, 18 years



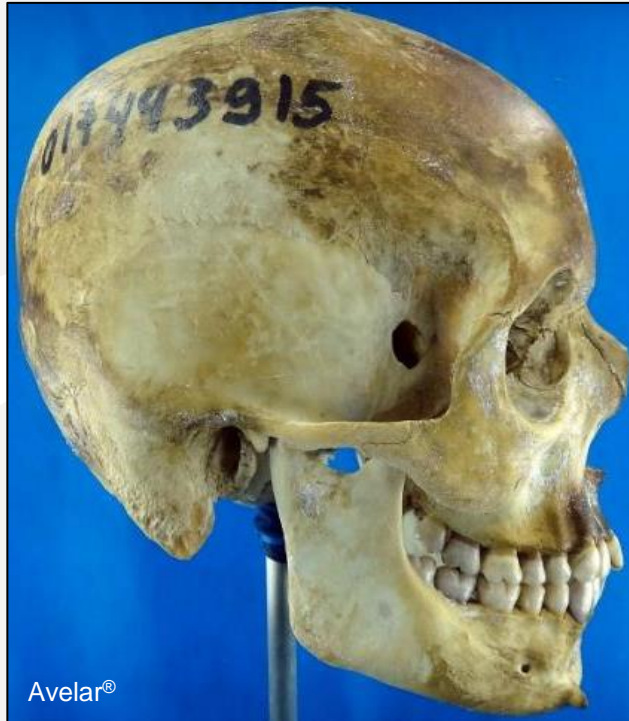
Male, 41 years



Male, 63 years

Avelar LET et al. PRS Global Open 2017;5(4):e1297

Aging of the 3 thirds



Male, 18 years



Male, 41 years



Male, 63 years

Bone structure – Angle of mandible



Up to 20 years old



Between 20 and 50 years



Over 50 years

Avelar LET et al. PRS Global Open 2017;5(4):e1297

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SUPERFICIAL AND DEEP FACIAL
FAT PADS

The aging process

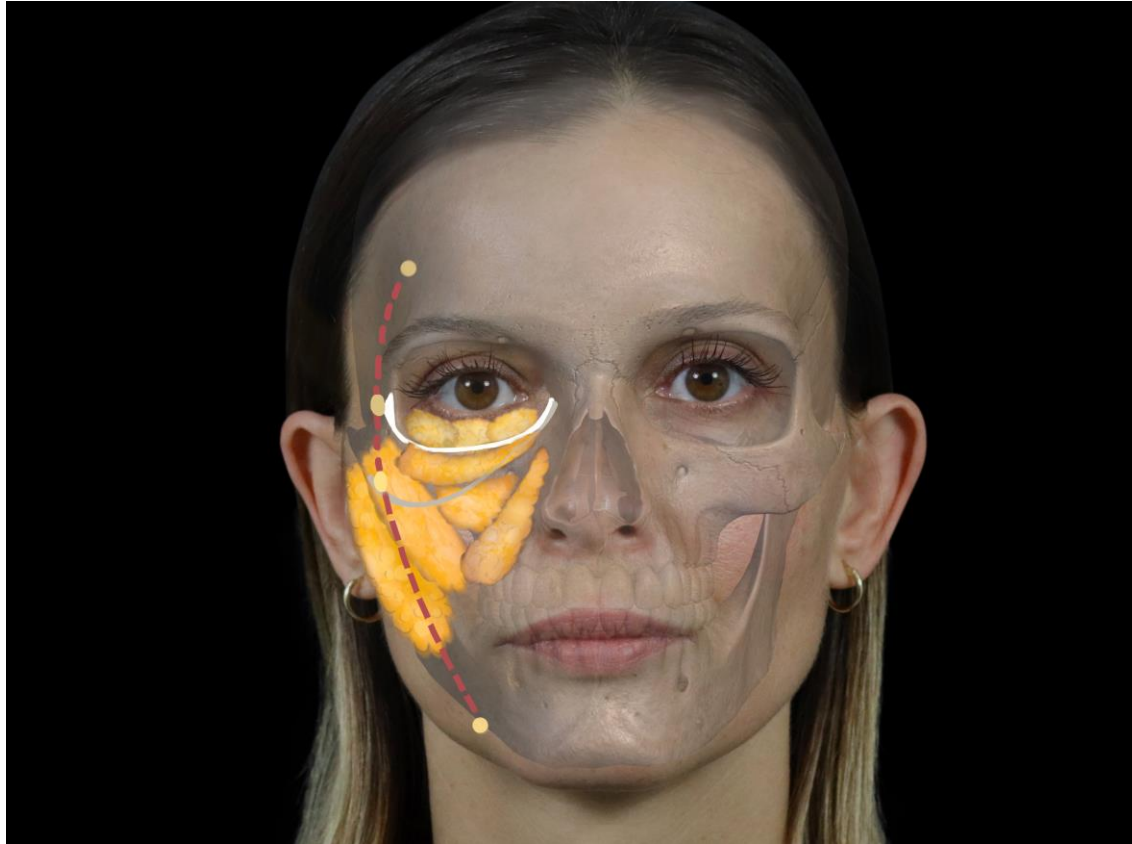


What the fat under your face looks like at age 30 (left) and 60 (right)

Courtesy of Galderma

Facial Aging

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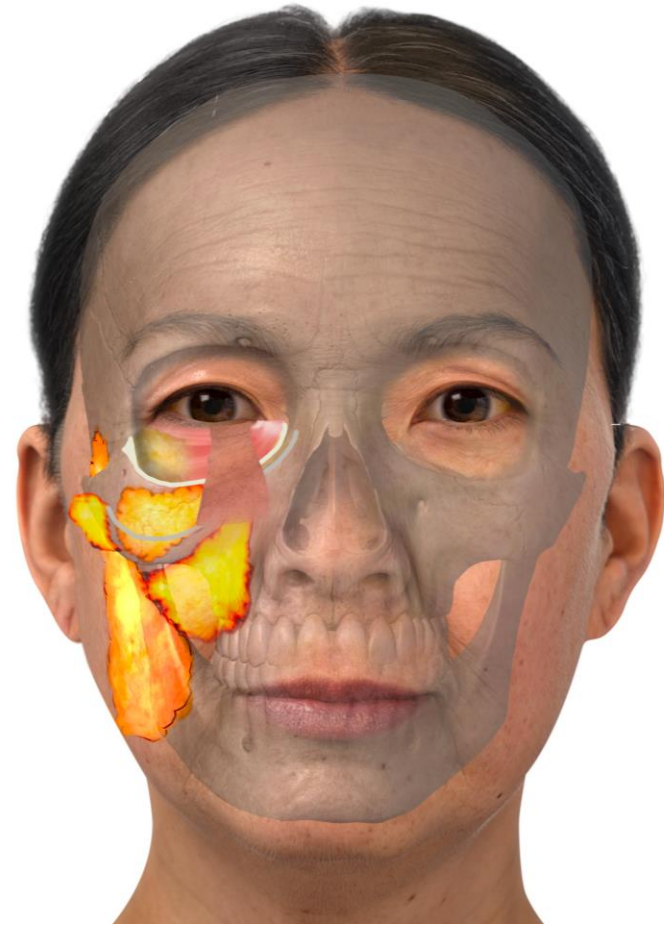
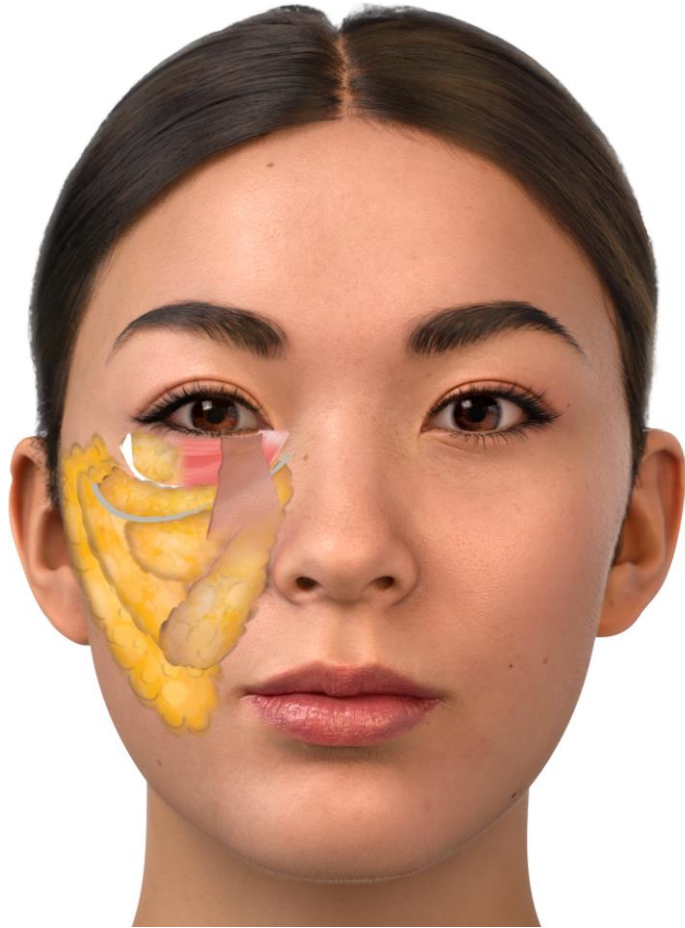


NLF, nasolabial fold.

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Facial Aging

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NLF, nasolabial fold.

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Volume Loss

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The face naturally loses volume and fat with age, resulting in a sunken, tired appearance

- Some people require a correction of panfacial volume loss from aging
- Others may need correction to give the appearance of higher cheekbones or a stronger chin, or to enhance a specific area

Age-Related Changes in Facial Shape Are Caused by Loss of Structural Support

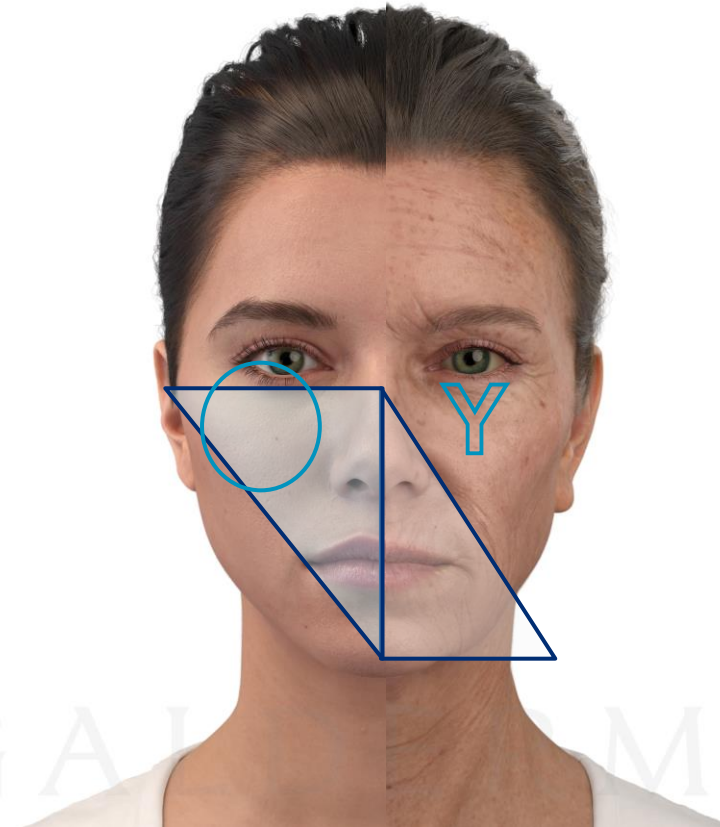
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Triangle
of youth

Inverted
triangle

Facial aging is marked by:

- Degradation of the skeleton and soft tissues¹
- Descent of cheek fat²
- Depletion of cheek fullness²



This results in
volume loss
and sagging^{1,2}

1. Cohen AJ. The mid face facelift. Available from: <http://emedicine.medscape.com/article/1818907-overview>. Accessed April 2019;

2. Coleman SR, et al. *Aesthet Surg. J* 2006;26(1S):S4-S9.



The aging process causes fundamental changes in the skin, soft tissue, and skeletal support structures of the human face. Dermal changes are due to intrinsic and extrinsic factors:

- Intrinsic factors refer to genetically determined hormonal and biochemical processes that cause irreversible degeneration of skin tissue
- Extrinsic factors refer to environmental influences, particularly UV radiation, that damage the skin and compromise skin integrity

Skin Aging

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As aging occurs

- The dermis thins owing to collagen loss¹
- Moisture retention is reduced owing to HA loss²
- Elasticity is reduced owing to loss of elastin³



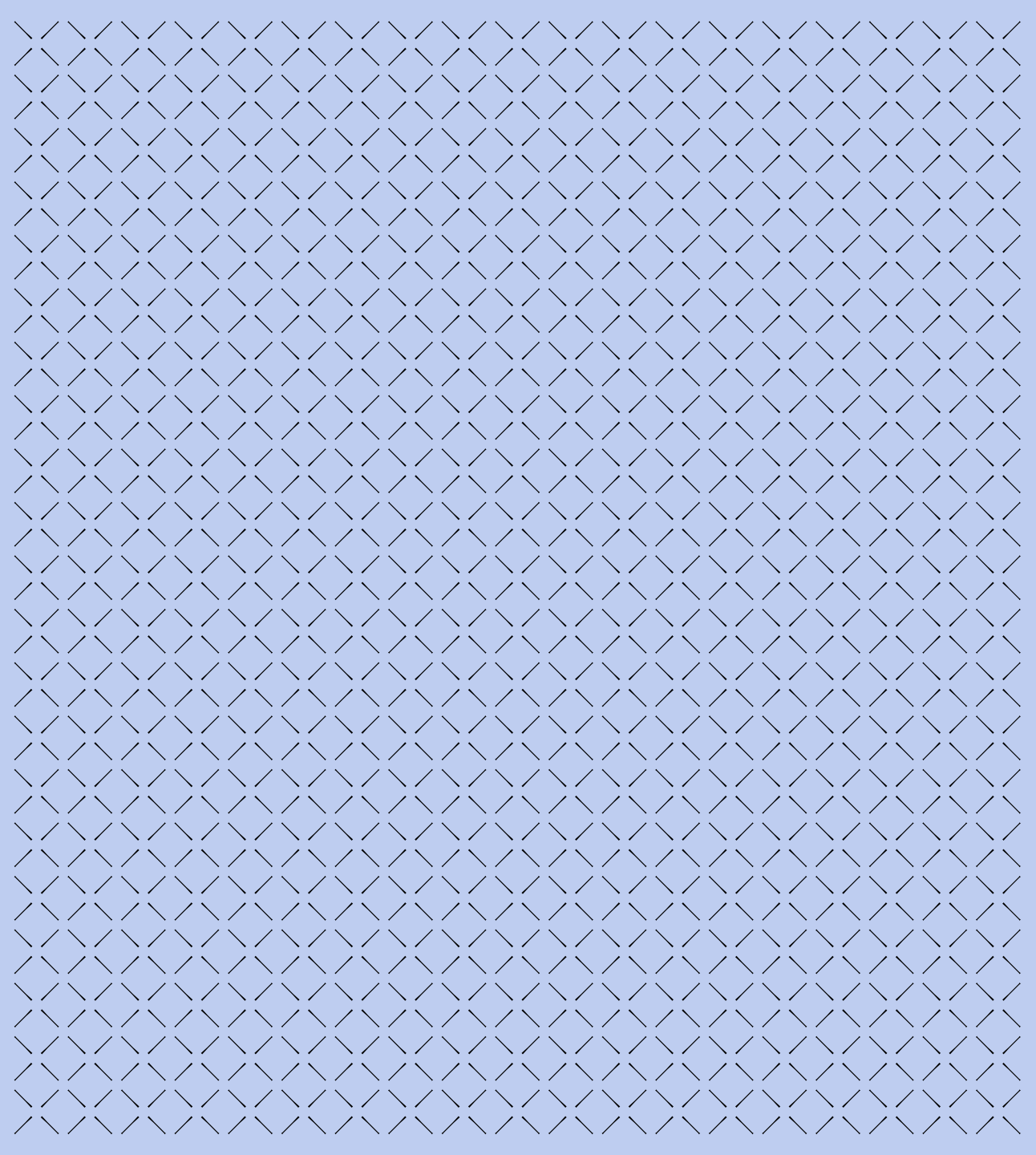
Firm skin that responds to movement and regains a smooth appearance at rest is essential for a youthful appearance

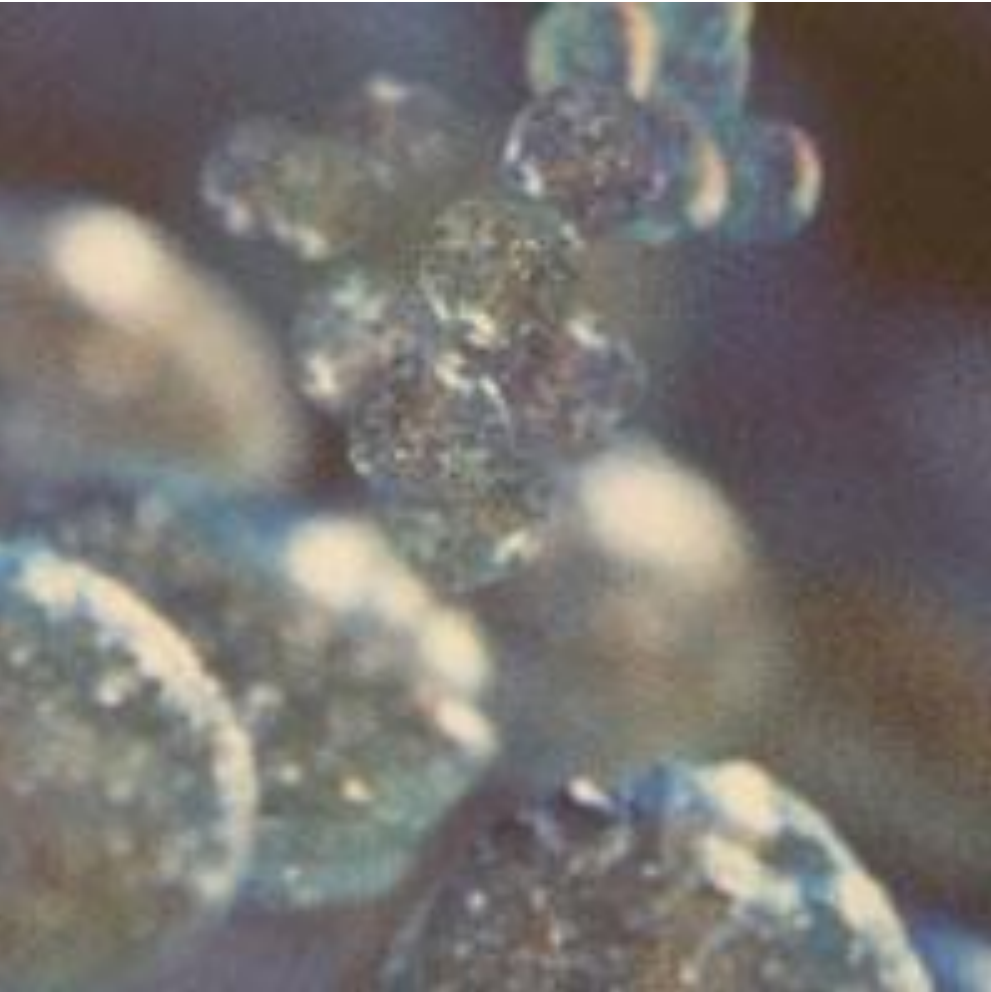
HA, hyaluronic acid.

1. Vlegaar D and Fitzgerald R. *J Drugs Dermatol.* 2008;7:209; 2. Papakonstantinou E, et al. *Dermato-Endocrinology* 2012;4(3):253-258; 3. Farage MA, et al. *Adv Wound Care.* 2007;2(1):5-10.

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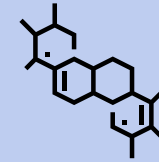
Introduction to Hyaluronic Acid Gels





Physiological Functions

- Binds water
- Influences cell motility
- Protects against free radicals
- Promotes wound healing



Physicochemical Properties

- Ubiquitous in all vertebrate species (nonimmunogenic)
- Major component of extracellular matrix
- Found in soft connective tissues, vitreous jelly, synovial fluid

HA, hyaluronic acid.
Fakhari A and Berklund C. *Acta Biomater.* 2013;9(7):7081-7092.

Biomedical Applications of HA

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Identified and isolated in 1934^{1,2}



Extensively used in medical applications including²

- As a chondroprotector in osteoarthritic joints
- To protect the corneal endothelium during cataract surgery



Originally derived from animal sources (eg, umbilical cords, rooster combs)^{1,2}



Aesthetic use as a dermal filler began in the mid-1990s²

- Animal sources include bovine, porcine, or human collagen
- Synthetic forms include poly-L-lactic acid, calcium hydroxylapatite, polymethyl methacrylate, and polyacrylamide gel



Because of its short half-life—approximately 1–2 days—native HA requires stabilization to be used as a filler

HA, hyaluronic acid.

1. Fakhari A and Berkland C. *Acta Biomater.* 2013;9(7):7081-7092; 2. Gupta RC, et al. *Front Vet Sci.* 2019;6:192.

Production of HA Gels for Aesthetic Use

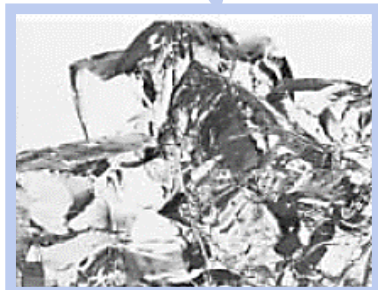
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Stabilization of HA From Nonanimal Sources



Viscous HA solution

+BDDE



*Cross-linked HA gel
(lasts many months
in vivo⁴)*

- HA of nonanimal origin is produced via bacterial fermentation
- Cross-linking HA with BDDE creates a network of HA chains that form a gel^{1,2}
 - Protects the gel from degradation and increases longevity in vivo³
 - Contributes to gel strength and increases resistance to deformation³
 - The specific cross-linking process is usually proprietary information and varies between different manufacturer of HA gel
- Once bound, BDDE is deactivated and the potential for toxicity is lost
- The extent of cross-linking is one factor that affects the firmness/softness of a gel^{2,3}

The detectable amount of residual BDDE in Restylane products is in accordance with US and EU regulatory standards

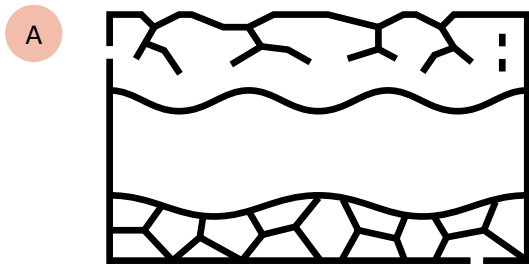
BDDE, 1,4-butanediol diglycidyl ether; HA, hyaluronic acid.

1. Micheels P, et al. *J Drugs Dermatol*. 2016;15(5):600-606; 2. Fakhari A and Berkland C. *Acta Biomater*. 2013;9(7):7081-7092; 3. Kablik J, et al. *Dermatol Surg*. 2009;35:302-312; 4. Monheit GD, et al. *Dermatol Ther*. 2006;19(3):141-150.

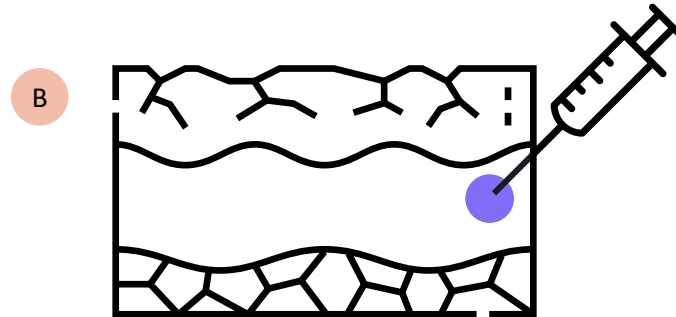
Aesthetic Use of Dermal Fillers

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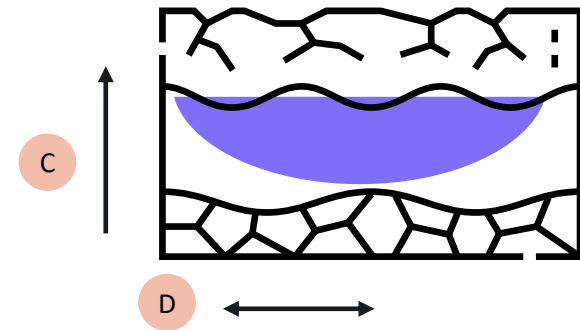
Restoring Lift and Volume



Aesthetic enhancement and restoration are **achieved through lifting of targeted tissues**



The degree of lift is **determined by the gel's strength/firmness**



Firm gels stay where they are injected and **provide pronounced lift** and correction of wrinkles and folds

Soft gels **spread after injection** and are more flexible upon deformation

Gel Features

Implications for Dynamic Performance

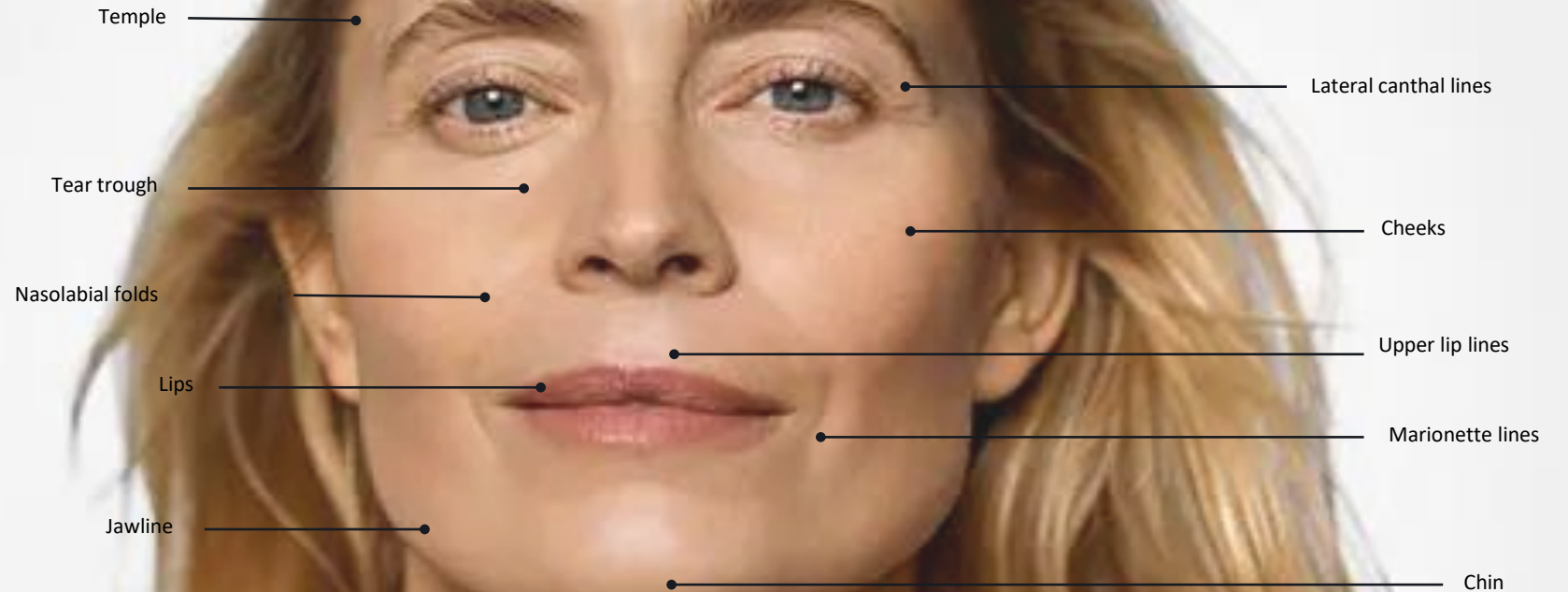
The right filler for any given aesthetic indication must provide sufficient **firmness** to lift tissues and correct volume loss

The chosen filler must also have sufficient **flexibility** to respond to the full range of movement and natural expressions

The necessary balance of firmness and flexibility will vary depending on the patient and the area to be treated

Different uses require fillers with different properties

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Gel Structure and Performance

Testing Gels

The viscoelastic properties of gel fillers are typically assessed with a **rheometer**, which subjects samples to various degrees of shear stress

Rheologic testing describes whether the gel behaves as rubber ball (elastic) or as syrup (viscous) or a combination thereof

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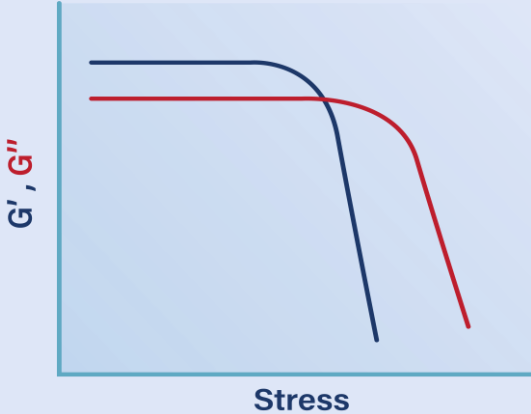
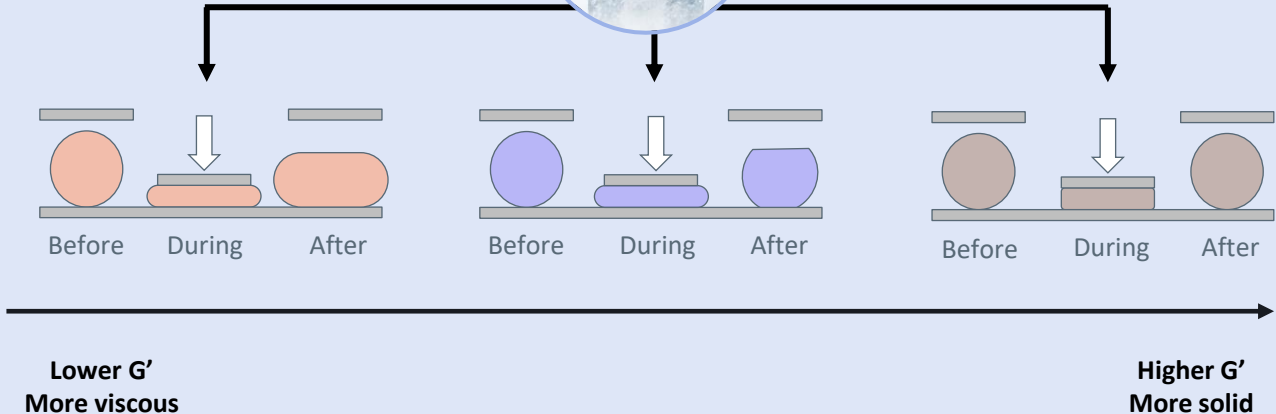


Key Rheologic Measures

G' and G''

- G' (elastic or storage modulus) represents the energy stored and recovered during stress¹⁻³
- Higher G' indicates greater resistance to deformation¹⁻⁴

- G'' (viscous or loss modulus) represents the energy lost during stress¹⁻³
- Higher G'' typically indicates a lower ability to recover after deformation¹⁻³
 - When G' exceeds G'' , the filler is behaving more like a solid
 - When G'' is greater than G' , more viscous behavior is prevailing⁴



G' , storage modulus; G'' , loss modulus.
1. Lorenc ZP, et al. *J Drugs Dermatol*. 2017;16(9):876-882; 2. Pierre S, et al. *Dermatol Surg*. 2015;41(suppl 1):S120-S126; 3. Öhrlund Å. *J Cosmet Dermatol Sci Appl*. 2018;8:47-54; 4. Duffy J. *Ask the Expert: Using Rheology to Design Better Products—Yield Stress and How to Measure It*. July 24, 2012. <https://www.americanlaboratory.com/914-Application-Notes/117719-Ask-the-Expert-Using-Rheology-to-Design-Better-Products-Yield-Stress-and-How-to-Measure-It/>. Accessed May 28, 2021.

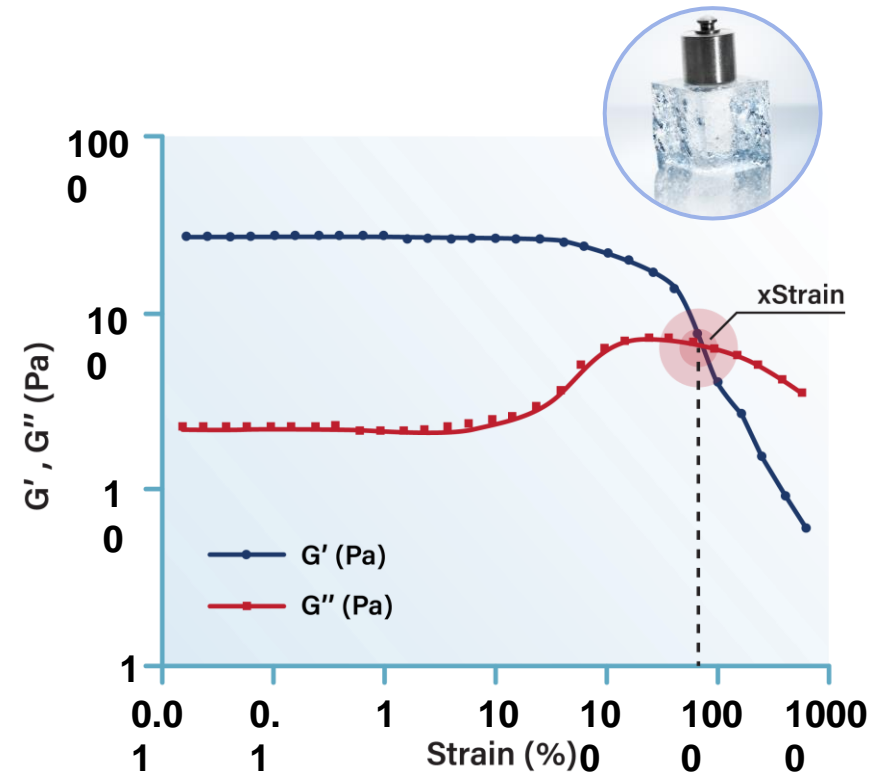
Assessing Gel Flexibility

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xStrain

- **xStrain** is an index of flexibility based on the intersection of G' and G'' ¹⁻⁴
 - A **simple, exact, and reproducible** method of identifying the point at which a stretched gel cannot return to its original shape²
 - An **established and widely accepted** measure based on standard and well-validated rheologic parameters¹⁻³
 - **Supported by peer-reviewed publications**¹⁻⁴
- Unlike G' , xStrain is measured under dynamic conditions²

When combined with G' , xStrain provides a comprehensive picture of the relative firmness and flexibility of HA fillers²



G' , storage modulus; G'' , loss modulus; HA, hyaluronic acid.

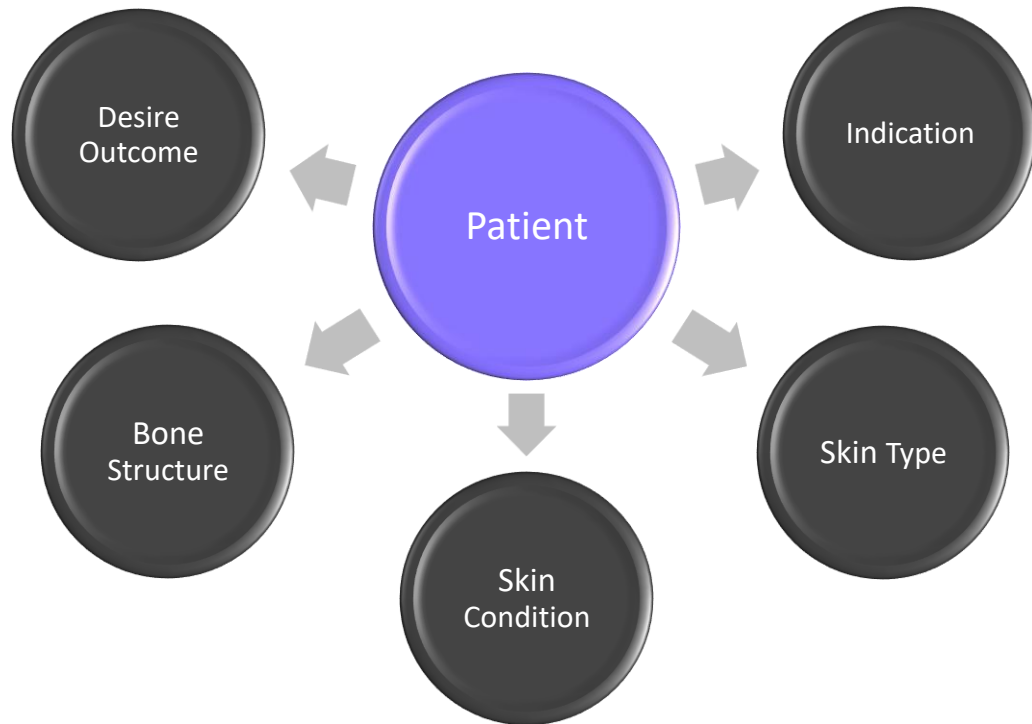
1. Akinbiyi T, et al. *Plast Reconstr Surg Glob Open*. 2020;8(10): e2763; 2. Öhrlund Å. *J Cosmet Dermatol Sci Appl*. 2018;8:47-54; 3. Stocks DM, et al. *Plast Reconstr Surg*. 124(4S):86; 4. Micheels P, et al. *J Drugs Dermatol*. 2018;17(9):948-954.

They turn to you for your experience and expertise

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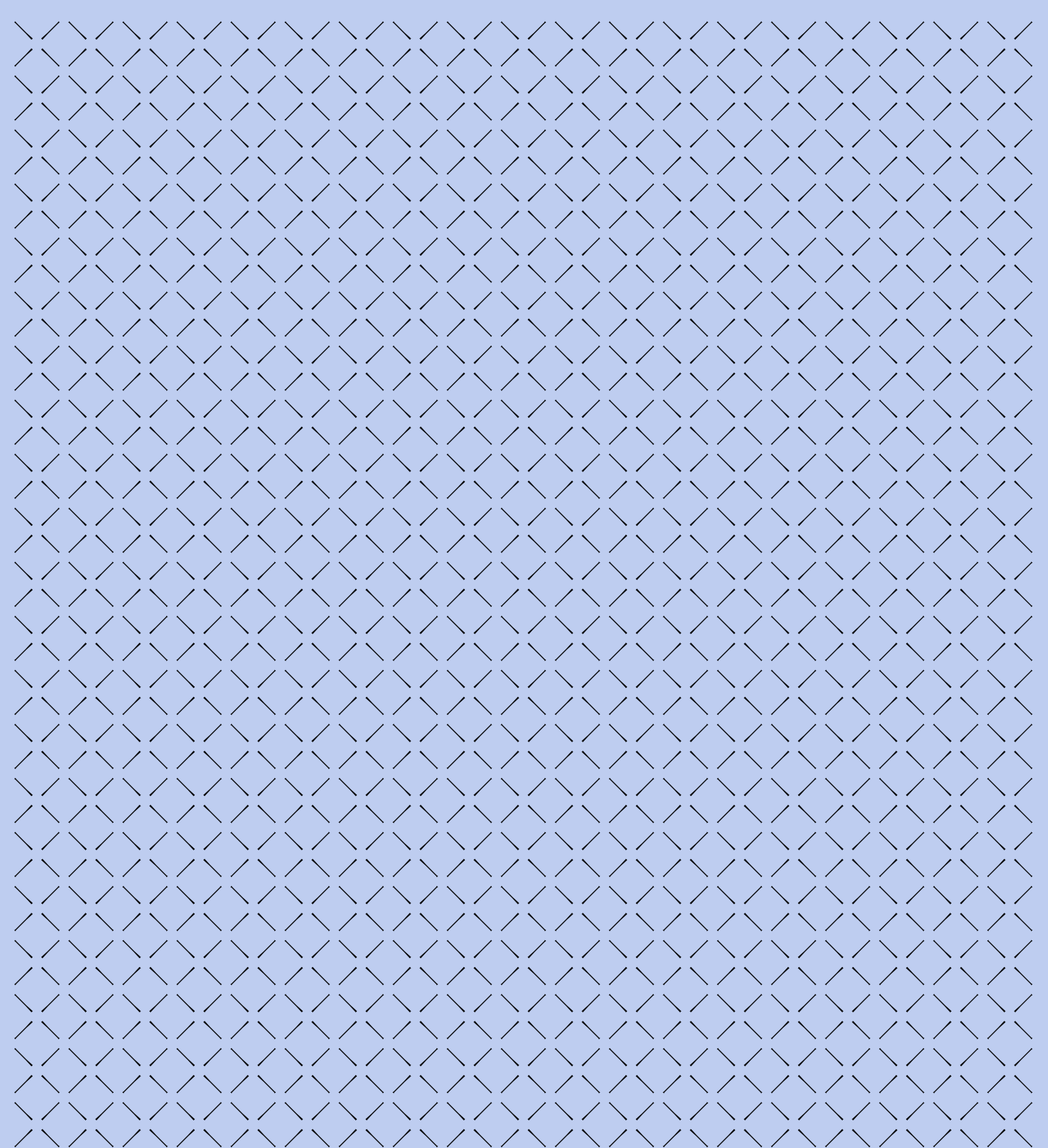
The needs are unique

No two faces are alike- each of your patients needs an individualized treatment approach:



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How I choose my
Restylane?



How I choose my Restylane?

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Every patient is unique, with different needs and wishes.

In order to have the best results & outcomes for each one of them...

Galderma developed the world's broadest portfolio of filler

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Rheological properties

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Why do we need to know and understand about rheological properties of our fillers?

- Flexibility
- Level of cross-linking
- Gel texture
- Gel particle size
- Lifting capacity- G' , G'' , Resistance to deformation
- Product integration
- Viscosity / Elasticity
- Firmness
- Concentration
- Cohesiveness



The Path to the best results

GAIN



A complete understanding about the rheological properties of our different HA fillers

Predictable outcomes and the **ability to choose right** from Restylane's wide portfolio

Create the best result according to your patient's needs, and for every indication

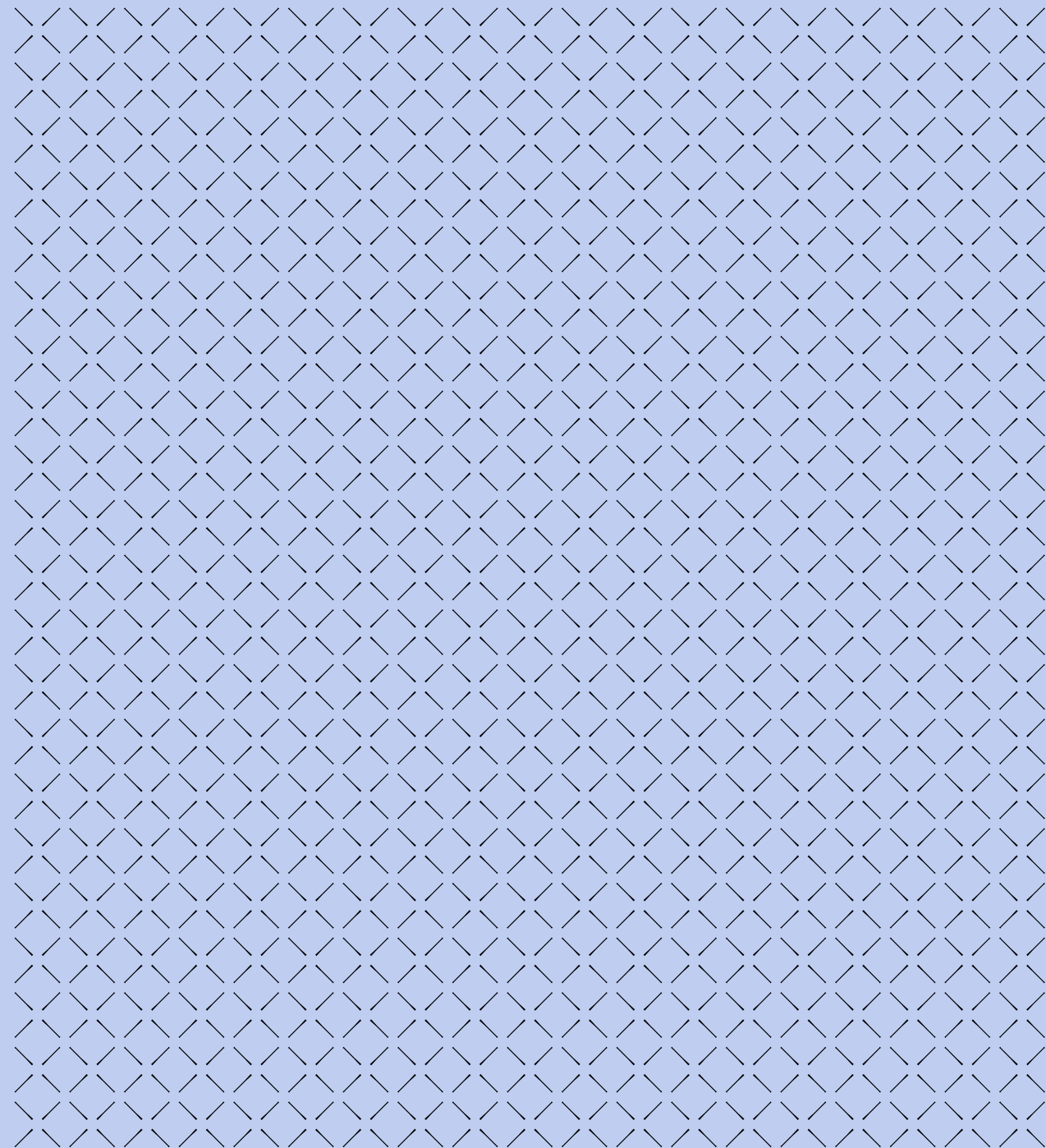
A woman with blonde, wavy hair is smiling broadly, showing her teeth. She is wearing a white, short-sleeved blouse with a ruffled collar. The background is a plain, light gray color.

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Worth Every Expression

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Galderma's Technologies



Galderma Aesthetics Collection

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RELAX

Relax the muscles involved in the formation of dynamic wrinkles

Azzalure
Botulinum toxin type A



REFINE

Refine the look for a healthy more youthful appearance by providing shape and contours through lift, by filling lines and wrinkles or by adding volume



REFRESH

Refresh the look for radiant and hydrated skin

Restylane
SKINBOOSTERS™

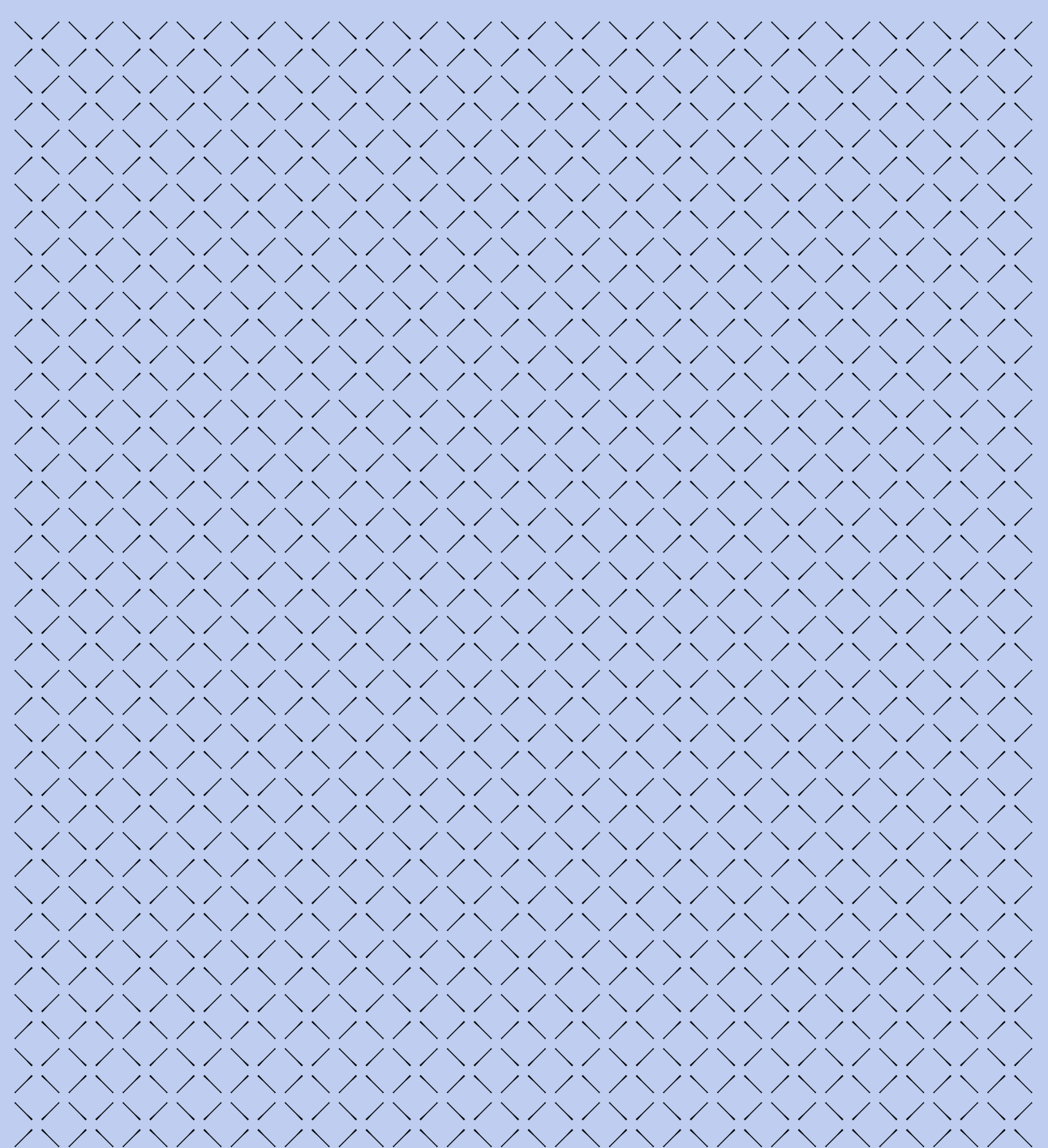


RENEW

Restore a youthful foundation (face or body) by stimulating the skin's natural collagen production

Sculptra

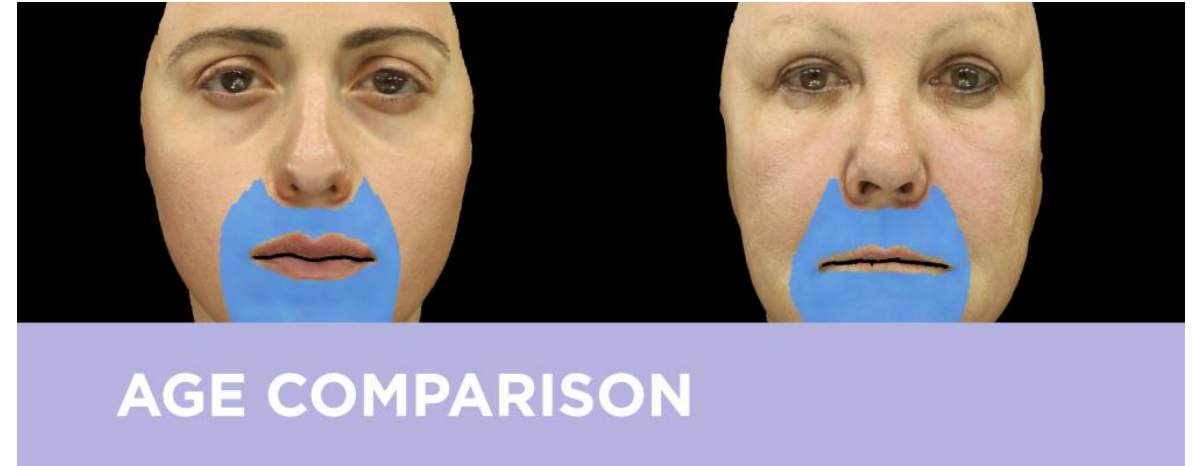
Restylane Technologies



Galderma trials innovative technology to measure dynamic expressions

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Measuring the degree of stretch and compression in facial expression using strain-mapping technology^{2*}



83%

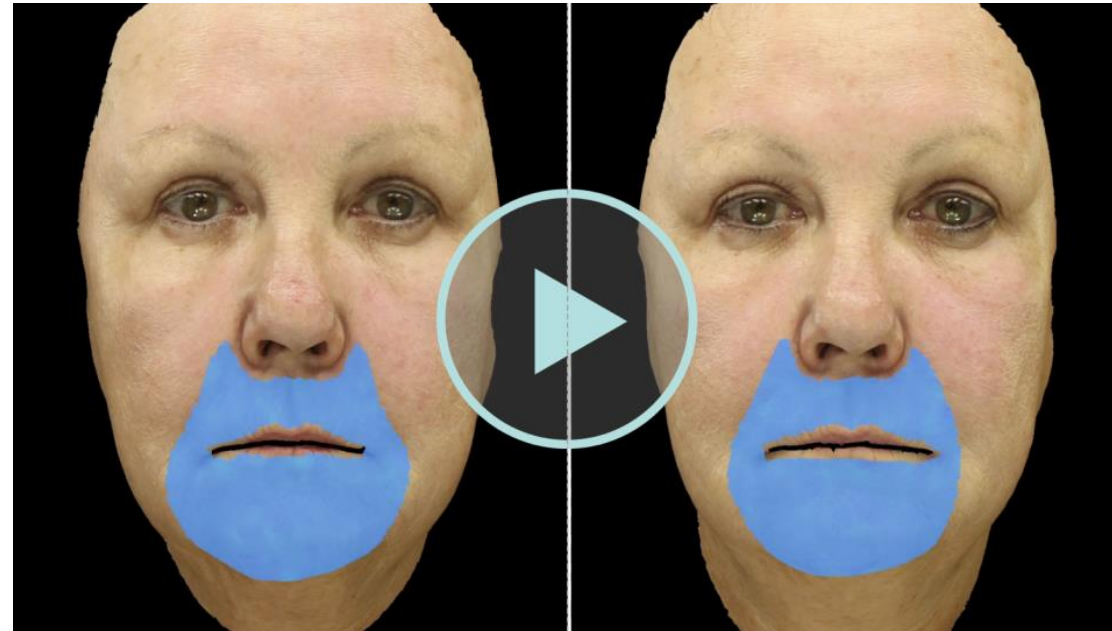
Overall, facial expression in motion was judged by treating investigator to show **enhanced attractiveness** and **look younger** and at least **maintained naturalness** in 25/30 subjects (83.3%).²

*Pooled study of Restylane Refyne and Restylane Defyne subjects. Statistical significance was found only in certain facial areas.

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Representative before and after: Closed smile

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Treated older subject at baseline (Aged 58)

Treated older subject 42 days post-treatment (Aged 58)*

Treatment with *Restylane* Refyne and *Restylane* Defyne reduced the degree of dynamic stretch and compression in (such as marionette lines) in older subjects, ages 41 to 65 (N=30).^{2†}

Greatest stretch

Lowest stretch



* 4.4 mL of *Restylane* Defyne in nasolabial folds and marionette lines.

†Pooled study of *Restylane* Refyne and *Restylane* Defyne subjects. Statistical significance was found only in certain facial areas.

Representative age comparison: Closed smile

GAIN



Untreated younger subject (Aged 35)

Treated older subject 42 days
post-treatment (Aged 58)*

Older subjects, age 41 to 65 (N=30), treated with *Restylane* Refyne and *Restylane* Defyne showed a reduction in the degree of strain compared to baseline for facial areas prone to volumetric effects of facial aging (such as marionette lines). Results resembled younger, untreated subjects, ages 25 to 35 (N=20).^{2†}

Greatest stretch

Lowest stretch



* *Restylane* Defyne: 2.5 mL NLF + 1.9 mL in marionette lines. (initial + touch up)

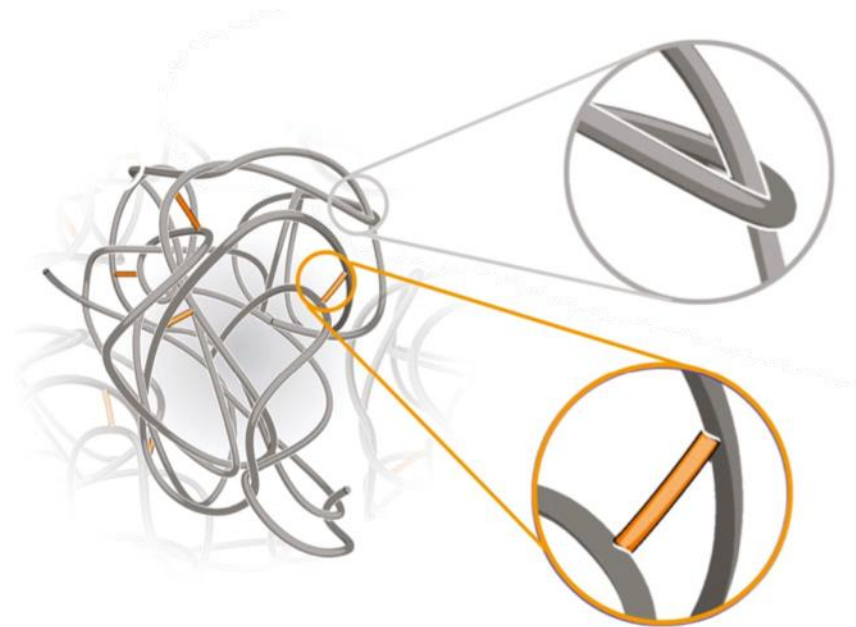
†Pooled study of *Restylane* Refyne and *Restylane* Defyne subjects. Statistical significance was found only in certain facial areas.

Restylane®

Restylane NASHA™

Non-animal Stabilized HA™ Technology

- **First** in the Field
- The **uniqueness** of NASHA™:
 - The stabilization process preserves the natural molecular structure and maintains natural cross-links
 - Homogenously and specifically sized gel particles for predictable precision
 - Firm gels – more pronounce lifting capacity
- **Concentration of 20 mg/ml stabilized hyaluronic acid**



The NASHA™ Technology

Cross-linking

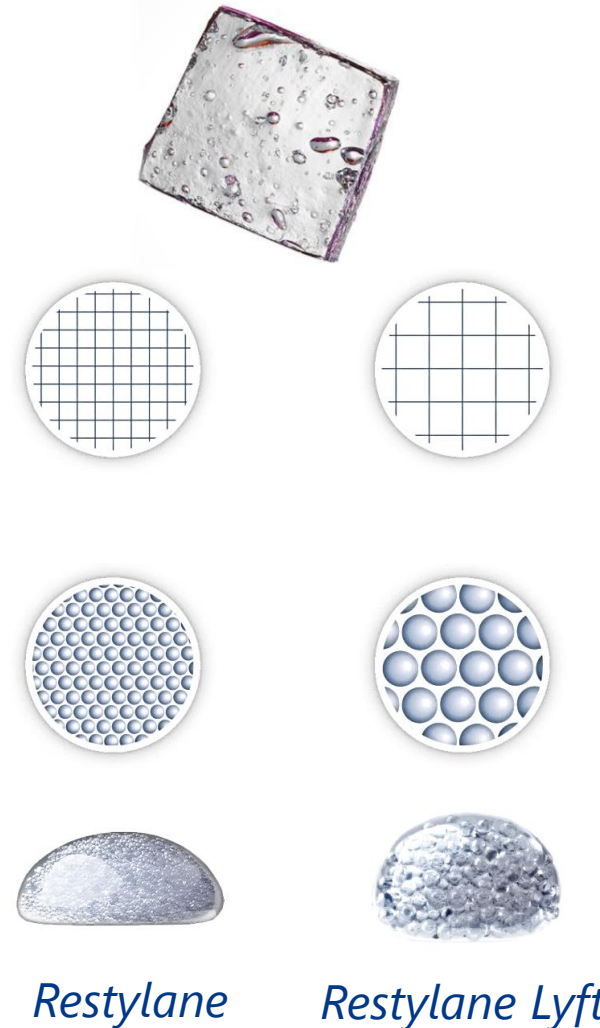
One degree of cross-linking using the unique stabilization process

Controlled particle sizing

Two degrees of gel particle sizing

Different gel textures

Controlled particle sizing result in distinct gel textures for different lifting capacities



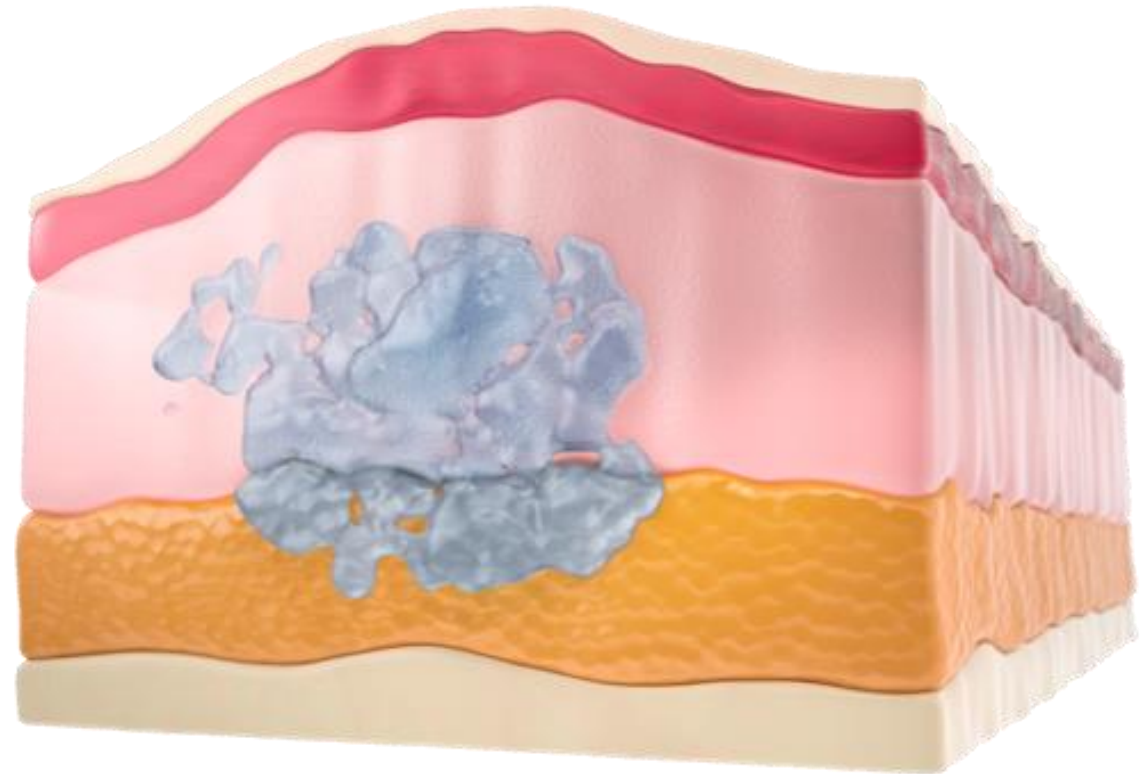
Restylane

Restylane Lyft

NASHA Gels – Lifting and Projection

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When injected into the dermal layer, the properties of NASHA gel technology enable **lifting** and **projection** of the epidermal layer for patients with thicker tissue coverage¹



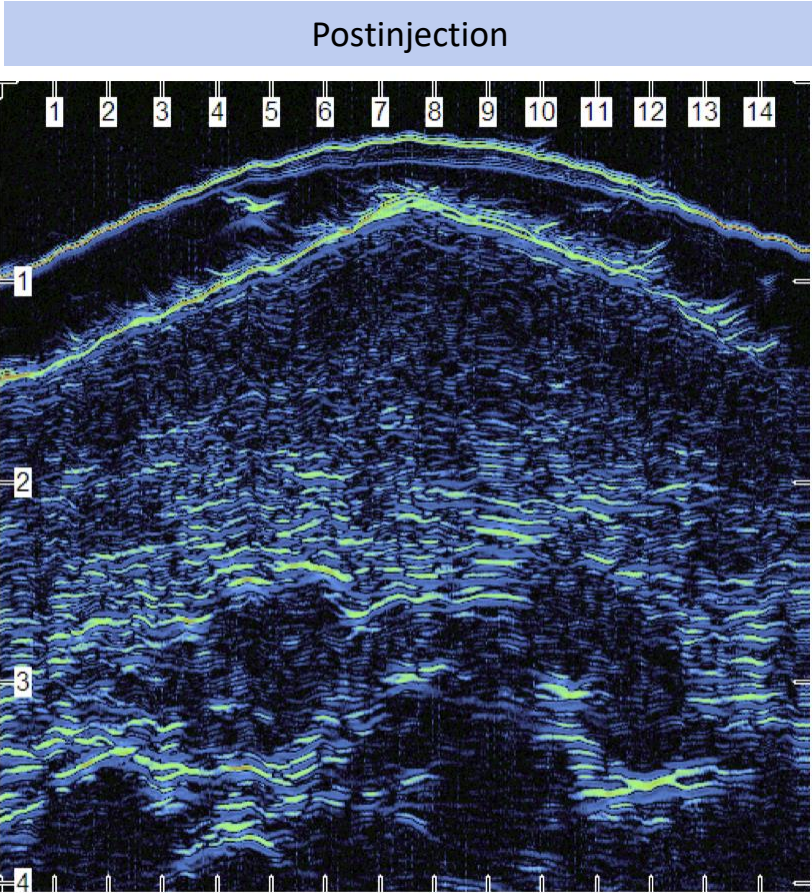
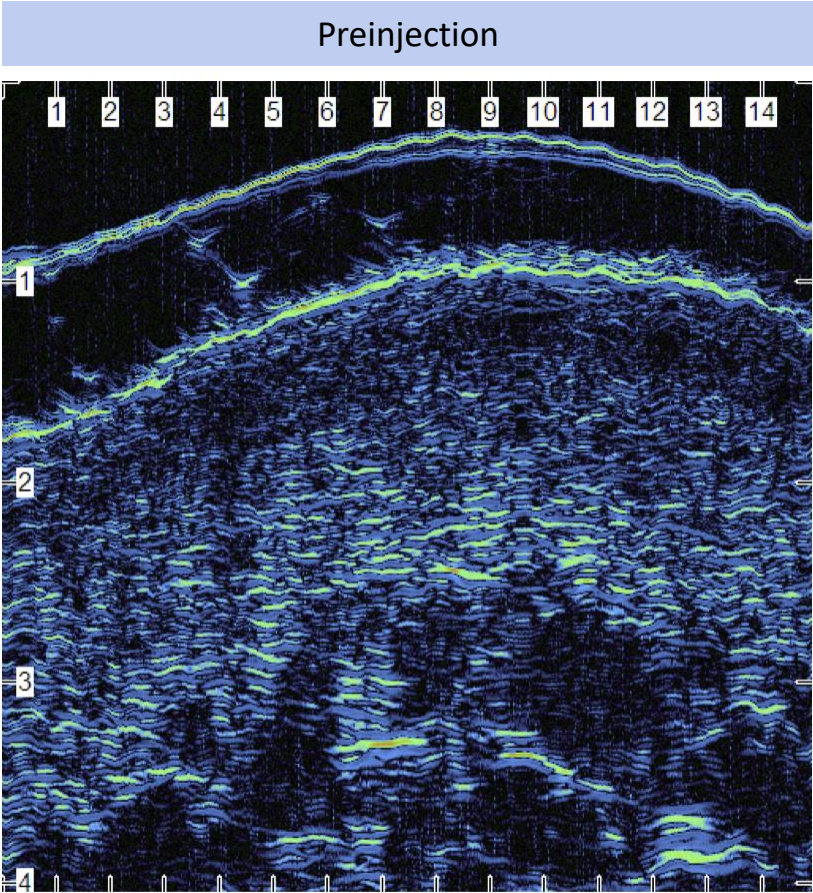
NASHA, nonanimal stabilized hyaluronic acid.

1. Lundgren B, et al. *J Drugs Dermatol* .2018;17(9):982–986.

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1. Nikolis A, et al. *Aesthet Surg J Open Forum*. 2020;2(1):ojaa005. doi: 10.1093/asjof/ojaa005.

NASHA – Lifting and Precision

Pronounced **lifting** capacity for projection and definition

- Enhancing cheeks and filling wrinkles and folds
- Nose, chin, jawline, and tear trough, where **precision** is needed

Precision

Tear trough

Restylane Restylane
EYELIGHT

Nose

Restylane
LYFT

Lifting

Cheek, midface, nasolabial folds

Restylane Restylane
LYFT

Chin, jawline

Restylane Restylane
LYFT

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NASHA, nonanimal stabilized hyaluronic acid.

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EST. 1981

Restylane Lyft

21 NOVEMBER 2023

Restylane Lyft Core Claims

Optimal lift without volumizing

Designed to deliver projection and structure for a pronounced effect

Designed to stay in place

Unique and trusted NASHA™ technology for precise placement

Favorable safety profile based on unrivalled experience

Supported by extensive clinical evidence

Reliable and long-lasting results

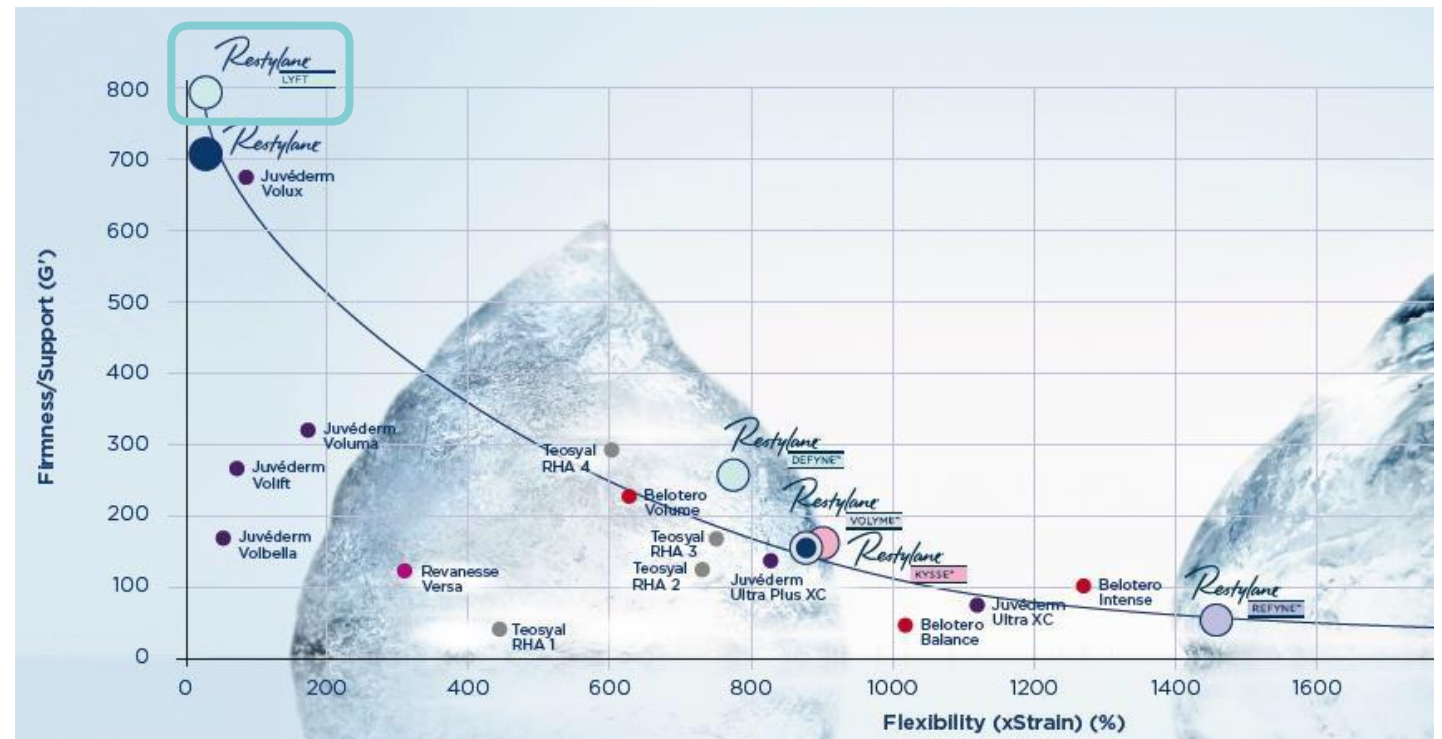
*Results that last up to 24 months with one retreatment
Long-term treatment satisfaction, leaving patients filled with confidence*

Optimal lift without volumizing

Designed to deliver projection and structure for a pronounced effect¹⁻⁵

Supporting information:

The firm (higher G') gel texture and controlled particle size of Restylane Lyft is designed to resist the dynamic forces that occur during facial muscle movement for optimal lift and projection without volumizing^{1,2}



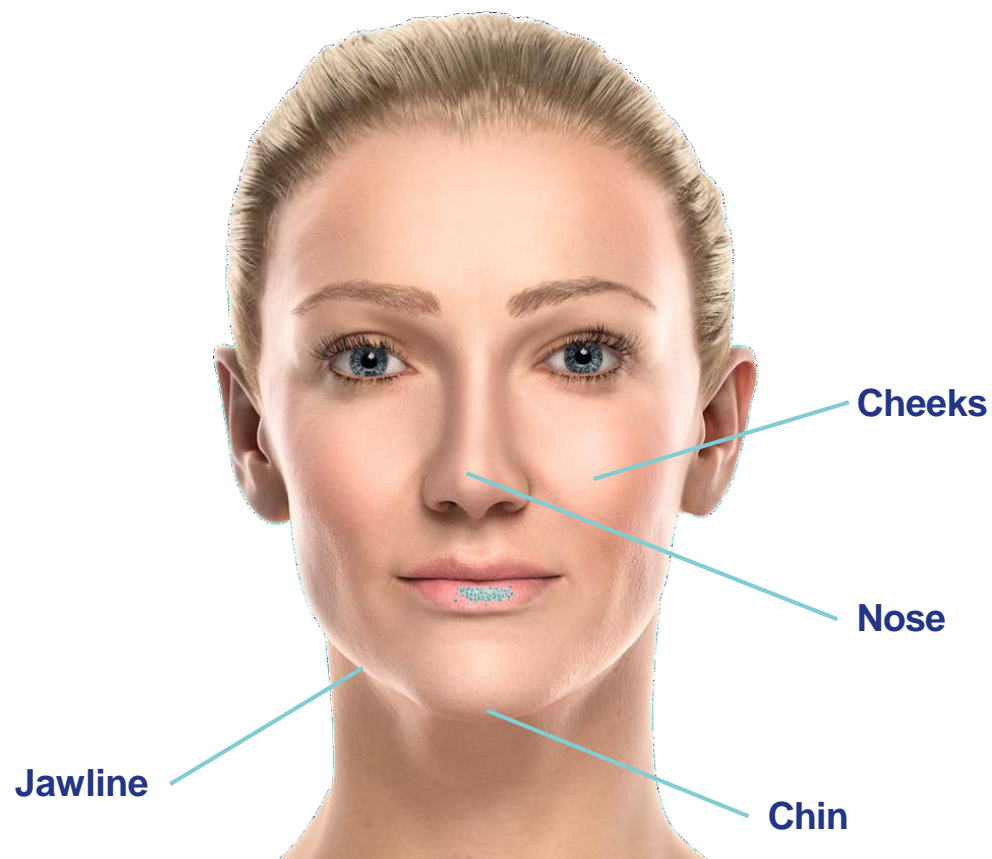
1. Data on file (MA-43049); 2. Kablik J *et al.* *Dermatol Surg* 2009;35(Suppl 1):302–312; 3. Lundgren B *et al.* *J Drugs Dermatol* 2018;17(9):982–986; 4. Andriopoulos B *et al.* Poster presented at AMWC 2019; 5. Edwartz C *et al.* Poster presented at AMWC 2020.

Optimal lift without volumizing

Designed to deliver projection and structure for a pronounced effect¹⁻⁵

Supporting information:

Restylane Lyft is ideally suited for lifting and projection to create ultimate structure in areas where precision is needed²⁻⁵

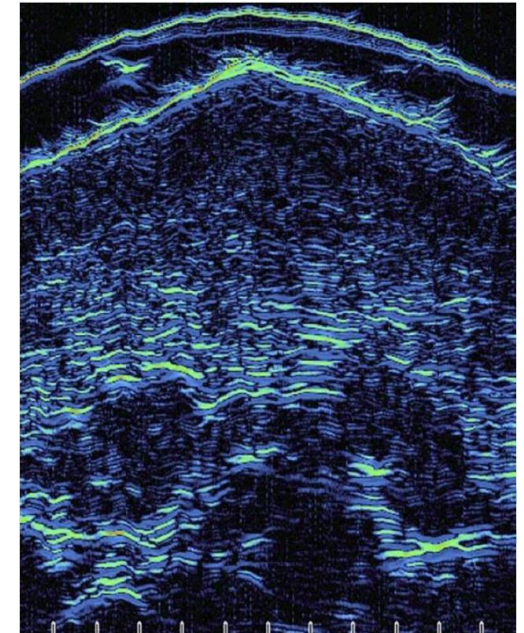
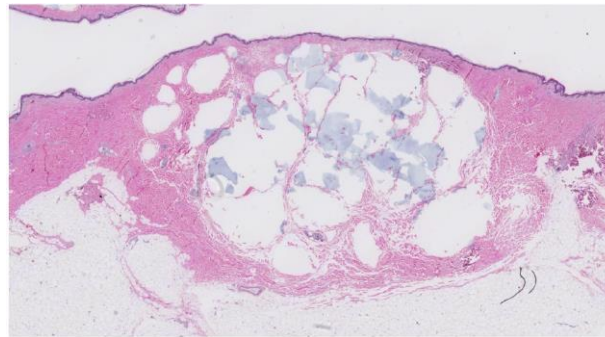
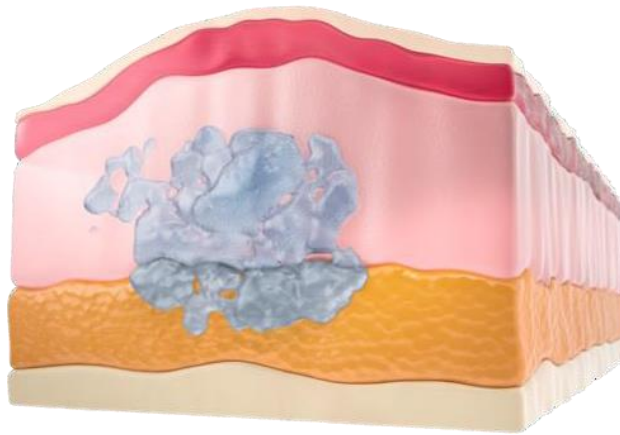


Designed to stay in place

Unique and trusted NASHA technology for precise placement^{1,2}

Supporting information:

The trusted NASHA technology of Restylane Lyft delivers precise results, allowing for targeted placement at the site of injection with low distribution and integration into the surrounding tissues^{1,2}



NASHA, non-animal stabilized hyaluronic acid.

1. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 2. Nikolis A *et al. Aesthetic Surg J* 2020;20(1):ojaa005.

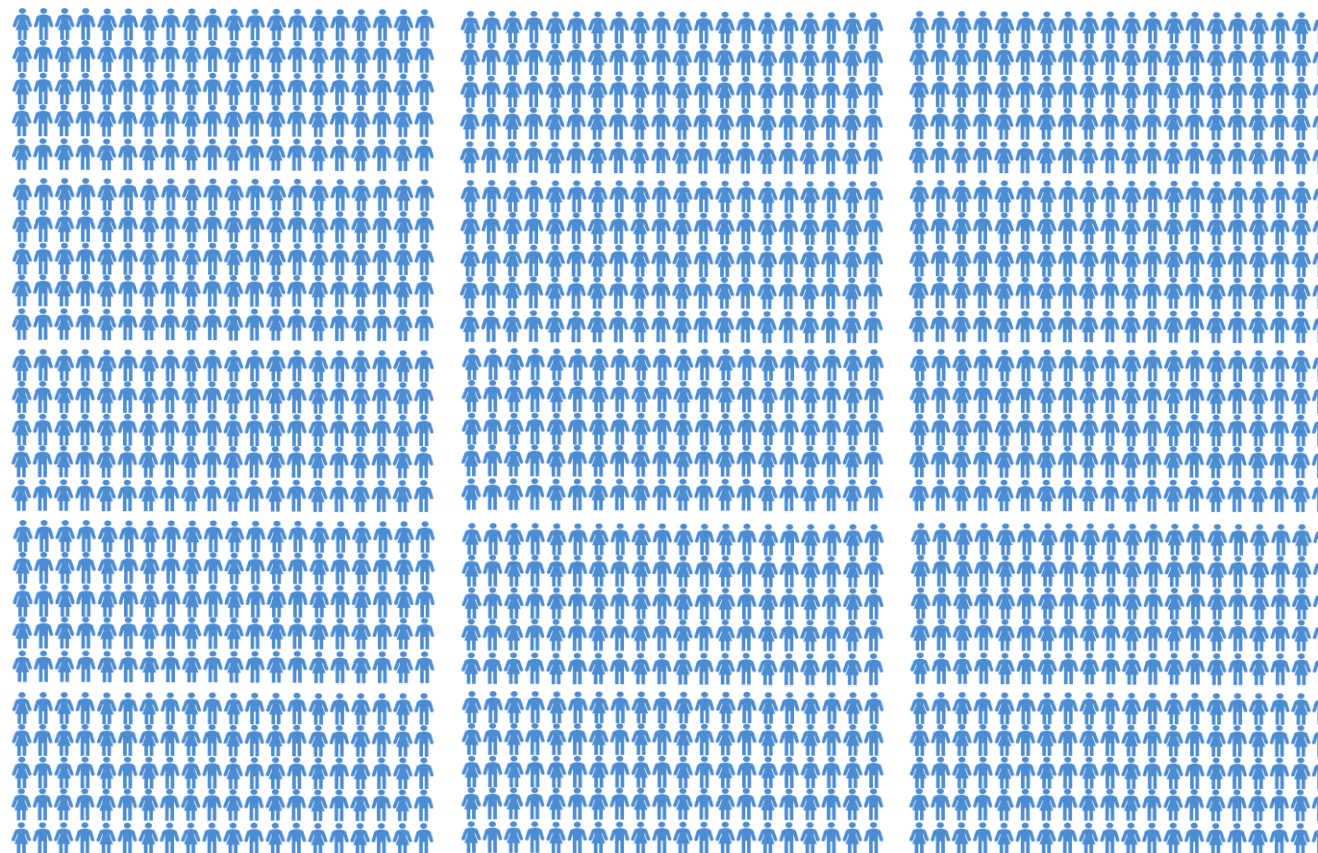
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**Favorable safety profile
based on unrivalled
experience**

*Supported by extensive
clinical evidence¹*

Supporting information:

Restylane Lyft has a well-established safety profile demonstrated in more than 20 clinical studies encompassing over 1,500 patients¹



1. Data on file (MA-43602).

Reliable and long-lasting results

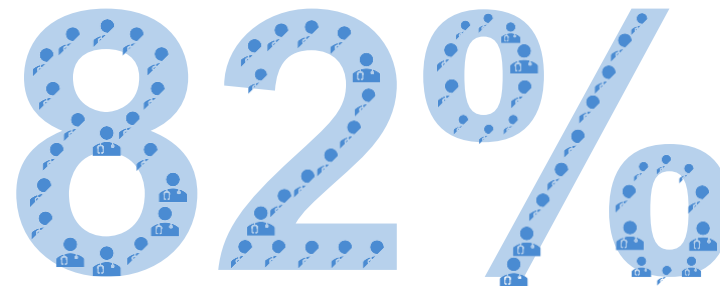
Results that last up to 24 months with one retreatment¹

Supporting information:

Restylane Lyft provides results that last up to 24 months with one retreatment, as evaluated by both patients and physicians¹



of the 100 female subjects reported improvement in the Global Aesthetic Improvement Scale (GAIS) at 24 months with two full-face treatments¹



of physicians described improvement in the global facial aesthetic at the same time point¹

GAIS, Global Aesthetic Improvement Scale.

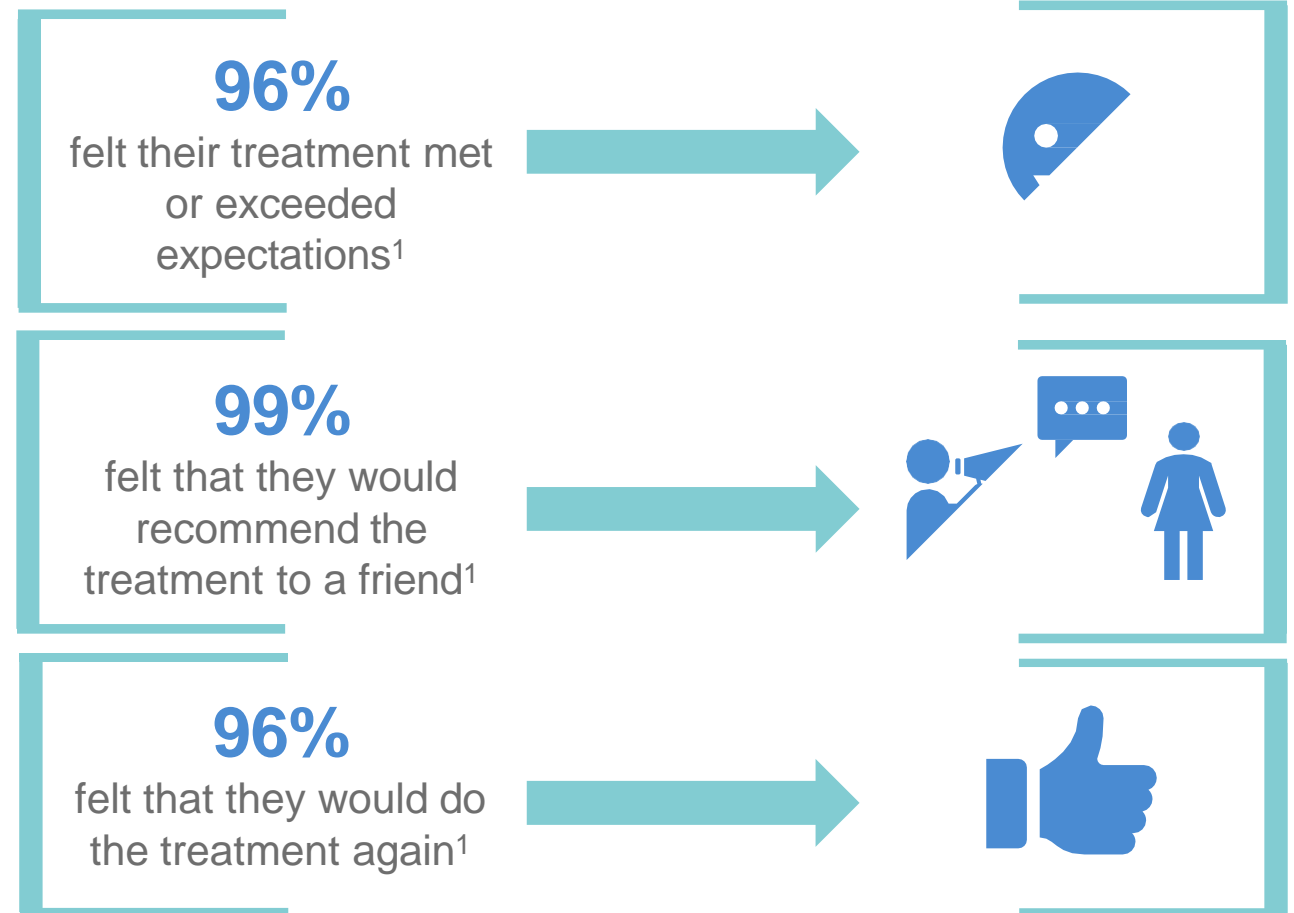
1. Andriopoulos B *et al.* Poster presented at AMWC 2019.

Reliable and long-lasting results

Long-term treatment satisfaction, leaving patients filled with confidence¹

Supporting information:

Treatment satisfaction for Restylane Lyft was high and sustained across the 2-year study period¹



1. Andriopoulos B *et al.* Poster presented at AMWC 2019.

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EST. 1981

Restylane Eyelight

21 NOVEMBER 2023

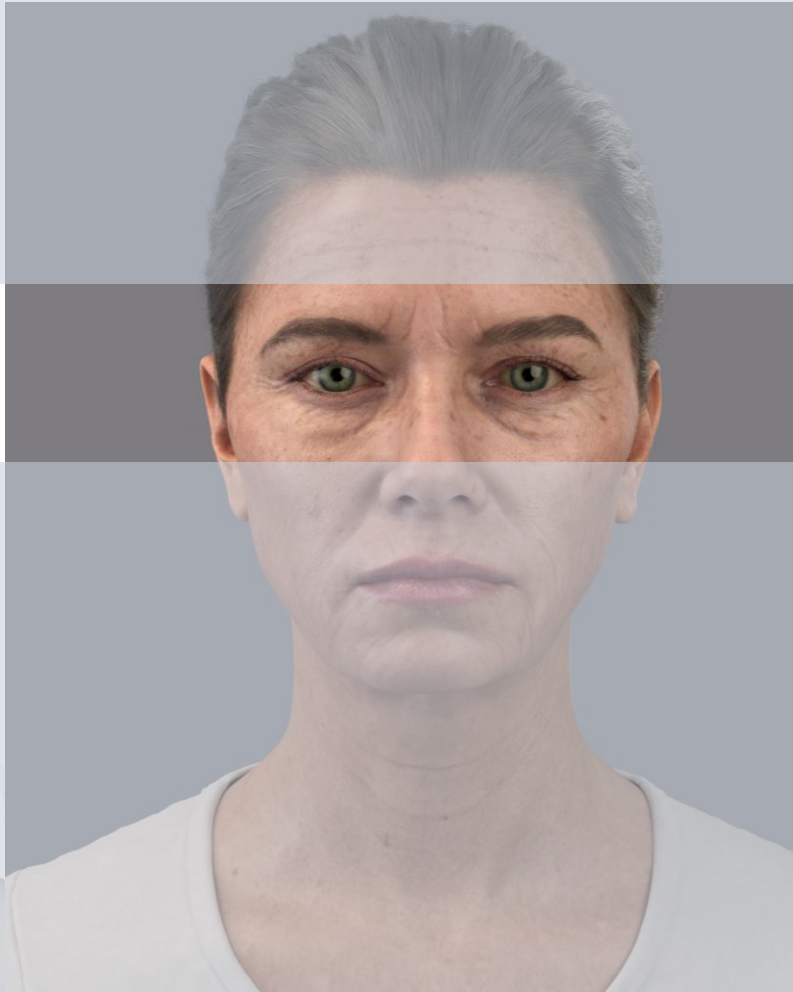
Under eye problems is a very common issue:

- 70% people feel they look more tired and older than they are due to under eye issues – Regardless of gender!
- 2 in 3 feel that looking tired and exhausted is most bothersome consequence of under eyes issues
- With early 40's being the age when most referred to when it became evident
- Almost 28% have already considered having treatment for their under eye issues

Emotional expressions and signs of ageing in the periorbital area



Angry look

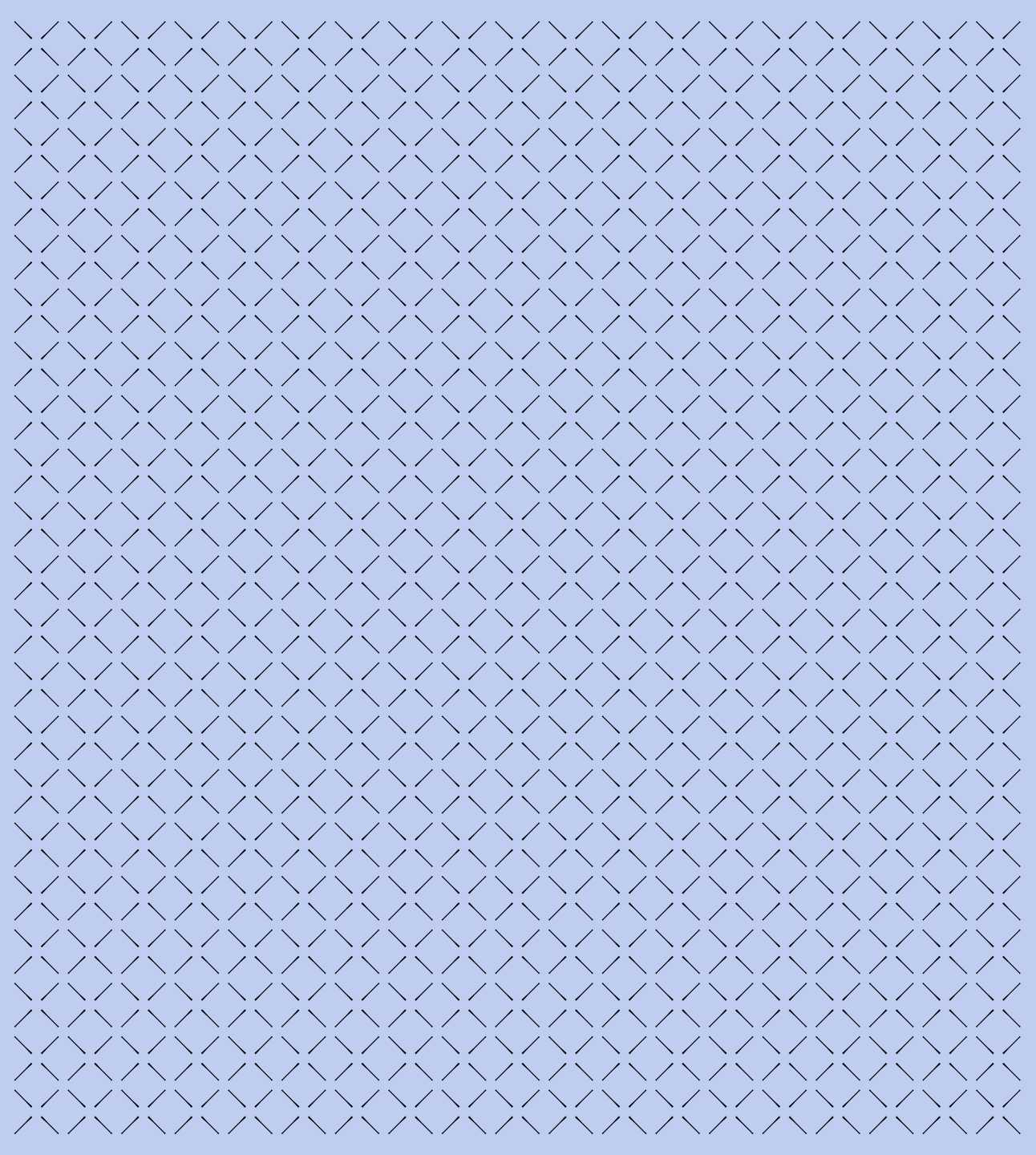


Tired look



Signs of ageing

Anatomy of the Tear Trough



Ageing process



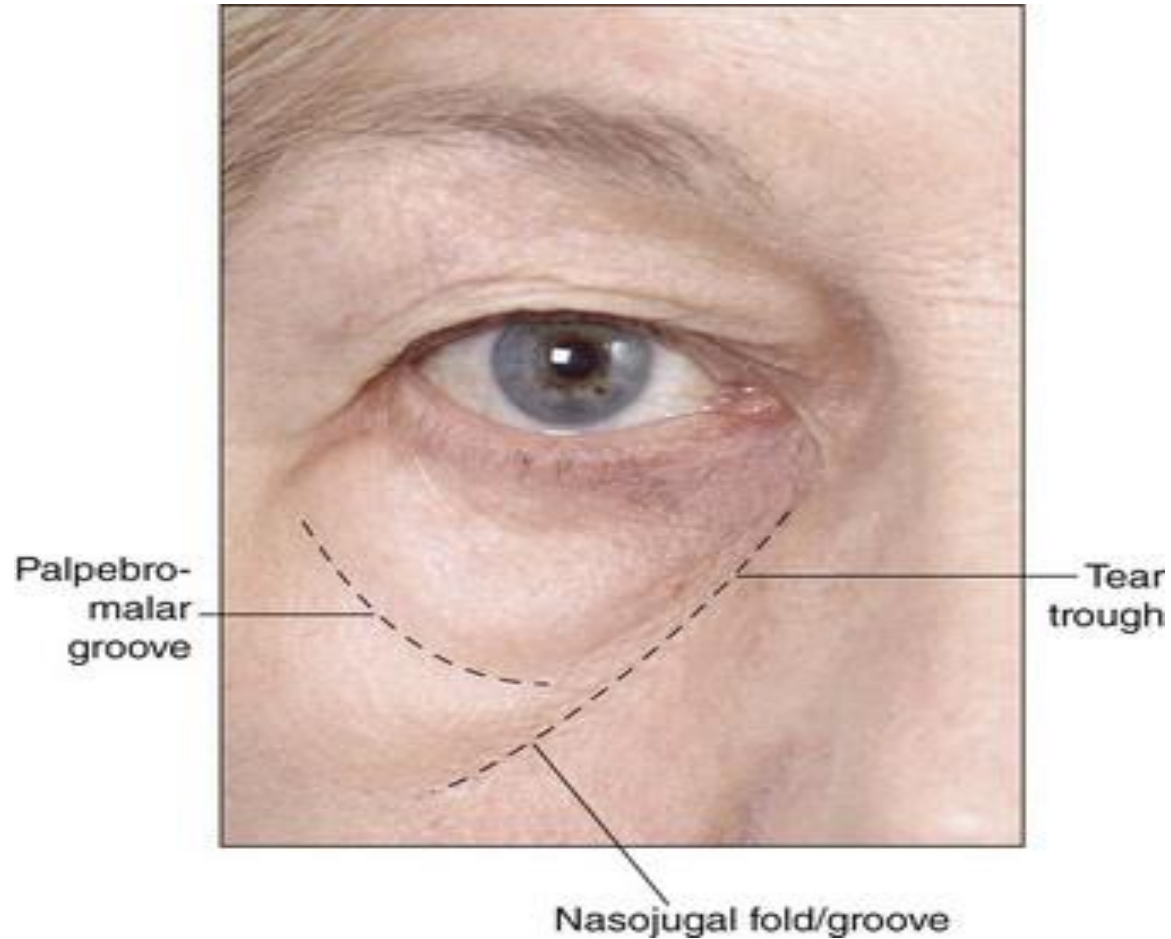
Dr Andreas Nikolis



Dr Andreas Nikolis

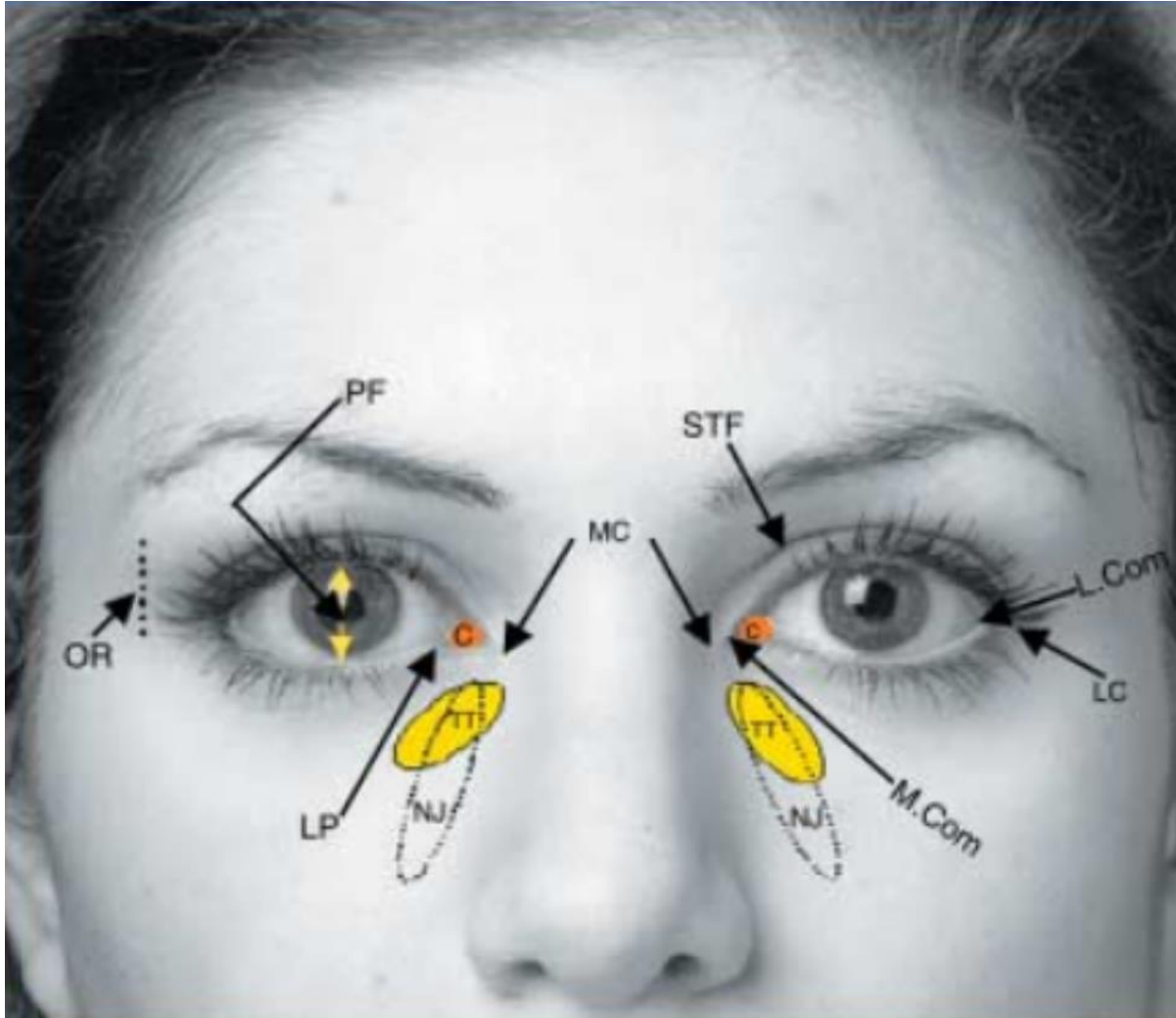
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Aesthetic description



The **tear trough** should be defined as the depression of the medial lower eyelid just lateral to the anterior lacrimal crest and limited in its inferior aspect by the inferior orbital rim.

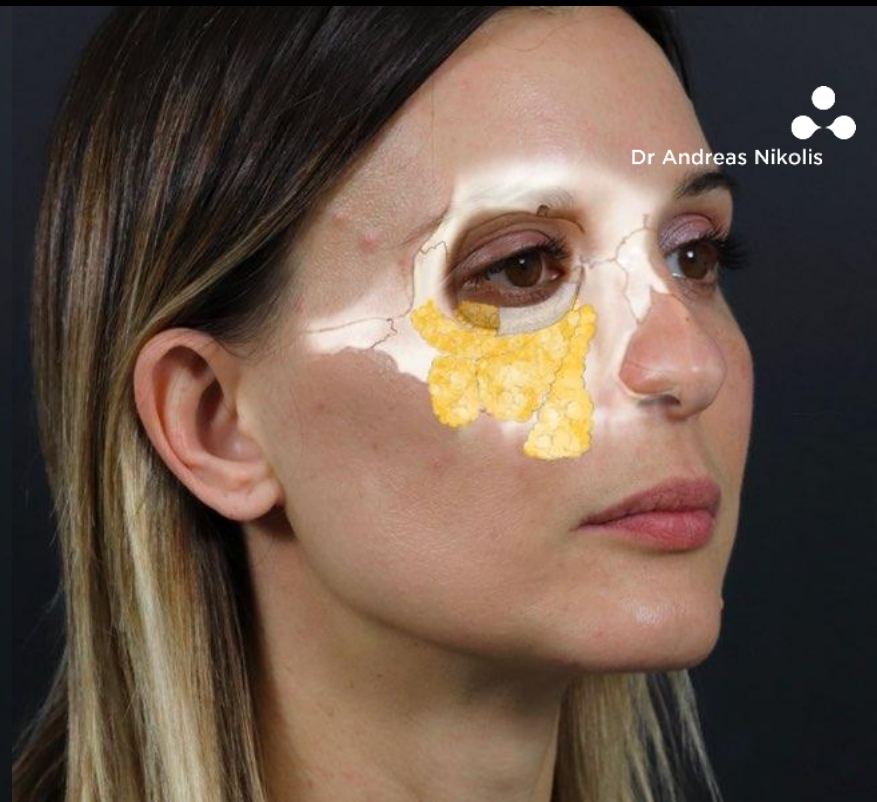
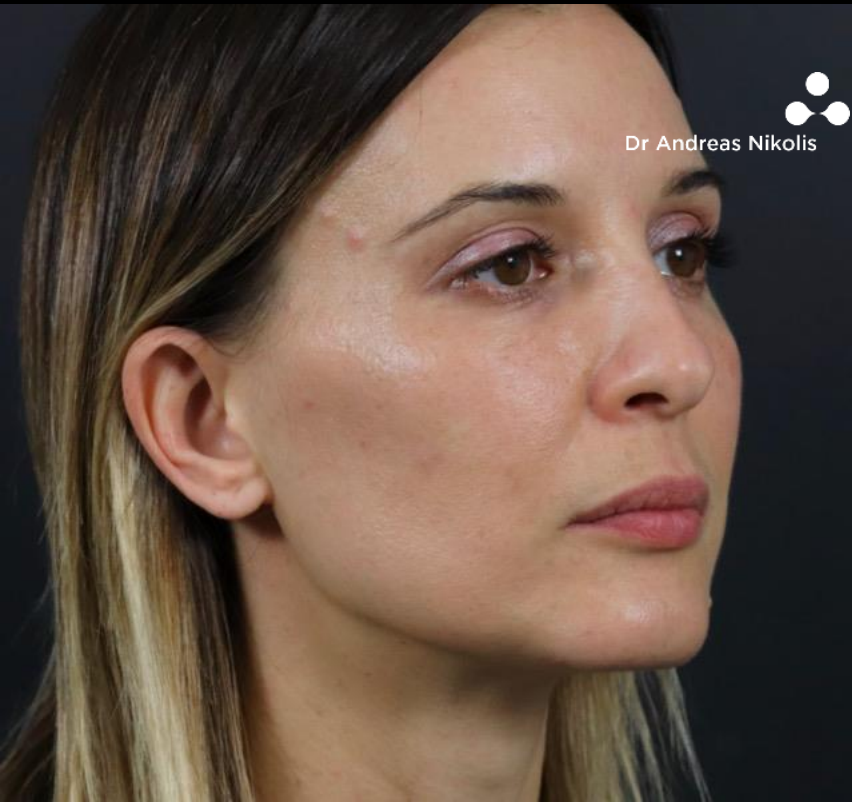
Topographic anatomy



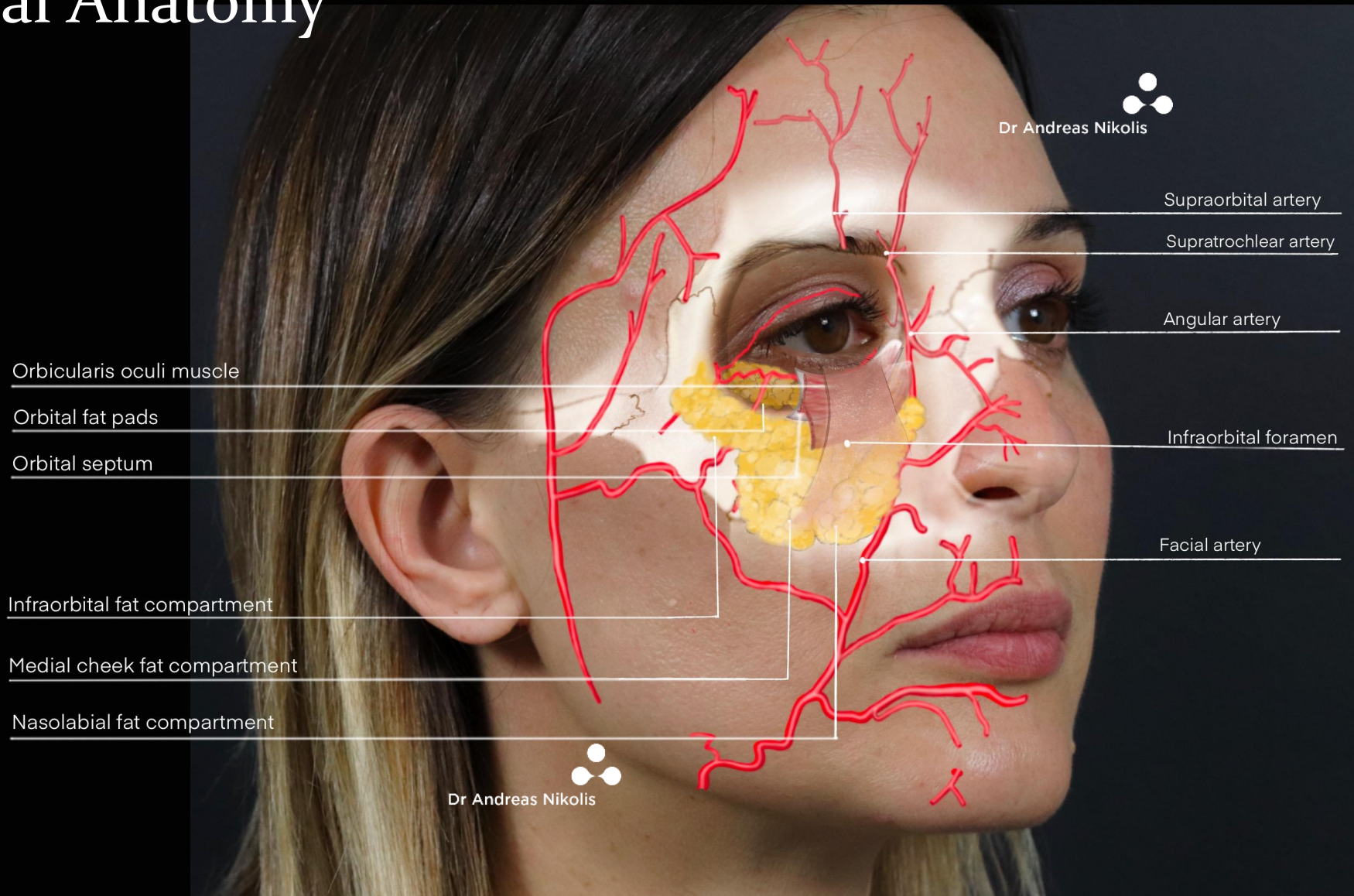
Anatomical definition of the tear trough.

- TT – Tear trough
- NJ – Nasojugal Groove
- C – Caruncle
- MC – Medial Canthus
- LC – Lateral Canthus
- L. Com – Lateral Commissure
- M. Com – Medial Commissure
- STF – Supra Tarsal Fold
- LP – Lacrimal Puncta
- OR – Orbital Rim

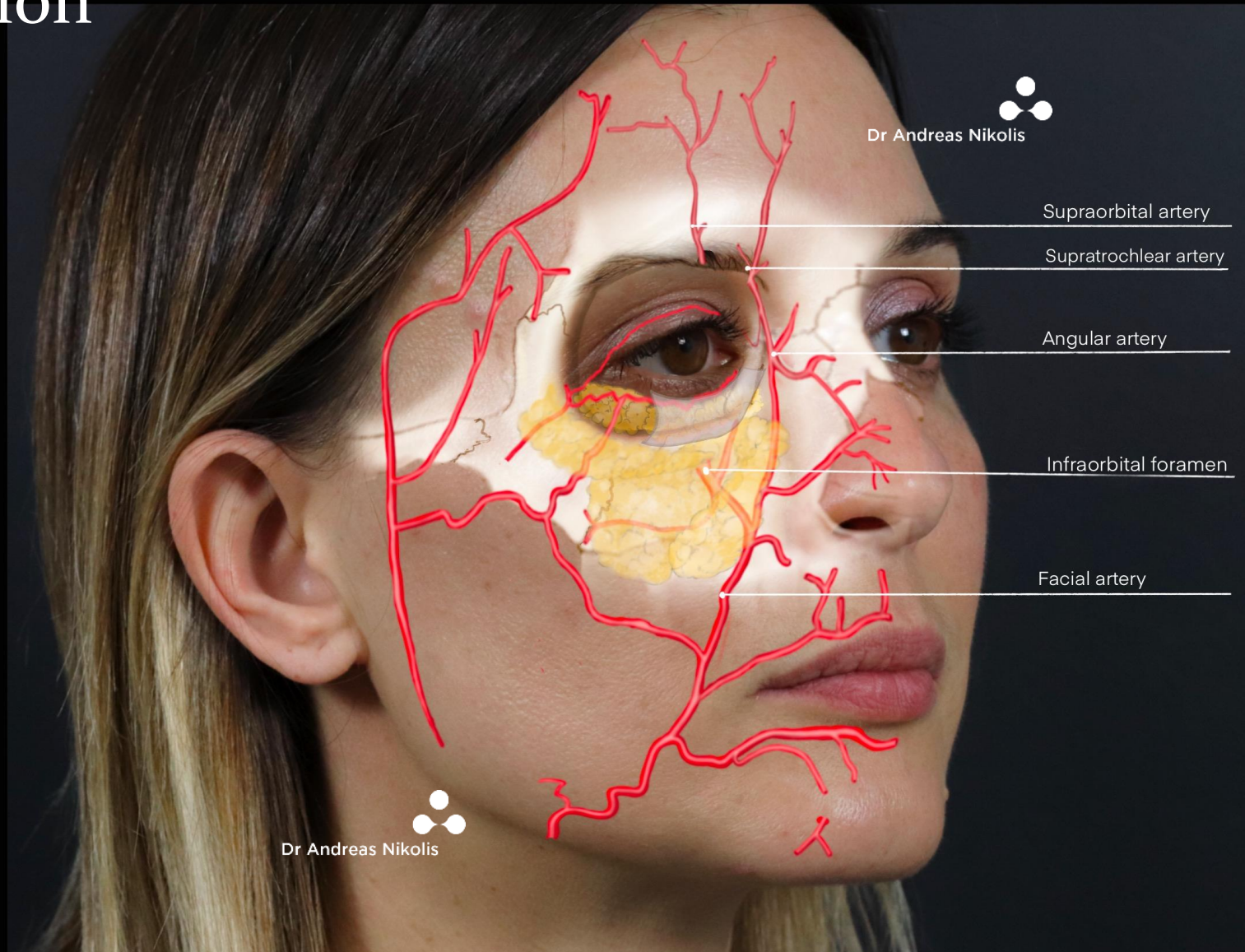
Fat pads



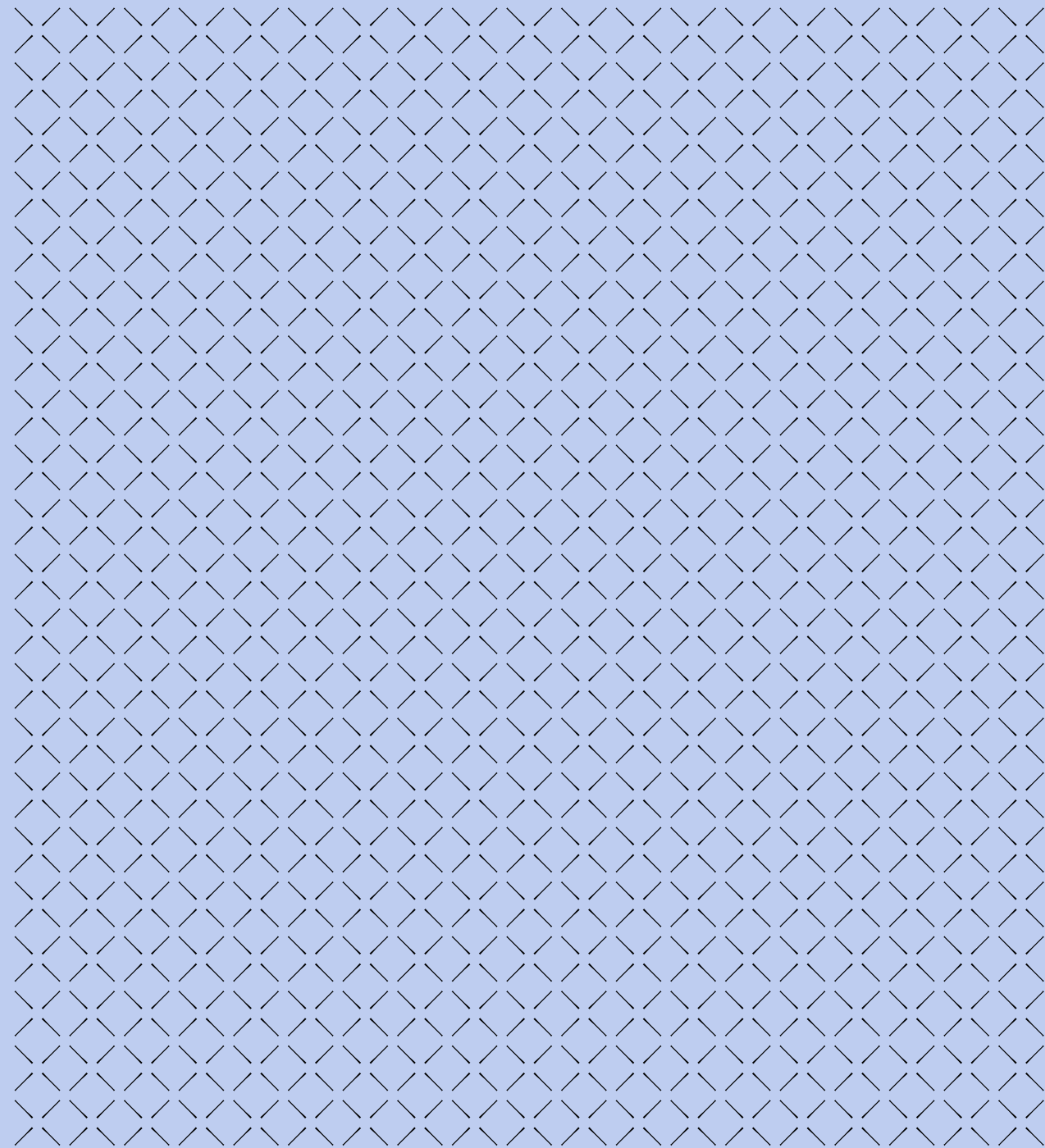
Structural Anatomy



Arterial irrigation



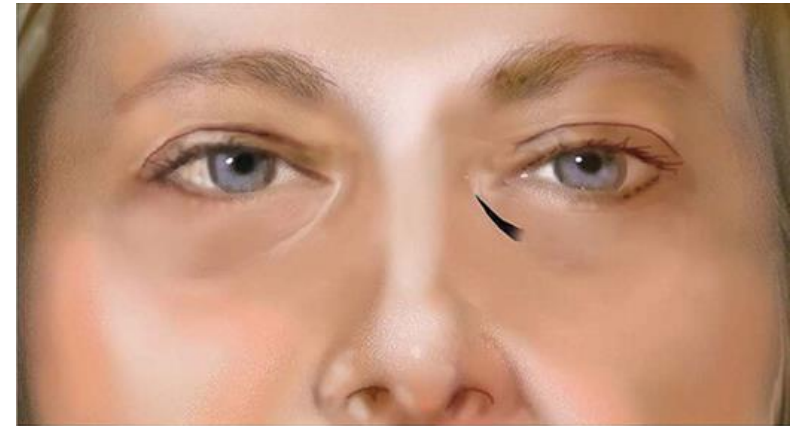
Assessment



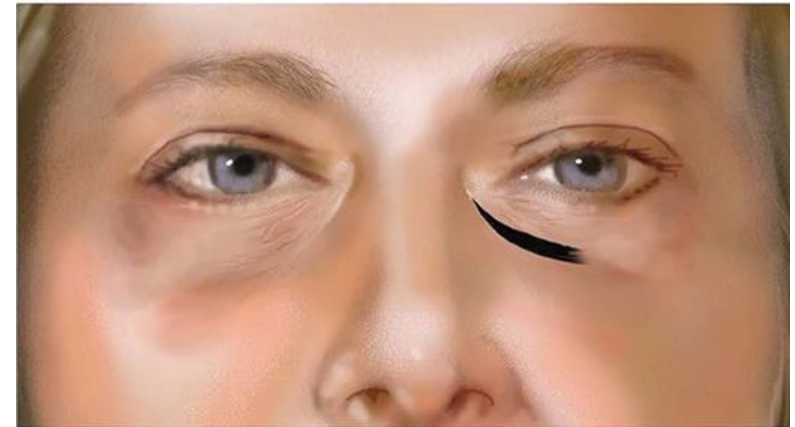
Clasification

In 2010, Hirmand proposed a classification system of the tear trough deformity based on clinical evaluation

- Class I patients have volume loss limited medially to the tear trough. These patients can also have mild flattening extending to the central cheek.
- Class II patients exhibit volume loss in the lateral orbital area in addition to the medial orbit, and they may have moderate volume deficiency in the medial cheek and flattening of the central upper cheek.
- Class III patients present with a full depression circumferentially along the orbital rim, medial to lateral.



Class I

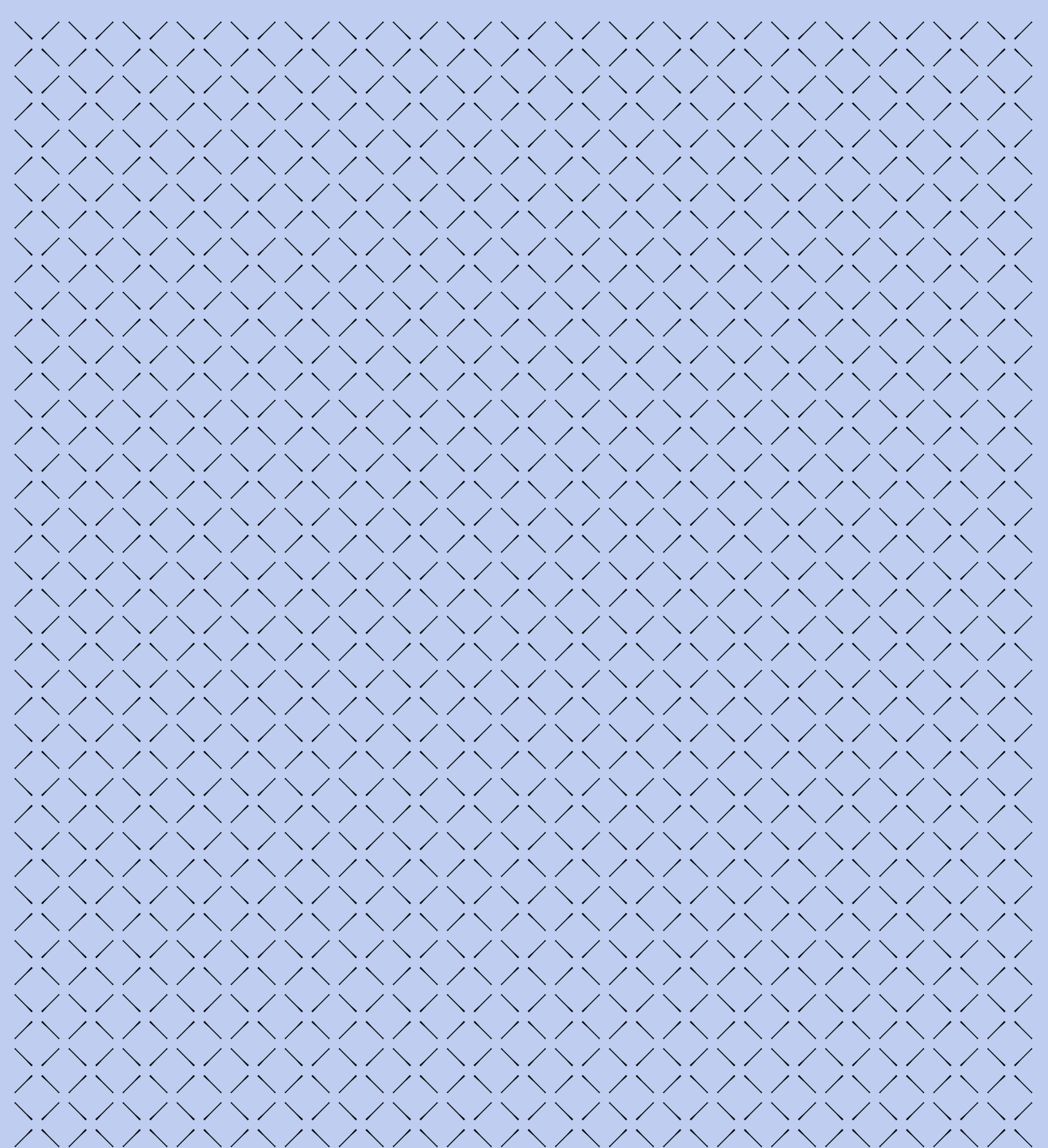


Class II



Class III

The science behind Restylane Eyelight



Restylane has two unique and complementary technologies

NASHA™ designed for Lifting & Precision

Higher G': Firmer gels where precision is needed



OBT™ designed for Contouring & Expression

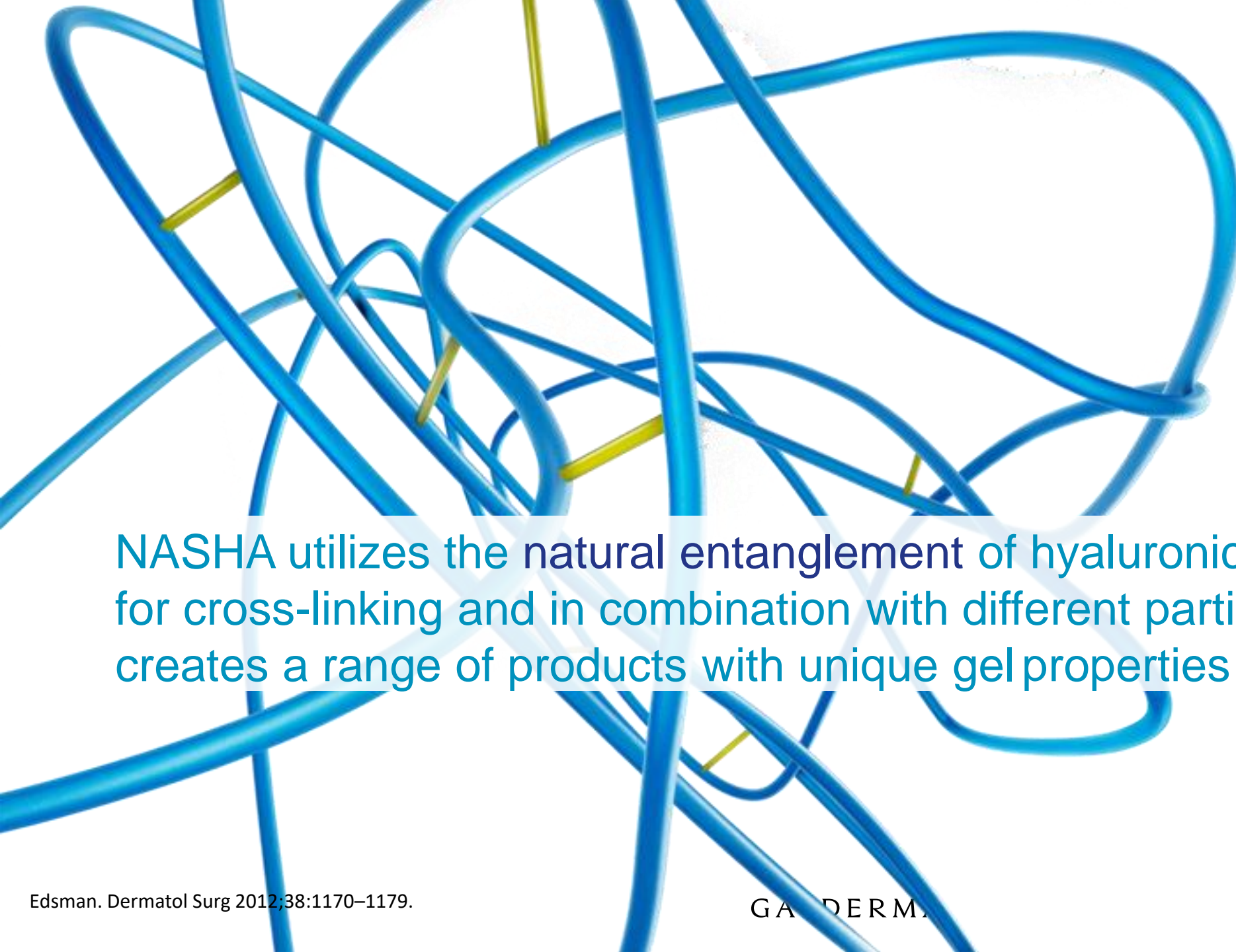
Lower G': Softer and flexible gels for contouring and volumization of the mid-face



Edsman. Dermatol Surg 2012;38:1170–1179.

Philipp-Dormston. Dermatol Surg. 2018;44(6):826-832.

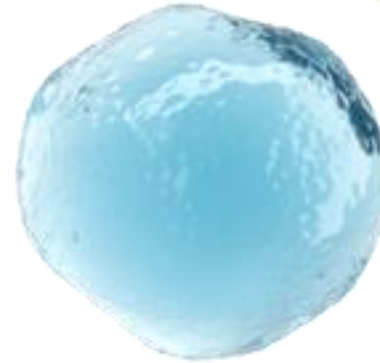
Öhrlund. J Cosmet Dermatol Sci Applic 2018;8(2):47–54;



NASHA utilizes the natural entanglement of hyaluronic acid strands for cross-linking and in combination with different particle sizes, creates a range of products with unique gel properties

NASHA technology provides:

- **LIFTING & PRECISION**
- Natural entanglement for minimal modification
- Firm gels
- **Targeted** product integration
- More **definition**
- Where **precision** is needed




LET'S DEHYDRATE **NASHA** vs OTHERS

Restylane
Lyft

Restylane
Eyelight

Softer fillers




Dr Andreas Nikolis

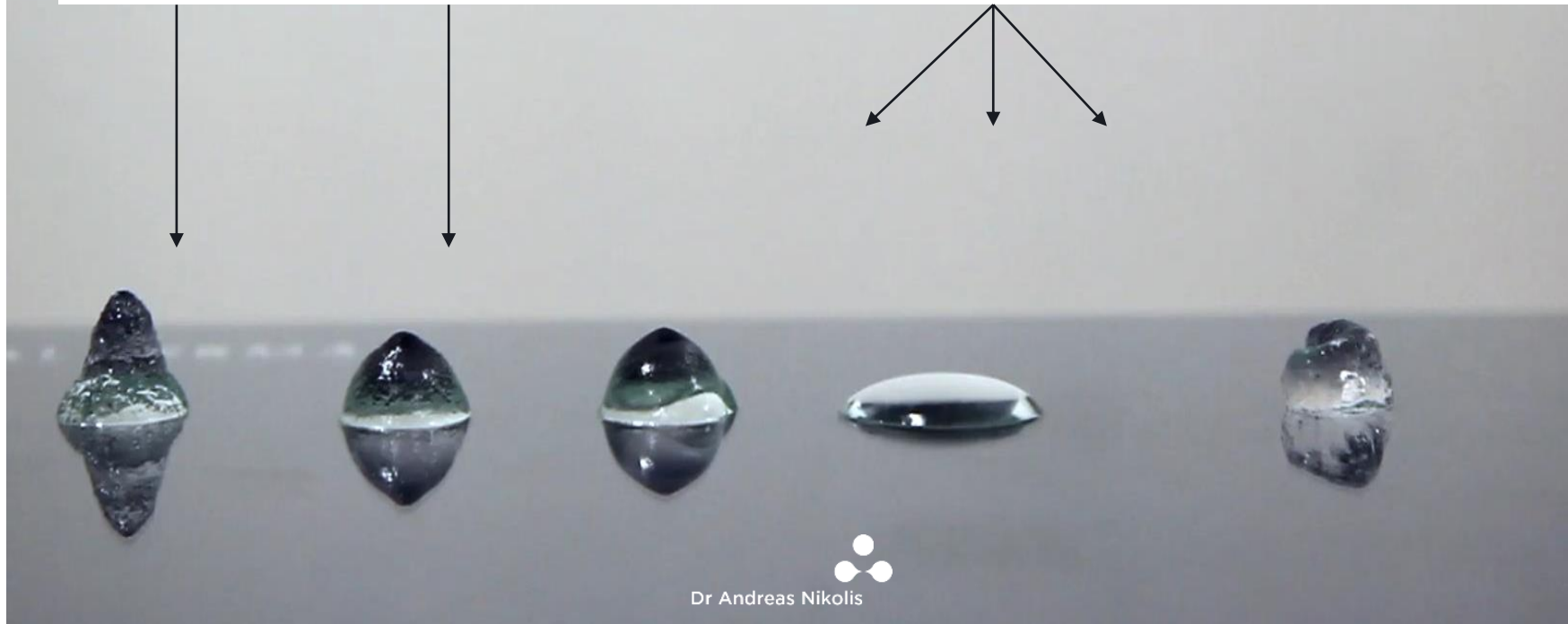
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LET'S REHYDRATE NASHHA vs OTHERS

Restylane
Lyft




Restylane
Eyelight

Softer fillers



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Treatment plans for periorbital region

TIRED LOOK	GRUMPY LOOK	AGING
<p>"It is a defect that I've always had and that I'd like not to have"</p>	<p>"People ask me if I am OK all the time..."</p>	<p>"When looking in the mirror, my tired eyes do not correspond to me feeling good"</p>
		
OBSERVATION		
<p>Mild to severe periorbital hollows</p>	<p>Mild to severe periorbital hollows Presence of crow's feet and glabellar lines</p>	<p>Mild to severe periorbital hollows Presence of crow's feet and glabellar lines Lack of volume in the midface and temples</p>
TREATMENT PLAN		
<p>● TT indication²²</p> <p><i>Restylane</i> INTEGRAL</p>	<p>● TT indication²²</p> <p><i>Restylane</i> INTEGRAL</p> <p>● crows feet & deep glabellar lines^{24,25}</p> <p>Azzalure[®]</p>	<p>● TT indication²²</p> <p><i>Restylane</i> INTEGRAL</p> <p>● crows feet & deep glabellar lines^{24,25}</p> <p>Azzalure[®]</p> <p>● temple & mid face^{26,27}</p> <p><i>Restylane</i> VOLUME</p>

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Restylane OBT™

Optimal Balance Technology™ (OBT)

- A range of softer gels with different degrees of cross-linking and controlled particle sizing
- Distributed product integration in the tissue
- Concentration of 20 mg/ml stabilized hyaluronic acid



The OBT™ Technology

GAIN

Cross-linking

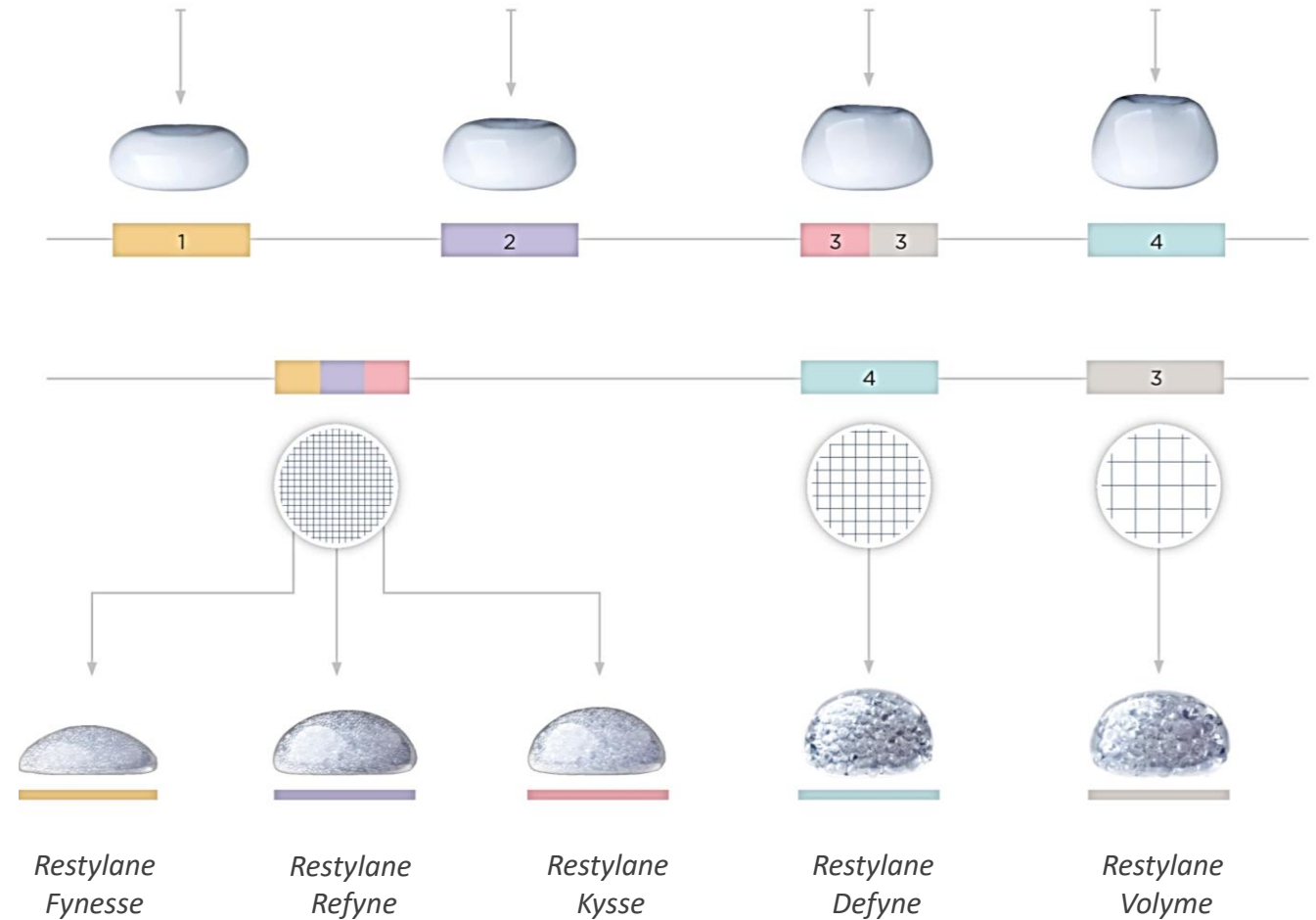
Four degrees of cross-linking for different levels of resistance, from very soft to firm

Controlled particle sizing

Three degrees of gel particle sizing

Different gel textures

Different cross-linking and controlled particle sizing result in distinct gel textures for different lifting capacities



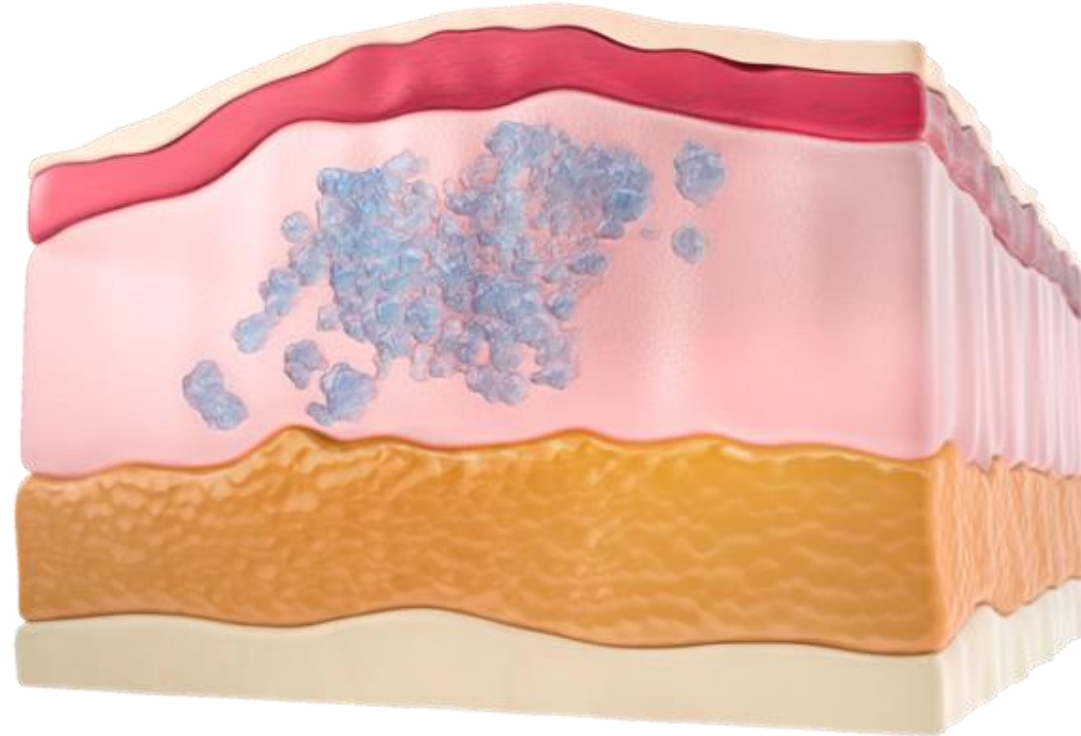
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OBT Gels – Dynamic Movement & Natural Expression

GAIN

When injected into the dermal layer, the properties of OBT allow the gel to move with the **dynamic movements** of the face^{1,2}

This allows for **real expression**, especially for patients with thinner tissue coverage^{1,2}



OBT, Optimal Balance Technology.

1. Philipp-Dormston WG, et al. *Dermatol Surg.* 2018;44(6):826–832; 2. Solish N, et al. *J Cosmet Dermatol.* 2019;18(3):738–746.

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OBT – Contouring and Preserving Natural Expressions

GAIN

OBT technology can be used to:

- Create **contouring** and **add volume** in the midface
- Facilitate **natural expression**

Ideal for **dynamic treatment areas**

Natural Expression



Contour and Volume

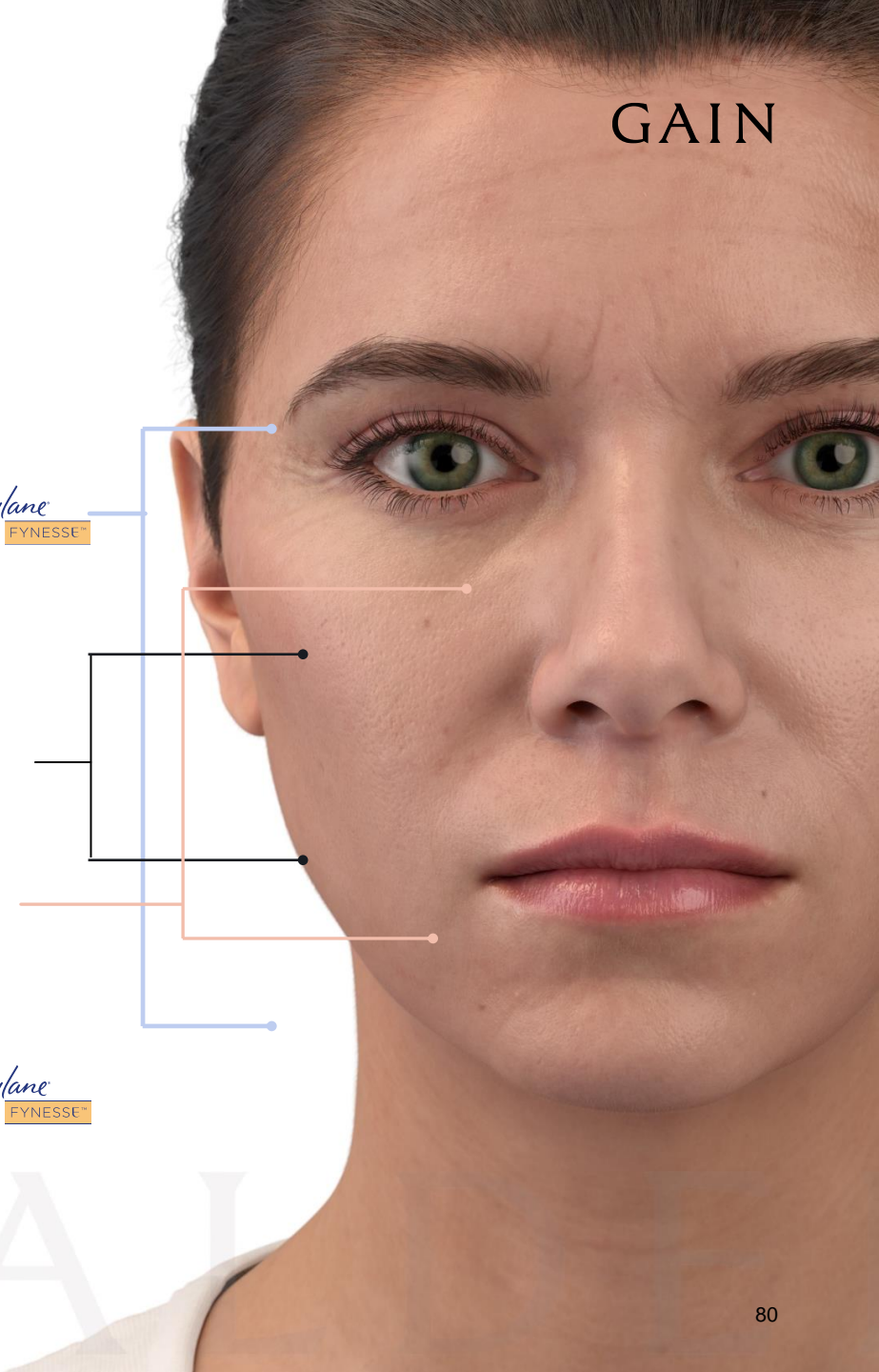


Dynamic treatment areas

Lips, nasolabial folds, and marionette lines

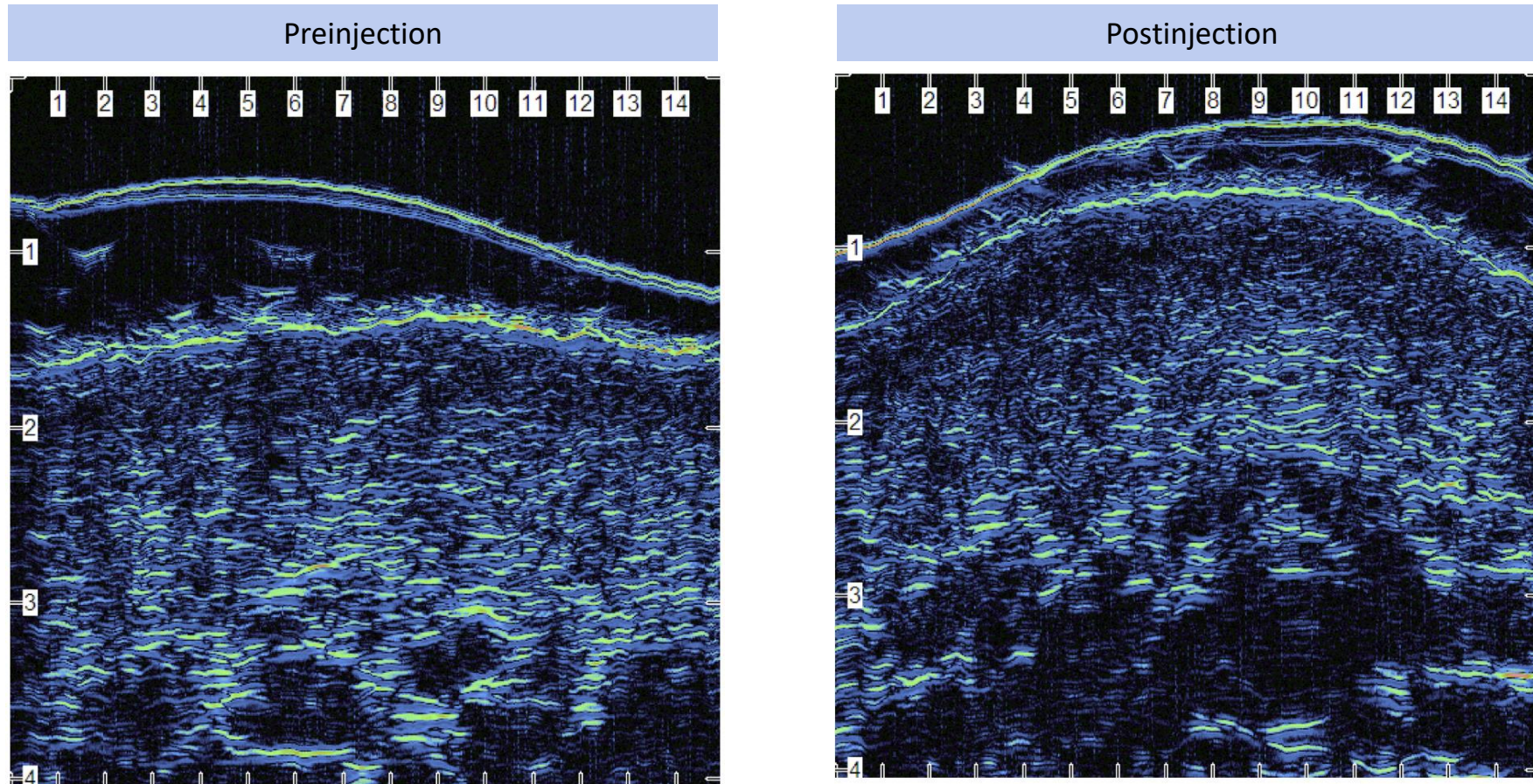


GALDERMA



OBT Technology¹

GAIN



1. Nikolis A, et al. *Aesthet Surg J Open Forum*. 2020;2(1):ojaa005. doi: 10.1093/asjof/ojaa005.

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Restylane®

VOLYME™

RESTYLANE® VOLYME™ ADDS
NATURAL-LOOKING VOLUME

August 2020

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Restylane Volyme Core Claims

Enhances natural volume and fullness

Patients reported a ≥ 1 -grade improvement on the Volume Loss Scale

Specific gel formulation to deliver natural-looking volume

*Large gel particle size designed to correct facial volume loss
Tissue integration for creating natural results*

Favorable safety profile based on unrivalled experience

Well-tolerated with a safety profile built on clinical data

Delivers lasting results and high patient satisfaction

*Volumizing effects maintained for up to 18 months
Long-term results that leave 95% of patients satisfied*

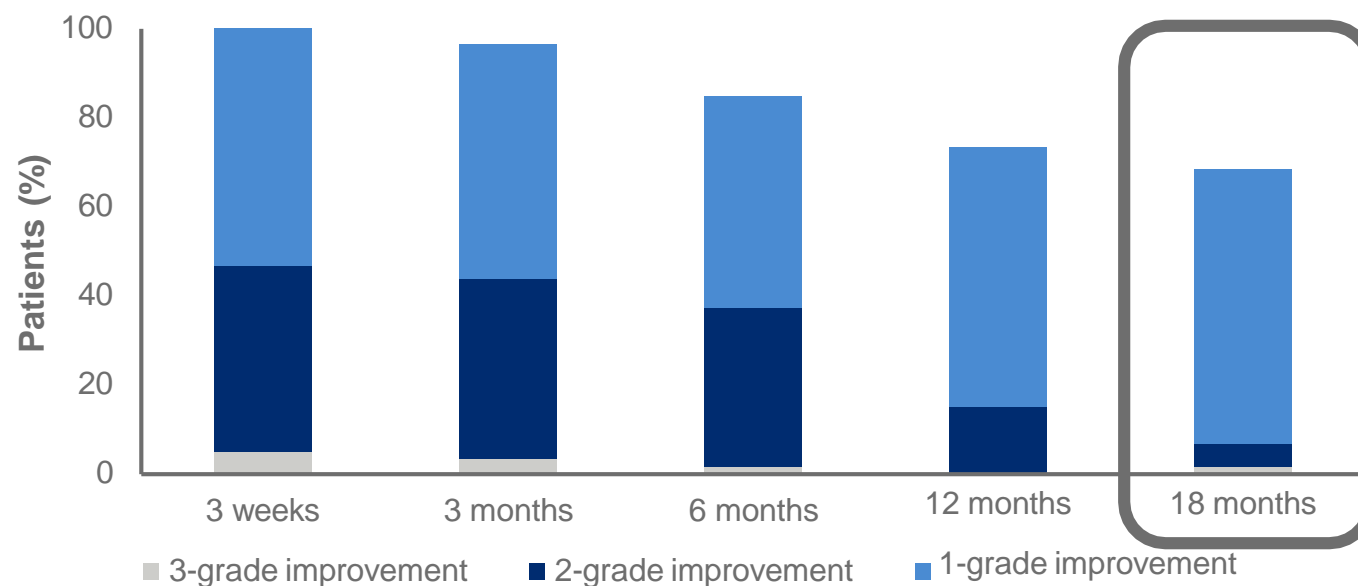
Enhances natural volume and fullness

Patients reported a ≥ 1 -grade improvement on the Volume Loss Scale¹

Supporting information:*

Three weeks after treatment, **100% of patients** had a ≥ 1 -grade improvement in the full-face Volume Loss Scale (VLS)¹

- **68% of patients** had a ≥ 1 -grade improvement in VLS observed for the full face, 18 months after treatment¹



VLS, Volume Loss Scale.

*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

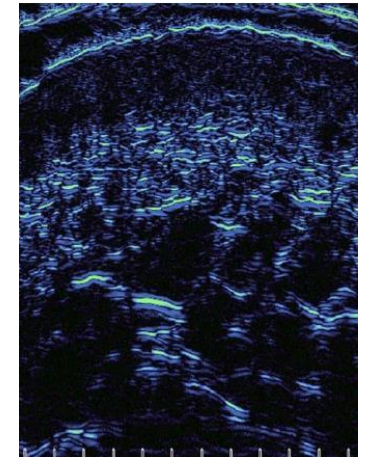
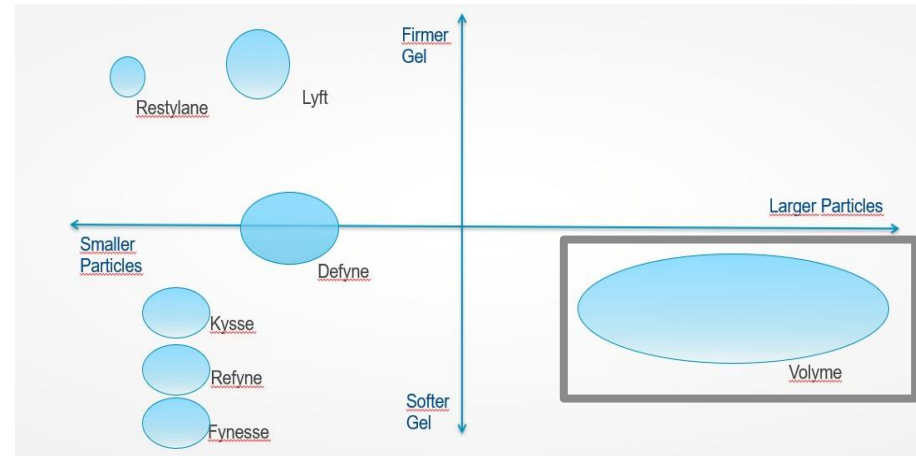
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Specific gel
formulation to deliver
natural-looking volume

Large gel particle size
designed to correct facial
volume loss¹⁻⁴

Supporting information:

Restylane Volyme has the **largest gel particle size** of all the products in the Restylane dermal filler range¹



Ultrasound image from the cheek
4 weeks after treatment with
Restylane Volyme²

As a result, Restylane Volyme has a **strong volumizing effect** for a fuller and more youthful appearance²⁻⁴

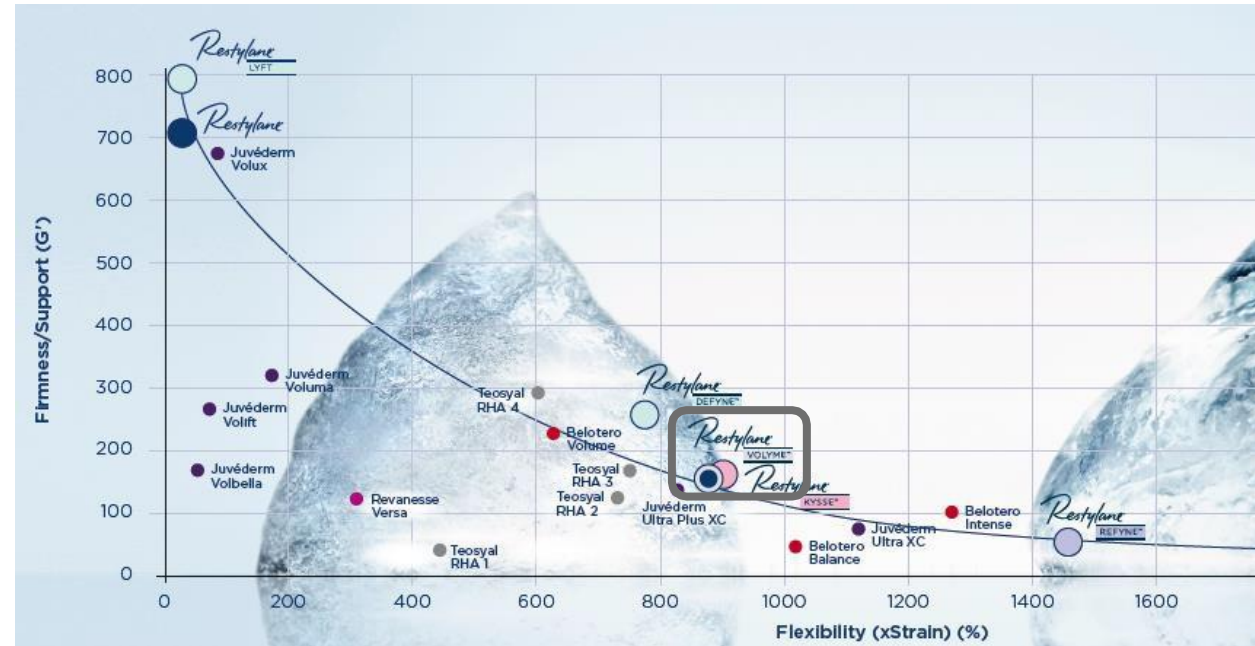
1. Segura S et al. *J Drugs Dermatol* 2012;11(1 Suppl):S5-S8; 2. Nikolis A et al. *Aesthet Surg J Open Forum* 2020;2(1):ojaa005;
3. Talarico S et al. *Dermatol Surg* 2015;41(12):361-1369; 4. Kestemont P et al. *J Drugs Dermatol* 2012;11(1 Suppl):S9-S16.

Specific gel
formulation to deliver
natural-looking volume

Tissue integration for creating
natural results¹⁻⁵

Supporting information:

Restylane Volyme is a **soft and flexible** OBT™ gel (high xStrain) that distributes naturally within the tissue after injection^{1,2}



As a result, Restylane Volyme is ideally suited for treating areas with thin tissue coverage and is intended for **adding natural-looking volume and creating fullness**³⁻⁵

OBT, Optimal Balance Technology.

1. Data on file (MA-43049); 2. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 3. Nikolis A *et al. Aesthet Surg J Open Forum* 2020;2(1):ojaa005; 4. Kestemont P *et al. J Drugs Dermatol* 2012;11(1 Suppl):S9–S10; 5. Galderma *et al. Dermatol Surg* 2015;41(12):361–369.

**Favorable safety profile
based on unrivalled
experience**

*Well-tolerated with a safety
profile built on clinical data¹*

Supporting information:

Restylane Volyme has been investigated in two interventional open-label studies* and in one prospective multicenter, cross-sectional, real-practice survey¹



*In one interventional open-label study, Restylane Volyme was used in combination with other products.

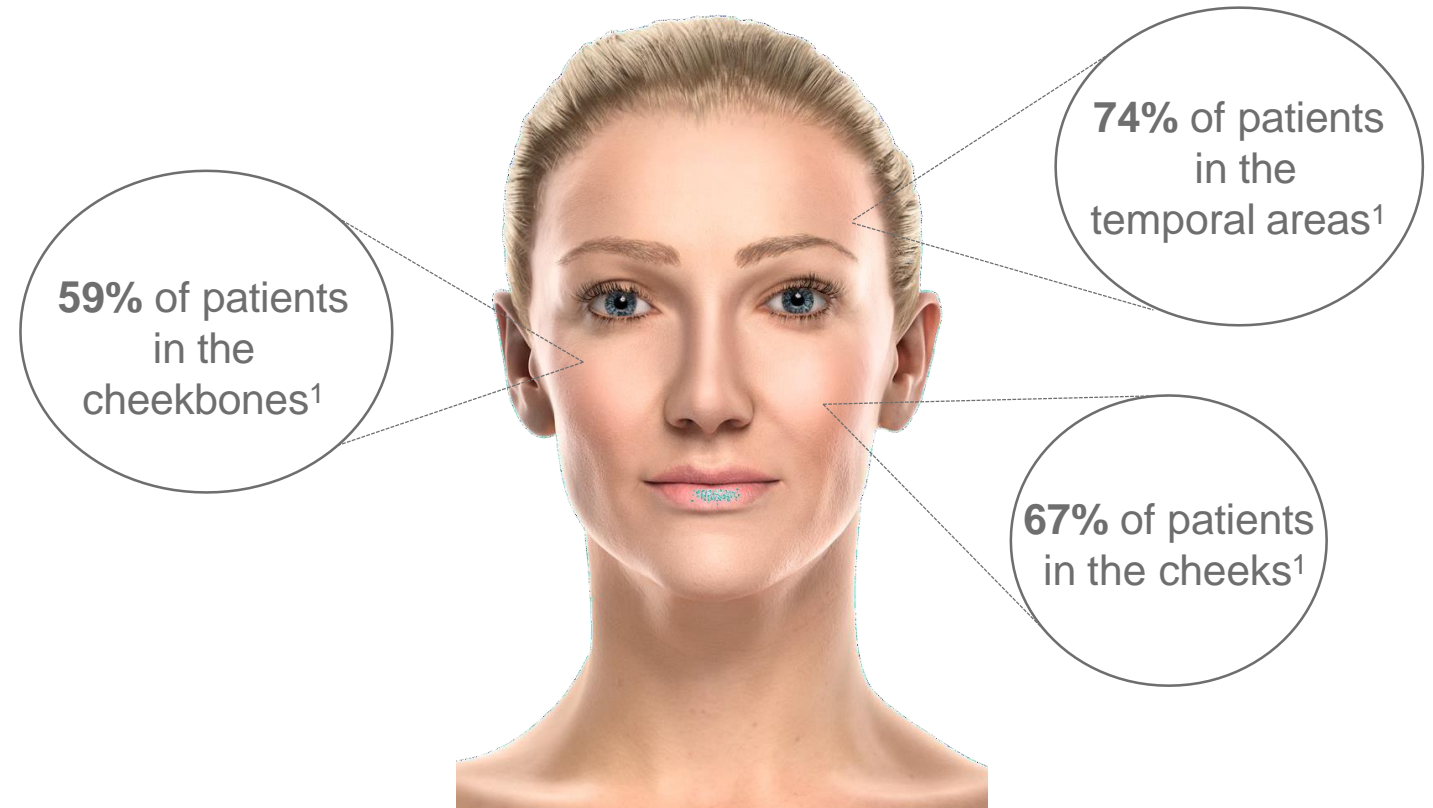
1. Data on file (MA-22124).

Delivers lasting results and high patient satisfaction

*Volumizing effects maintained for
up to 18 months¹*

Supporting information:*

A ≥1-grade improvement on the VLS was maintained at 18 months post-treatment with Restylane Volyme for...



VLS, Volume Loss Scale.

*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

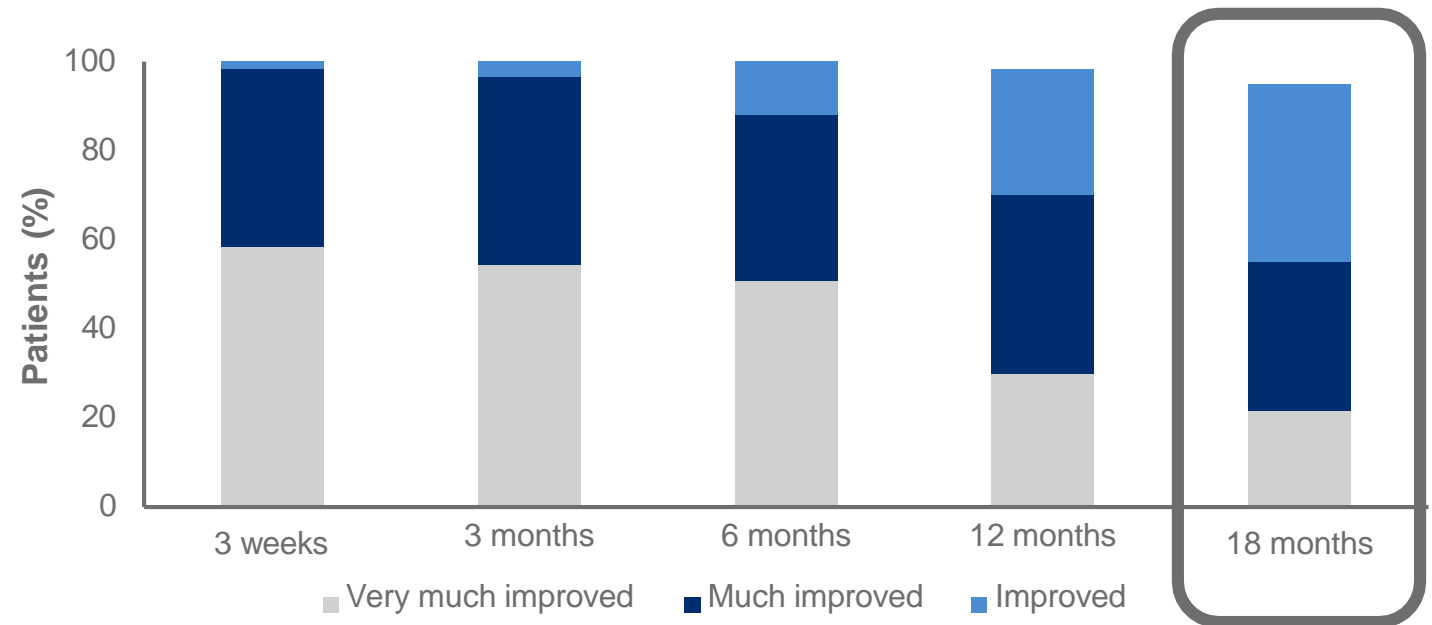
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Delivers lasting results
and high patient
satisfaction

*Volumizing effects maintained for
up to 18 months¹*

Supporting information:*

At 18 months, **95% of patients** had improvements on the Global Aesthetic Improvement Scale (GAIS) for the full face, as assessed by investigators¹



GAIS, Global Aesthetic Improvement Scale.

*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

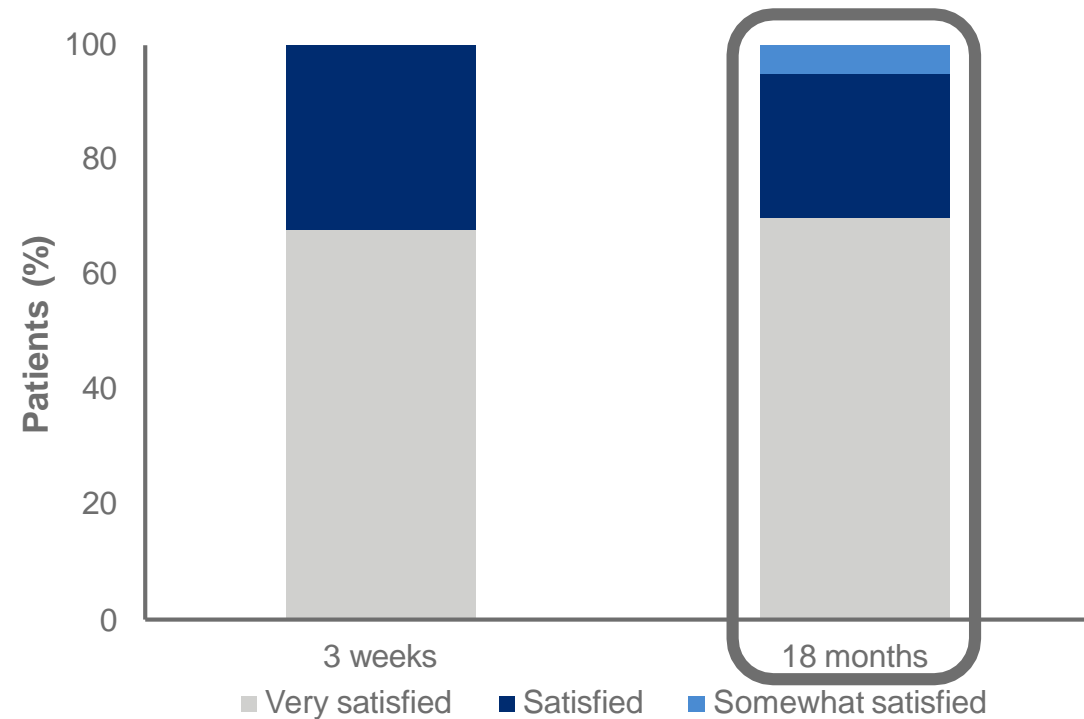
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Delivers lasting results and high patient satisfaction

Long-term results that leave 95% of patients satisfied¹

Supporting information:*

95% of patients were satisfied with their full-face aesthetic outcome 18 months after treatment with Restylane Volyme¹



*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

Delivers lasting results and high patient satisfaction

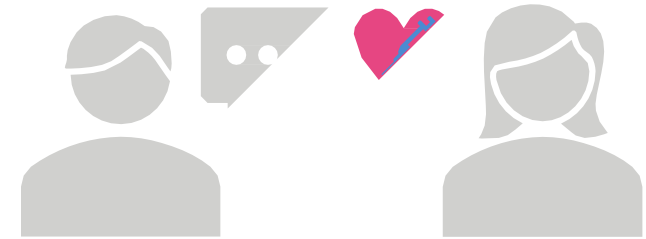
Long-term results that leave 95% of patients satisfied¹

Supporting information:*

18 months after treatment with Restylane Volyme...

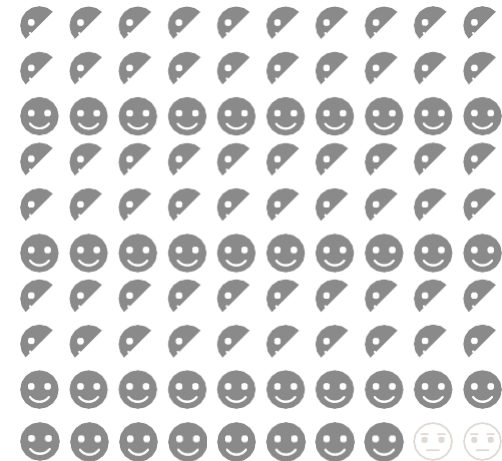
100%

would recommend the treatment to family and friends and would receive the treatment again¹



98%

were either **satisfied** or **very satisfied** with the durability of the results¹



*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

Delivers lasting results
and high patient
satisfaction

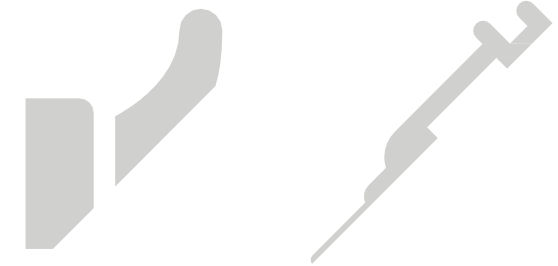
*Long-term results that leave 95%
of patients satisfied¹*

Supporting information:*

18 months after treatment with Restylane Volyme...

95%

were either **satisfied or very satisfied** with the comfort of injections¹



78%

reported the treatment had given them **more self-esteem and confidence**¹



*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

Restylane[®]

REFYNE[™]

RESTYLANE[®] REFYNE[™] FILLS
LINES AND WRINKLES

August 2020



 GALDERMA

Restylane Refyne Core Claims

Smooth away lines and wrinkles for natural and lasting results

*Naturally integrates into the tissue for fine corrections
Refined results that last for up to 18 months with one retreatment*

Our most flexible OBT™ gel for refined and tailored results

Smooth and flexible gel to maintain facial expression

Favorable safety profile based on unrivalled experience

Well tolerated with a safety profile built on robust clinical data

Results that come recommended

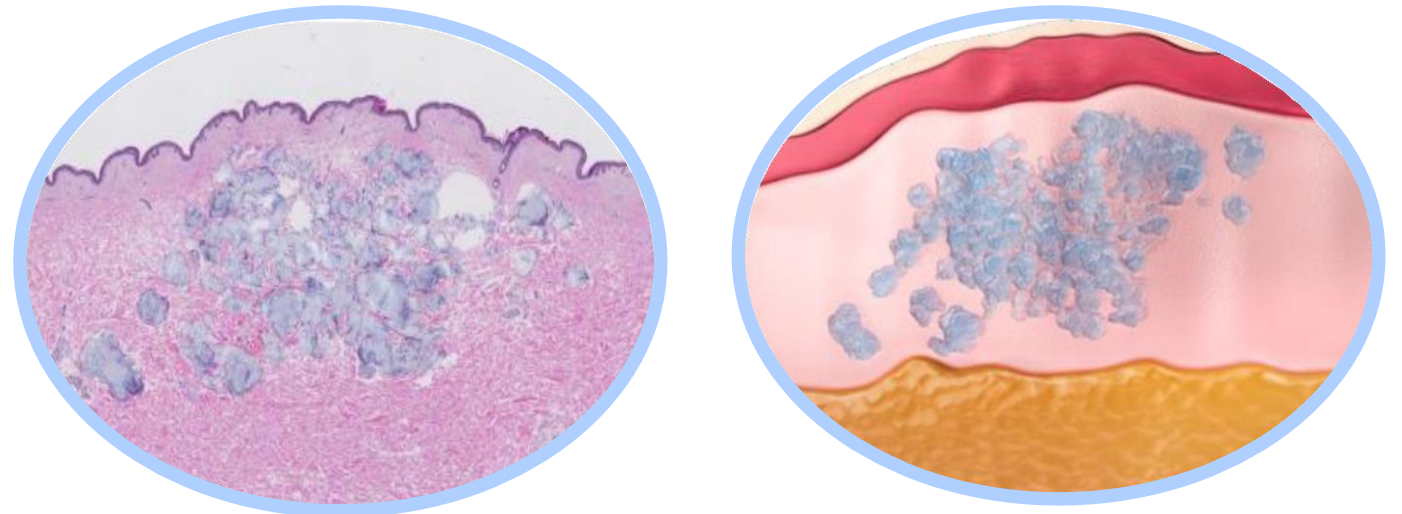
Results that deliver high patient and HCP satisfaction

Smooth away lines and wrinkles for natural and lasting results

Naturally integrates into the tissue for fine corrections¹⁻⁵

Supporting information:

Restylane Refyne is a **soft and flexible** gel (high xStrain) that distributes naturally within the tissue after injection, filling lines and moderate wrinkles in **dynamic treatment areas** for a **smooth finish**^{1,2}



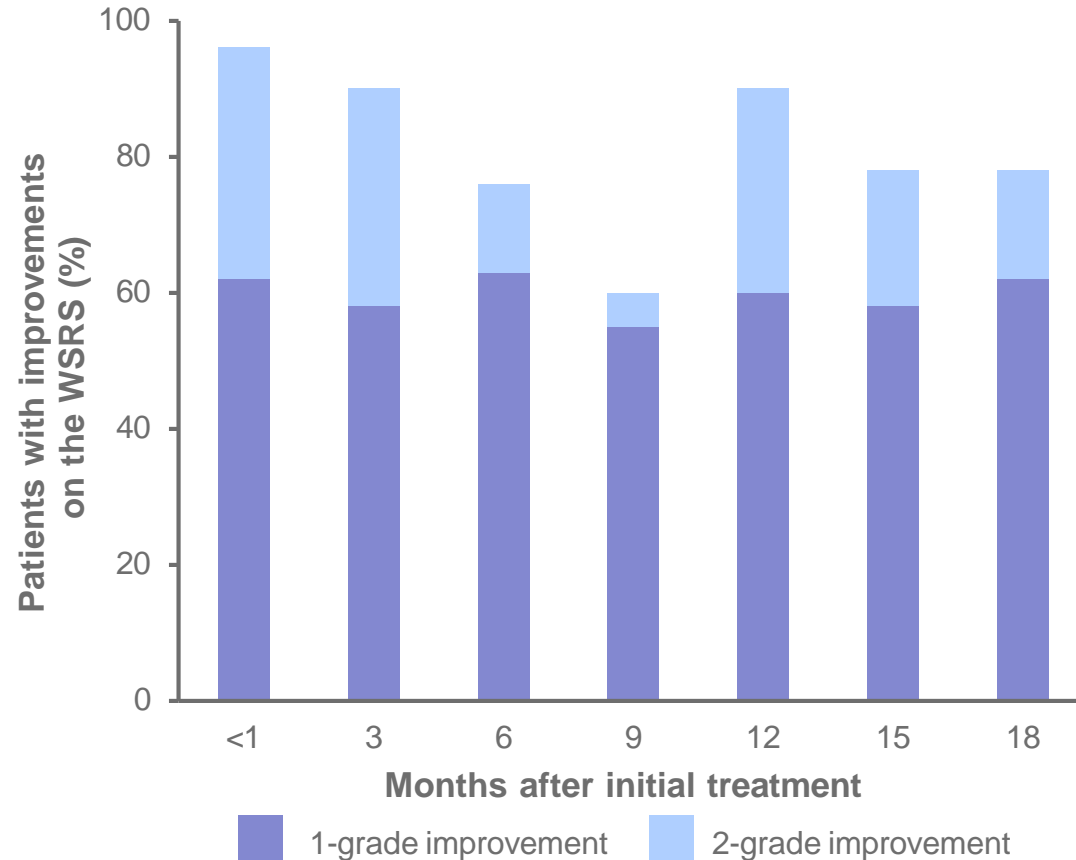
Restylane Refyne is tailored for patients with **thinner tissue coverage** or where a more **subtle treatment effect** is desired^{3,4}

Smooth away lines and wrinkles for natural and lasting results

Refined results that last for up to 18 months with one retreatment¹

Supporting information:

>70% of patients had at least a 1-grade improvement on the **Wrinkle Severity Rating Scale (WSRS)** at 18 months following treatment of nasolabial folds (NLFs) (with retreatment at 9 months)^{1*}



NLF, nasolabial fold; WSRS, Wrinkle Severity Rating Scale.

*Investigator evaluation. The responder rate based on subjects' assessment of WSRS was in keeping with that of the blinded evaluator.

1. Rzany B *et al. Dermatol Surg* 2017;43(1):58–65.

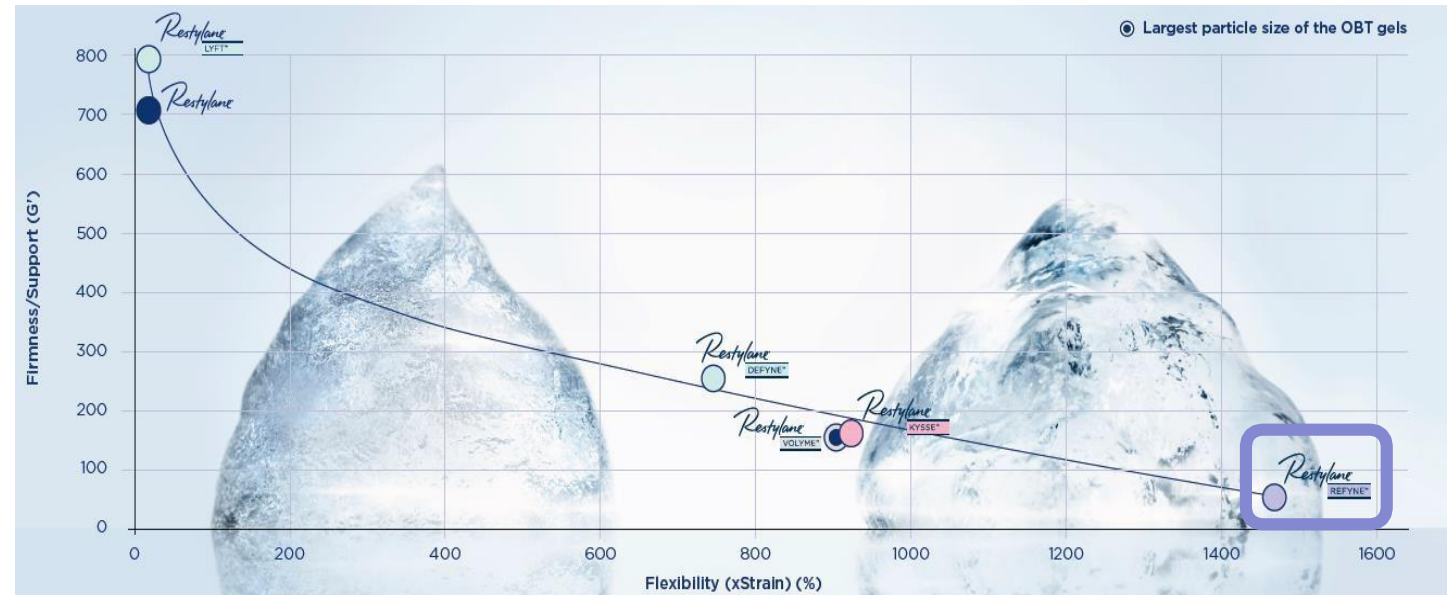
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Our most flexible OBT gel for refined and tailored results

Smooth and flexible gel to maintain facial expression¹⁻⁷

Supporting information:

Restylane Refyne has the **highest flexibility** (xStrain) of all Restylane HA fillers, facilitating **dynamic movement and facial expression**¹⁻⁴



HA, hyaluronic acid; OBT, Optimal Balance Technology.

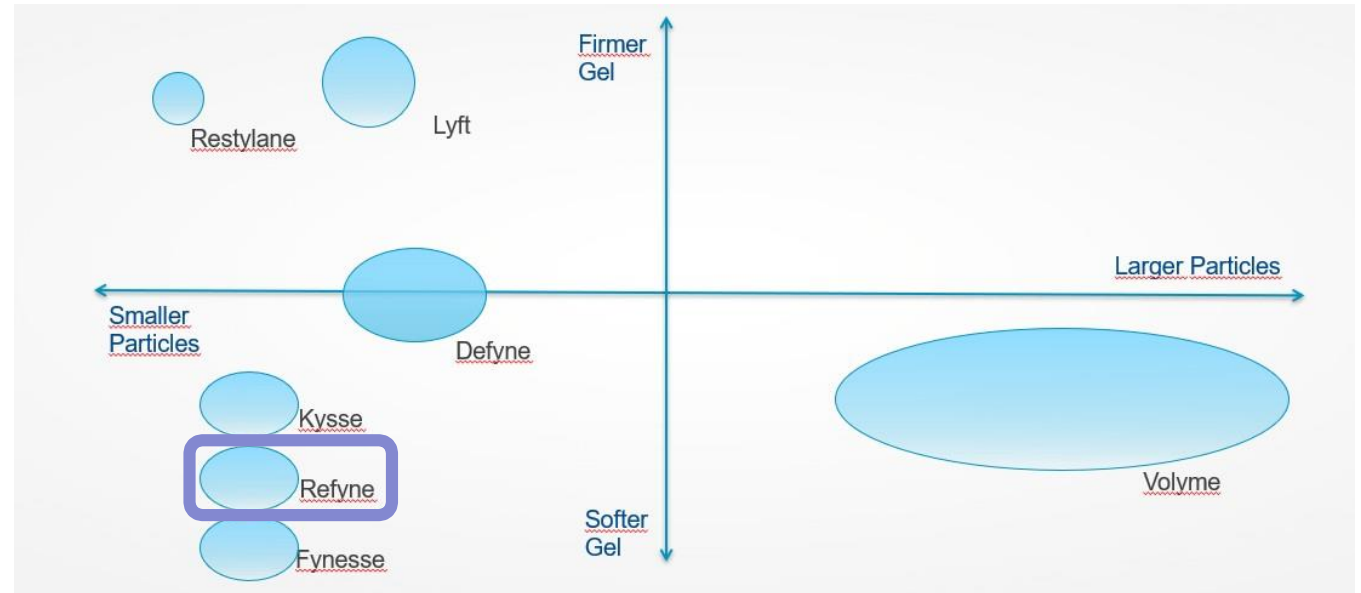
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Our most flexible OBT gel for refined and tailored results

Smooth and flexible gel to maintain facial expression¹⁻⁷

Supporting information:

Restylane Refyne has the **equal smallest gel particle size** of any product in the Restylane OBT filler range⁴



This allows natural tissue integration and dispersal following injection, avoiding lumps and bumps for a **refined result**^{4,5}

HA, hyaluronic acid; OBT, Optimal Balance Technology.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832; 3. Solish N *et al. J Cosmet Dermatol* 2019; 18(3):738–746; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5–S8; 5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e–305e; 7. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606.

Our most flexible OBT gel for refined and tailored results

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Supporting information:*

Older individuals display higher amounts of **facial strain** during dynamic expression⁶



Objective facial dynamic results (3D stereophotogrammetry) at baseline and after treatment with Restylane Defyne⁶

After treatment with Restylane Refyne, the amount of strain exerted is reduced, helping to **restore a youthful strain profile⁶**

NLF, nasolabial fold; OBT, Optimal Balance Technology.

*Patients received bilateral treatment with Restylane Refyne, Restylane Defyne™, or both in the NLFs and marionette lines. The degree of facial strain was then assessed by three-dimensional digital stereophotogrammetry at baseline and 42 days after treatment.

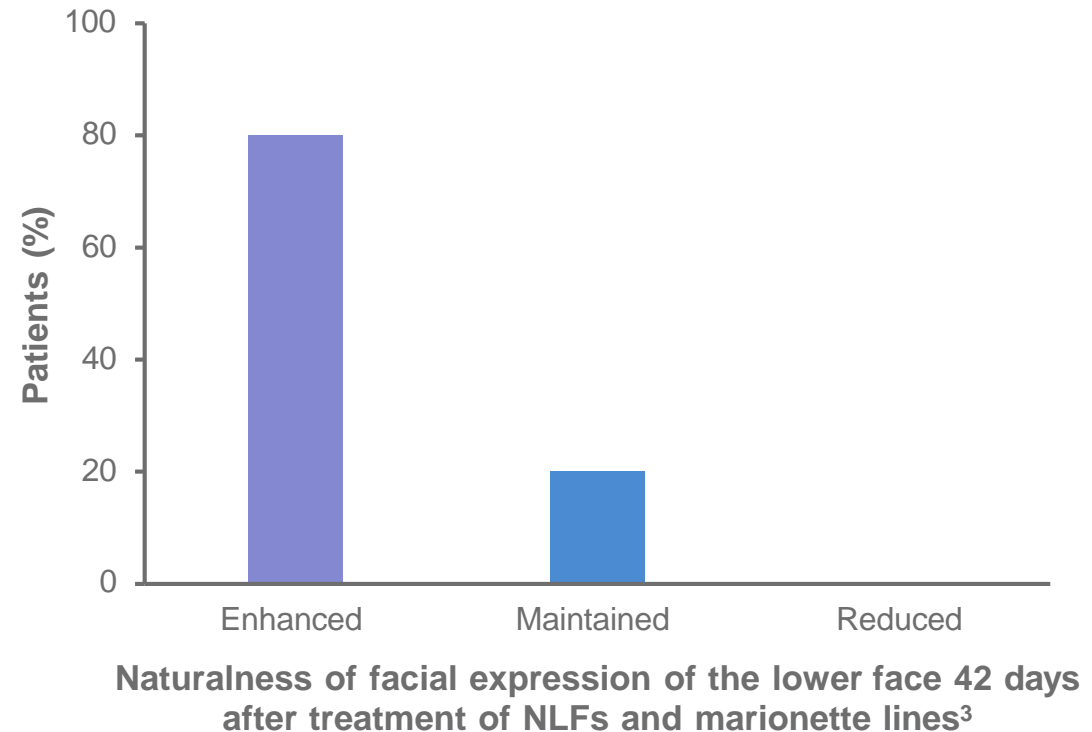
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Supporting information:*

After treatment with Restylane Refyne, the **naturalness of dynamic expression**, as assessed by investigators, was **enhanced or maintained** in all patients (100%)³



NLF, nasolabial fold; OBT, Optimal Balance Technology.

*Two-dimensional video assessment by treating investigator at Day 42 compared with baseline, in which the patients displayed facial expressions and emotions and undertook reading exercises. Pooled results for patients receiving Restylane Refyne and Restylane Defyne.

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Our most flexible OBT gel for refined and tailored results

Smooth and flexible gel to maintain facial expression¹⁻⁷

Supporting information:*

Across all examined expressions, **>70%** of patients achieved **improvements in naturalness** after treatment with Restylane Refyne³



OBT, Optimal Balance Technology.

*Naturalness of expression in the lower face at full contraction based on two-dimensional photo assessment by treating investigator at Day 42 compared with baseline. Pooled results for patients receiving Restylane Refyne and Restylane Defyne.

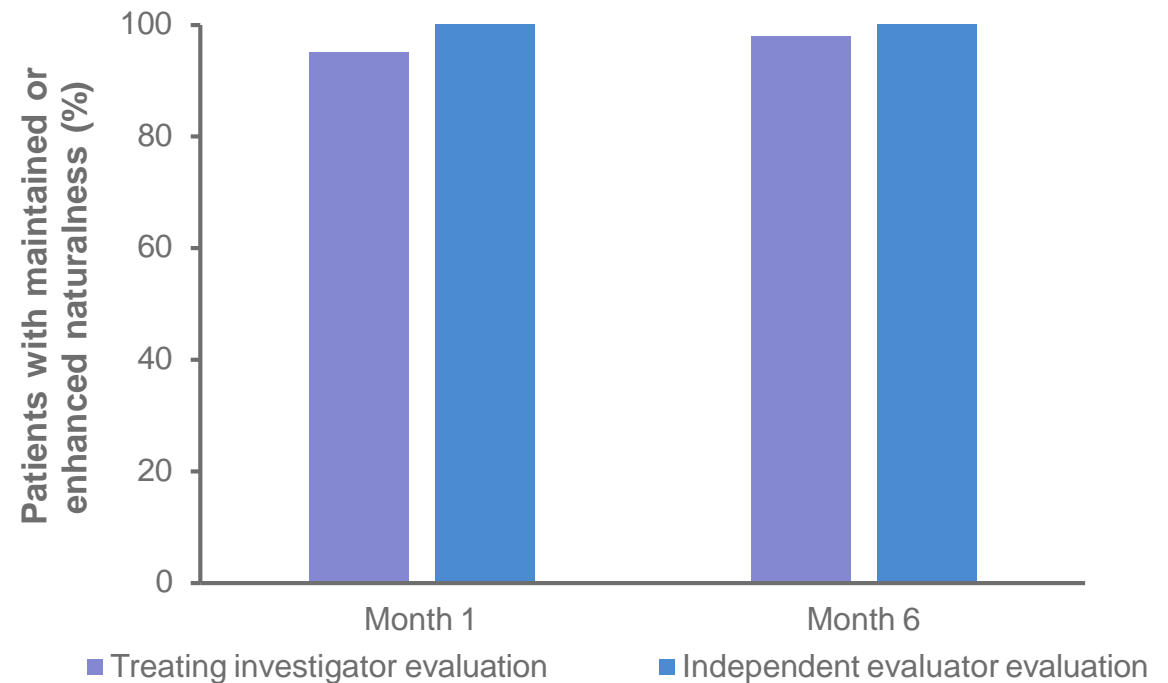
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6 months after treatment with Restylane Refyne, **≥95%** of patients had **maintained or enhanced naturalness** of their facial expressions⁷



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Favorable safety profile based on unrivalled experience

*Well tolerated with a safety
profile built on robust
clinical data¹*

Supporting information:

Restylane Refyne* has a **favorable safety profile**, established in 11 clinical investigations encompassing over 1,000 patients¹



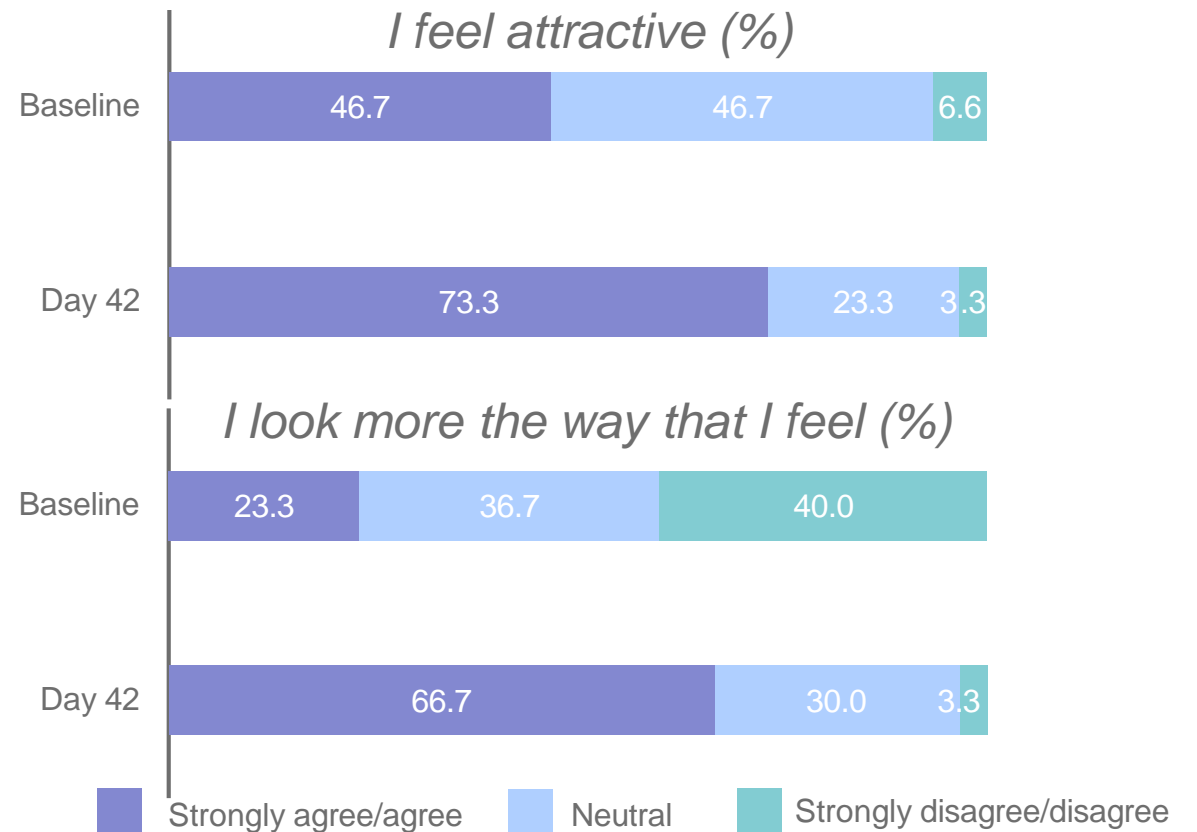
*Or equivalent product without lidocaine.
1. Data on file (MA-22124).

Results that come recommended

Results that deliver high patient and HCP satisfaction¹⁻⁴

Supporting information:*

After treatment of NLFs and marionette lines, most patients **agreed or strongly agreed** with positive statements regarding their appearance¹



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 42 days after treatment. Optional touch-up treatment at 2 weeks.

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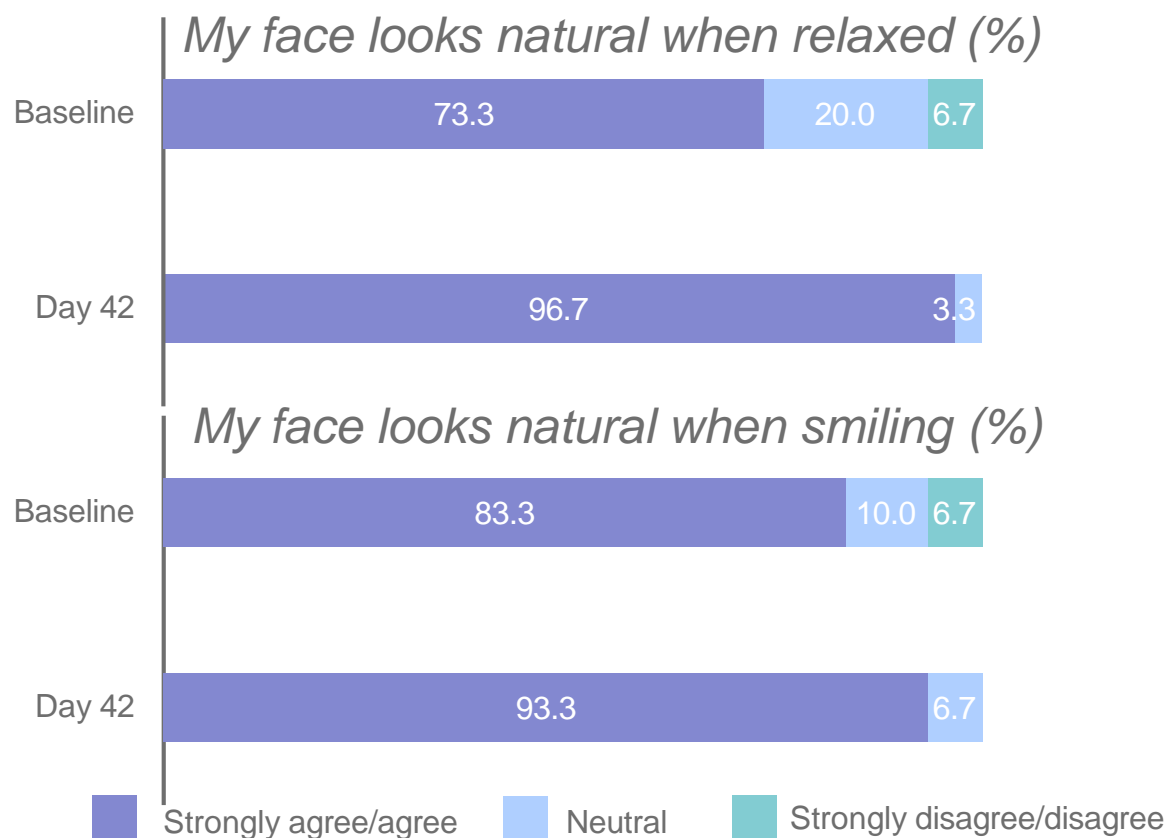
3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

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Results that deliver high patient and HCP satisfaction¹⁻⁴

Supporting information:*

After treatment of NLFs and marionette lines, most patients **agreed or strongly agreed** with statements about the naturalness of their expressions¹



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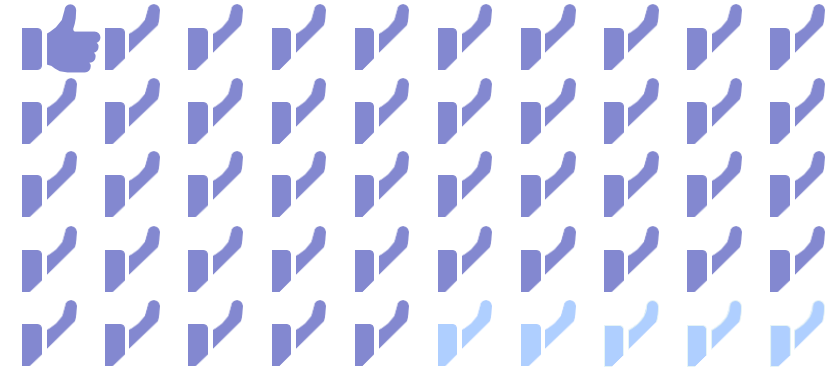
3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

Results that come recommended

Supporting information:

≥95%

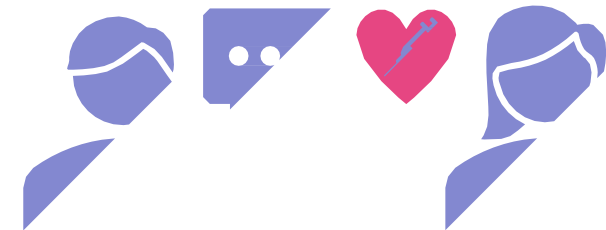
were **satisfied** with their treatment results^{2*} and would have treatment again^{3†}



Results that deliver high patient and HCP satisfaction¹⁻⁴

95%

would **recommend** the treatment to a friend^{4*}



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 1 month after treatment of NLFs and marionette lines.

†Pooled results for both Restylane Refyne and Restylane Defyne 12 months after treatment of NLFs and marionette lines.

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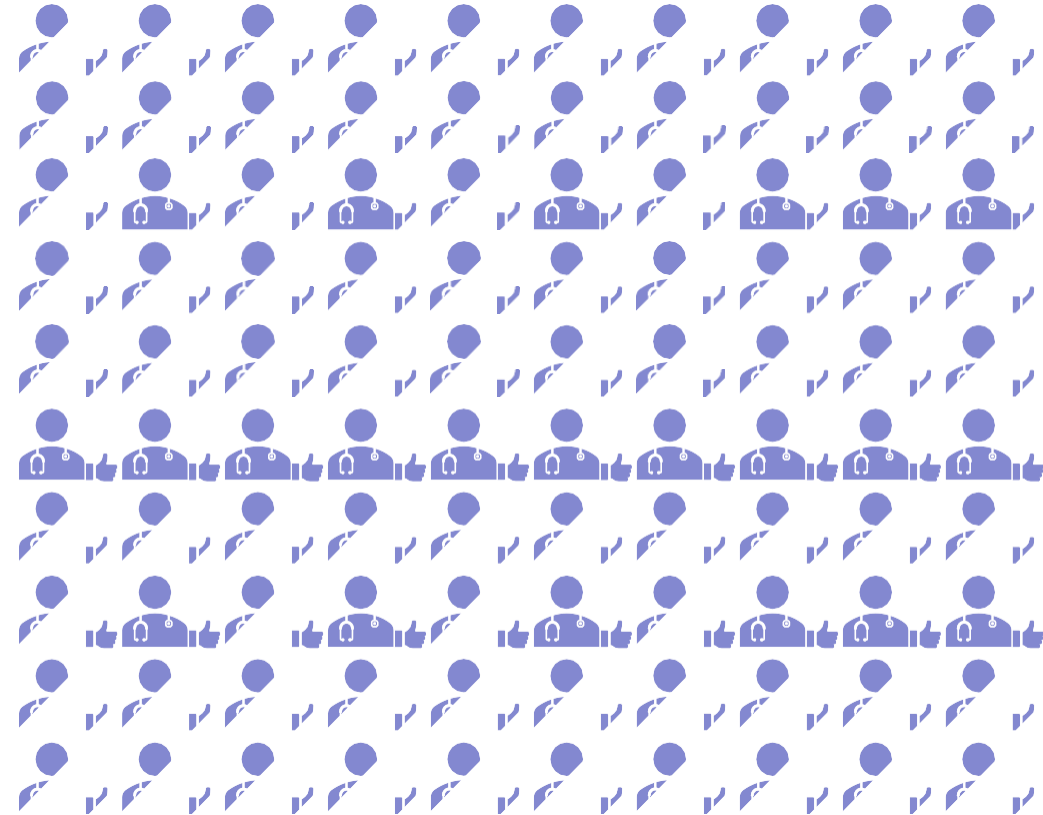
GALDERMA

Results that come recommended

Results that deliver high patient and HCP satisfaction¹⁻⁴

Supporting information:*

100% of treating investigators were **satisfied** with the aesthetic outcome of all patients²



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 1 month after treatment of NLFs and marionette lines.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

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GALDERMA

Restylane

DEFYNE™

RESTYLANE® DEFYNE™
PROVIDES CONTOURING
AND DEFINITION

August 2020



 GALDERMA

Restylane Defyne Core Claims

Optimal correction of deep lines and wrinkles

Soft projection to create natural-looking contouring and definition

Maintain dynamic expression with flexible OBT™ gel technology

Distributed tissue integration to provide mobility for true expression

Favorable safety profile based on unrivalled experience

Well tolerated with a safety profile built on robust clinical data

Results that come recommended

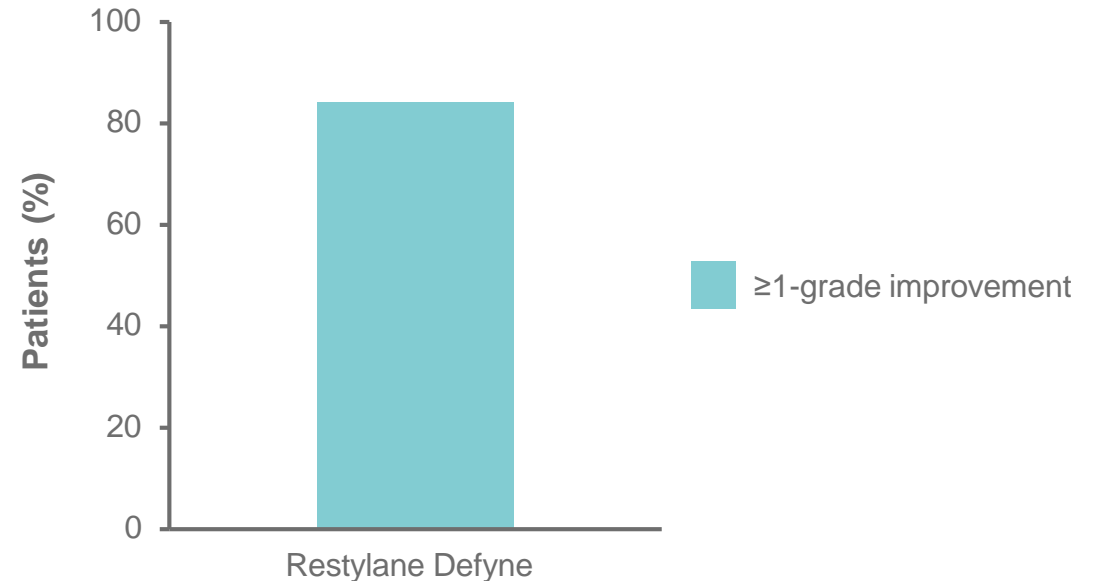
Natural and lasting results supported by high patient and HCP satisfaction

Optimal correction of deep lines and wrinkles

Soft projection to create natural-looking contouring and definition¹⁻³

Supporting information:

Restylane Defyne can be used for the **correction** of severe lines and wrinkles or to **redefine the shape** of the cheeks¹



Approximately 80% of patients achieved a ≥ 1 -grade improvement on the evaluator-assessed Wrinkle Severity Rating Scale at Week 48 following treatment of nasolabial folds (NLFs) with Restylane Defyne²

NLF, nasolabial fold.

1. Restylane Defyne EU IFU. 2020; 2. Ascher B *et al.* *Dermatol Surg* 2017;43(3):339-345. 3. Deparlan A *et al.* *J Dermatol* (MA-42769).

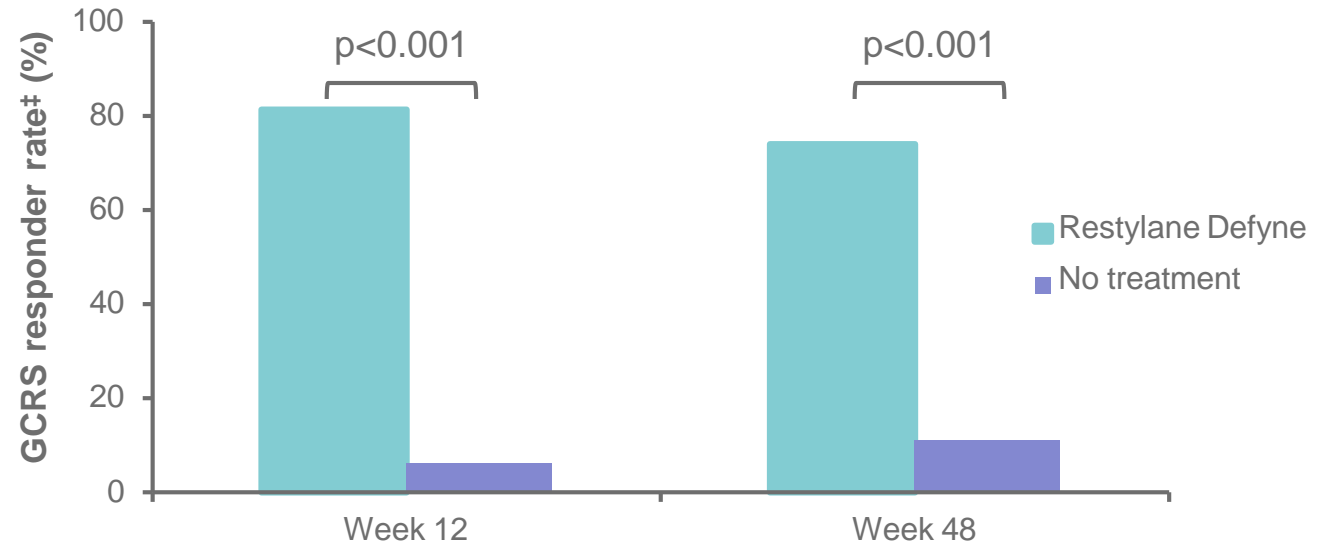
GALDERMA

Optimal correction of deep lines and wrinkles

Soft projection to create natural-looking contouring and definition¹⁻³

Supporting information:*

Restylane Defyne can also help to **build definition** in the chin,[†] providing improvements on both the Global Chin Retrusion Scale (GCRS) and the Global Aesthetic Improvement Scale (GAIS)³



At Week 48, 78% and 70% of patients treated with Restylane Defyne were **satisfied with the style and shape** of their chin, respectively³

GAIS, Global Aesthetic Improvement Scale; GCRS, Global Chin Retrusion Scale.

*Patients either received no treatment or Restylane Defyne injections into the chin at Day 1. Optional touch-up treatment was permitted 4 weeks after initial treatment. [†]Restylane Defyne is currently not approved for use in the chin. [‡]Defined as the proportion of patients achieving a ≥ 1 grade improvement from baseline on the GCRS as assessed by a blinded evaluator.

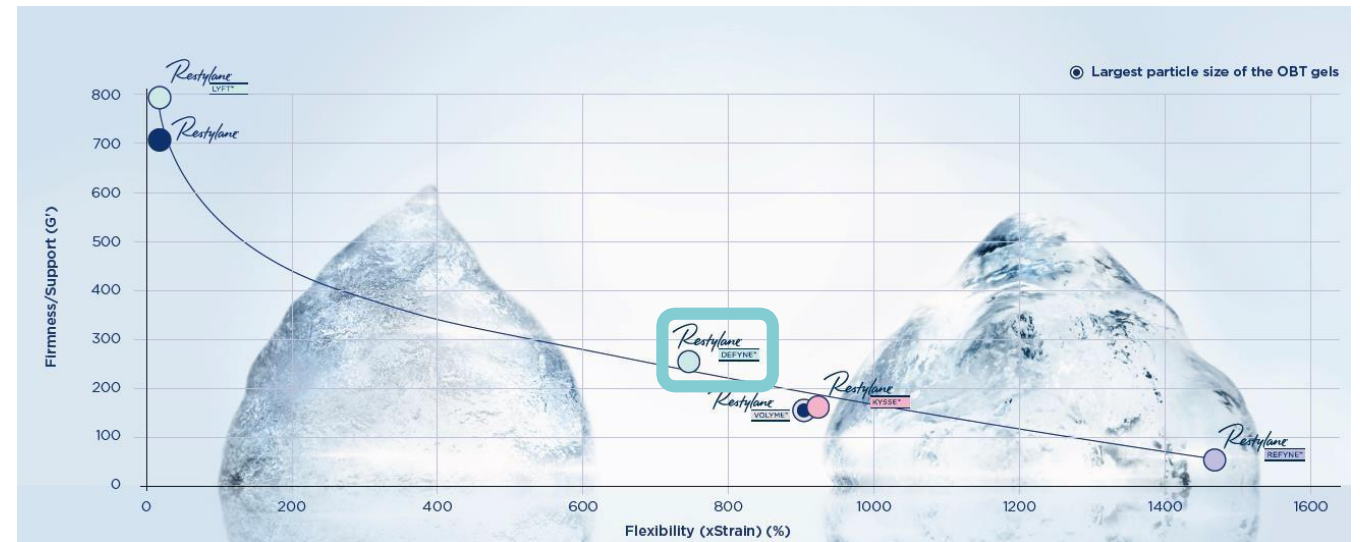
1. Restylane Defyne EU IFU. 2020; 2. Ascher B *et al. Dermatol Surg* 2017;43(3):389-395. 3. Galderma (MA-42769).

Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸

Supporting information:

The mid-range xStrain (flexibility) of Restylane Defyne OBT gel **facilitates movement**, making it ideally suited to dynamic treatment areas that **require lift whilst maintaining animation^{1,2}**



Restylane Defyne is ideal for patients with **thinner tissue coverage** or where a more **subtle treatment effect** is desired³

OBT, Optimal Balance Technology.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826-832;

3. Nikolis A *et al. Aesthet Surg J Open Forum* 2020;2(1):ojaa005; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5-S8;

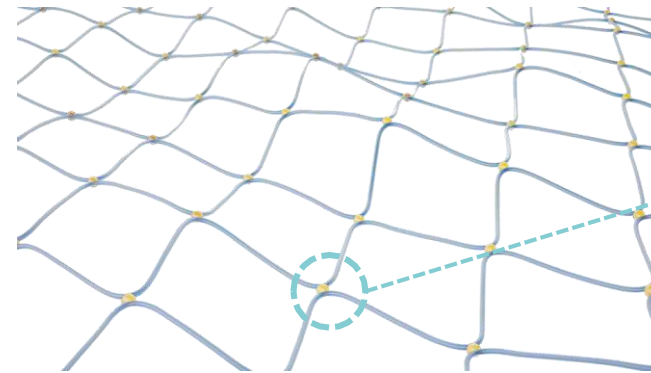
5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982-986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e-305e;

7. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738-746; 8. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600-1606.

Supporting information:

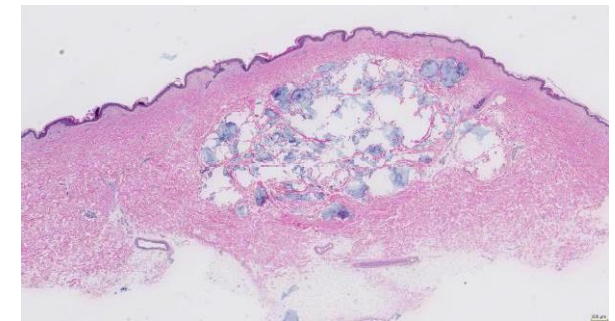
Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸



The OBT gel net:
A chemical (BDDE) is used to create **cross-links** between HA chains⁴

Restylane Defyne OBT gel technology **distributes within the skin⁵**



BDDE, 1,4-butanediol diglycidyl ether; HA, hyaluronic acid; OBT, Optimal Balance Technology.

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NLF, nasolabial fold; OBT, Optimal Balance Technology.

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Supporting information:*

Older individuals display higher amounts of **facial strain** during dynamic expression⁶



Objective facial dynamic results (3D stereophotogrammetry) at baseline and after treatment with Restylane Defyne⁶

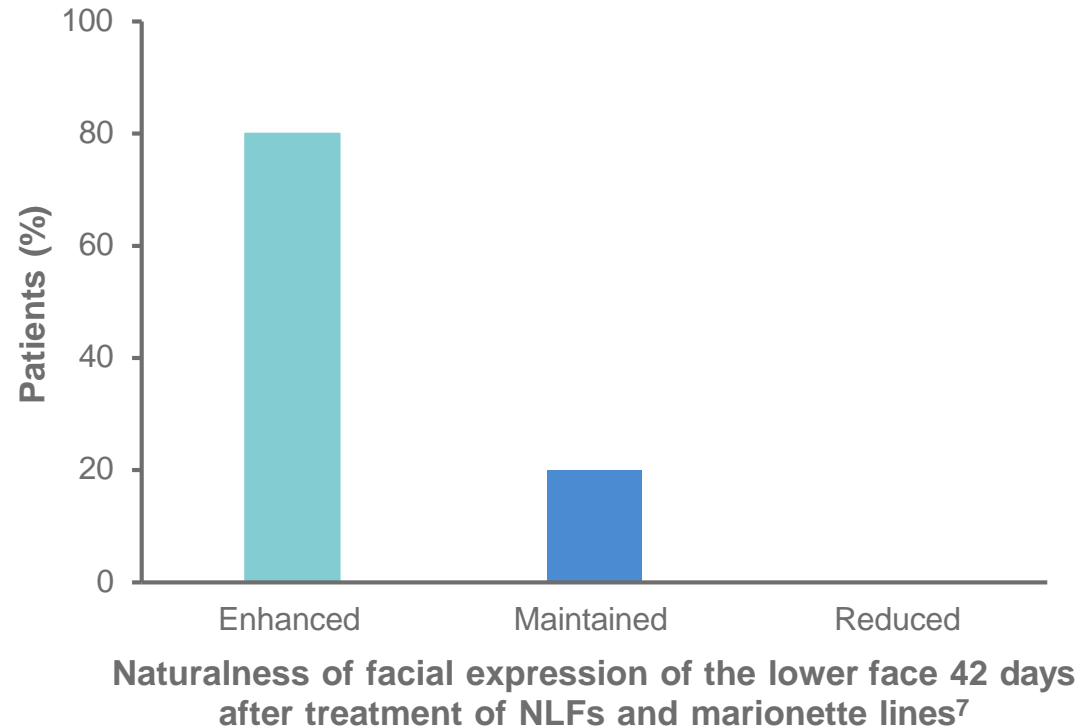
After treatment with Restylane Defyne, the amount of strain exerted is reduced, helping to **restore a youthful strain profile⁶**

Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸

Supporting information:*

After treatment with Restylane Defyne, the **naturalness of dynamic expression**, as assessed by investigators, was **enhanced or maintained** in all patients (100%)⁷



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*Two-dimensional video assessment by treating investigator at Day 42 compared with baseline, in which the patients displayed facial expressions and emotions and undertook reading exercises. Pooled results for patients receiving Restylane Refyne and Restylane Defyne.

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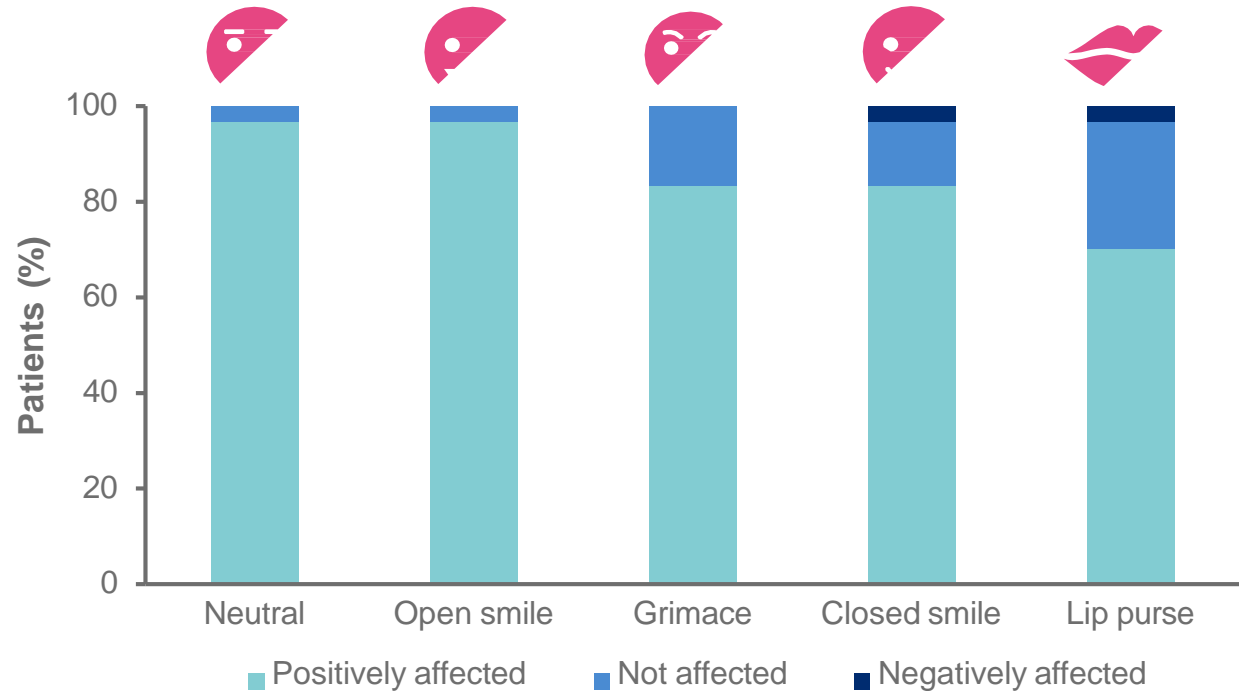
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Distributed tissue integration to provide mobility for true expression¹⁻⁸

Supporting information:*

Across all examined expressions, **>70%** of patients achieved **improvements in naturalness** after treatment with Restylane Defyne⁷



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*Naturalness of expression in the lower face at full contraction based on two-dimensional photo assessment by treating investigator at Day 42 compared with baseline. Pooled results for patients receiving Restylane Refyne and Restylane Defyne.

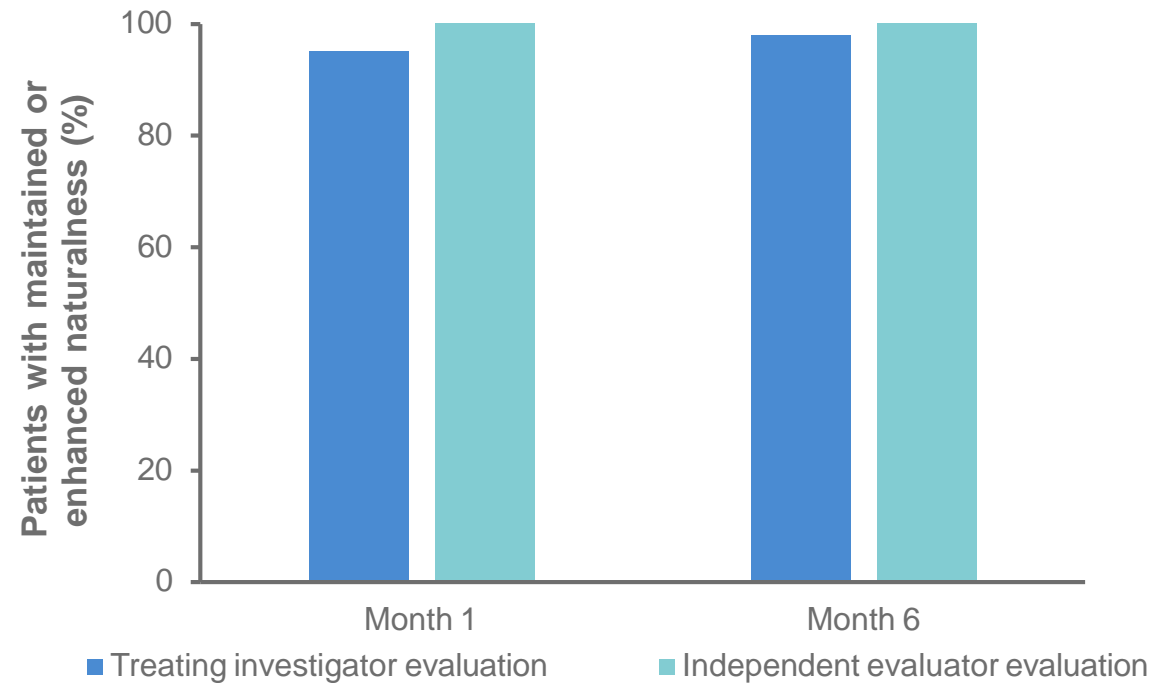
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Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸

Supporting information:*

6 months after treatment with Restylane Defyne, **≥95%** of patients had **maintained or enhanced naturalness** of their facial expressions⁸



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Restylane Defyne* has a **favorable safety profile**, established in 11 clinical investigations encompassing over 1,000 patients¹



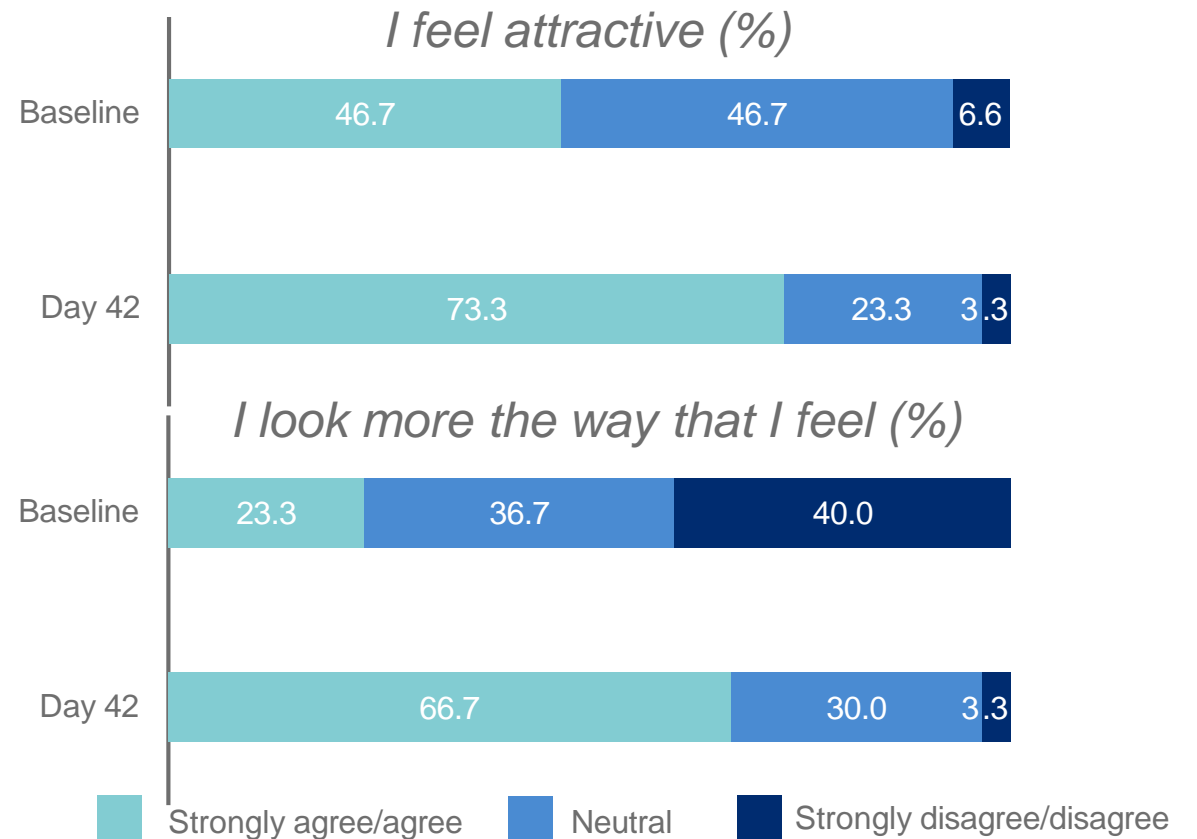
*Or equivalent product without lidocaine.
1. Data on file (MA-22124).

Results that come recommended

Natural and lasting results supported by high patient and HCP satisfaction¹⁻⁴

Supporting information:*

After treatment of NLFs and marionette lines, most patients **agreed or strongly agreed** with positive statements regarding their appearance¹



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 42 days after treatment. Optional touch-up treatment at 2 weeks.

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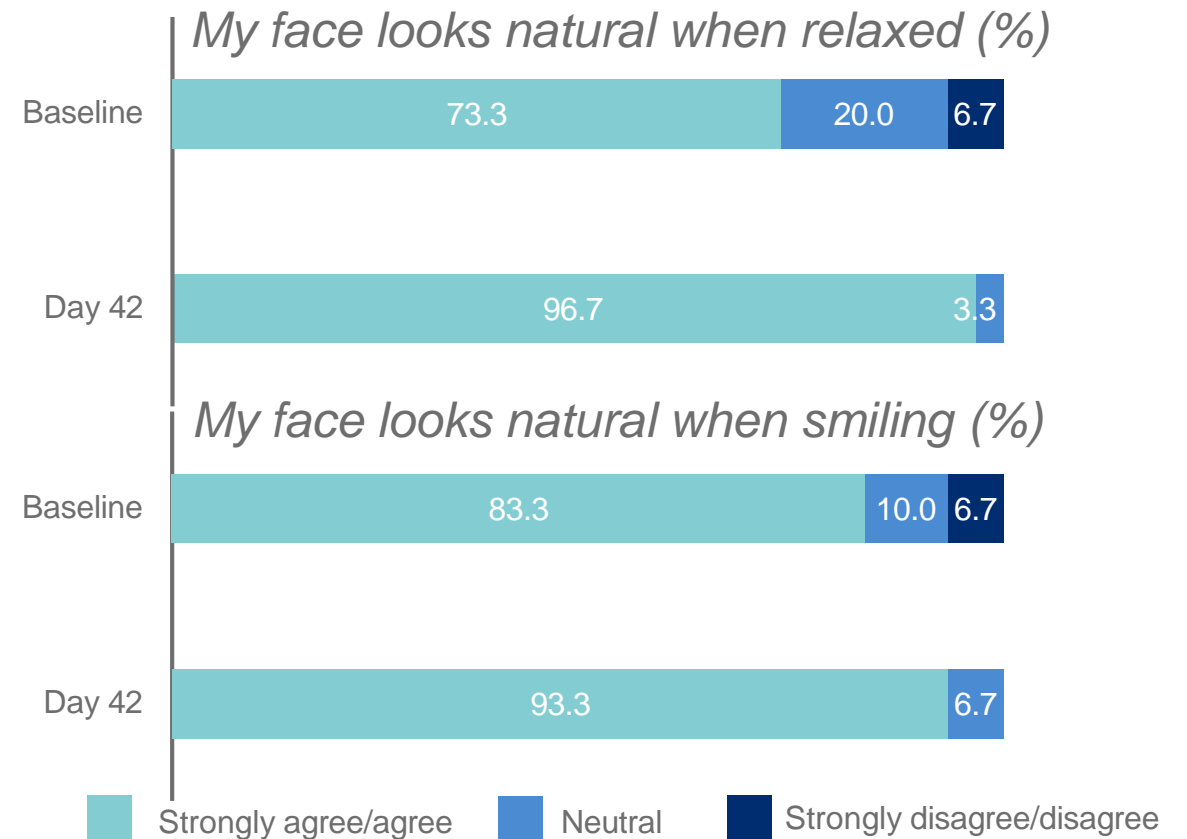
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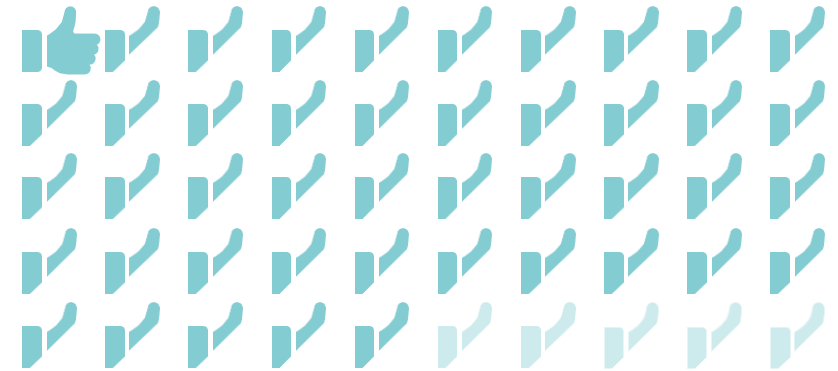
Results that come recommended

Natural and lasting results supported by high patient and HCP satisfaction¹⁻⁴

Supporting information:

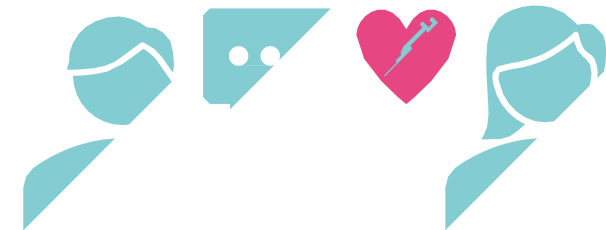
≥95%

were **satisfied** with their treatment results^{2*} and would have treatment again^{3†}



95%

would **recommend** the treatment to a friend^{4*}



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*Pooled results for both Restylane Refyne and Restylane Defyne 1 month after treatment of NLFs and marionette lines.

†Pooled results for both Restylane Refyne and Restylane Defyne 12 months after treatment of NLFs and marionette lines.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

Results that come recommended

Natural and lasting results supported by high patient and HCP satisfaction¹⁻⁴

Supporting information:*

83%

of patients achieved a **younger-looking** appearance^{1†}

87%

of patients displayed **enhanced attractiveness**^{1†}

90%

of patients **liked** their overall appearance¹



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 42 days after treatment of NLFs and marionette lines. Optional touch-up treatment at 2 weeks.

†Treating-investigator-reported scores. Perception of attractiveness and age of lower face in motion at Day 42 compared with baseline.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

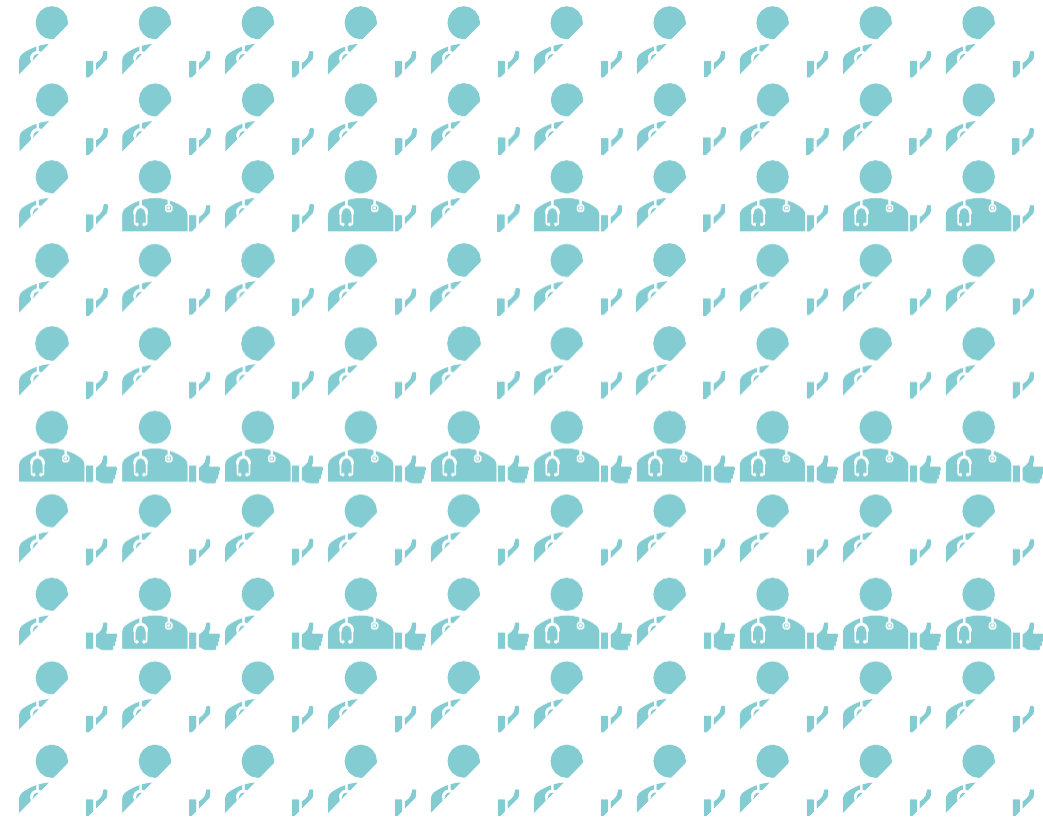
GALDERMA

Results that come recommended

Natural and lasting results supported by high patient and HCP satisfaction¹⁻⁴

Supporting information:*

100% of treating investigators were **satisfied** with the aesthetic outcome of all patients²



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 1 month after treatment of NLFs and marionette lines.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

Restylane®

KYSSE™

RESTYLANE® KYSSE™
FOR SOFT, FULL, AND
NATURAL-LOOKING LIPS

August 2020



 GALDERMA

Restylane Kysse Core Claims

Shaping and natural enhancement with lasting results

*Enhanced volume achieved with significantly less product than Juvéderm® Volbella™
Durable results that last up to 12 months*

Balanced volume for a natural look and feel

*Soft and flexible OBT™ gel technology for natural-feeling softness
Improved lip texture*

Favorable safety profile based on clinical experience

Minimal swelling and nodule formation

Proven satisfaction for recommendation and repetition

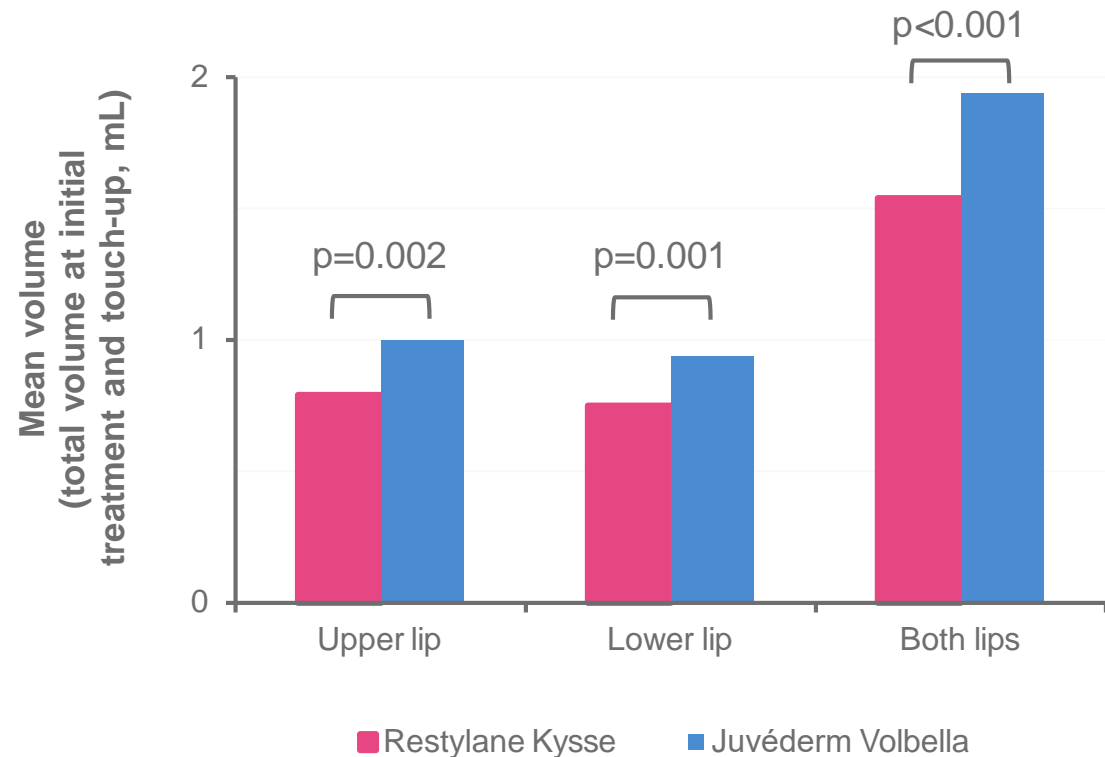
*Patient satisfaction maintained for up to 12 months
High partner satisfaction with lip enhancement*

Shaping and natural enhancement with lasting results

Enhanced volume achieved with significantly less product than Juvéderm Volbella^{1,2}

Supporting information:

A lower amount of Restylane Kysse was **required to achieve a ≥ 1 -grade improvement** on the Lip Fullness Grading Scale in both lips following treatment, compared with Juvéderm Volbella^{1*}



*Statistical comparison was carried out using a Student's t-test.

1. Hilton S *et al. Dermatol Surg* 2018;44(2):261–269; 2. Weiss R *et al. Poster presented at IMC PS 2024.*

Shaping and natural enhancement with lasting results

Enhanced volume achieved with significantly less product than Juvéderm Volbella^{1,2}

Supporting information:

A Phase 3 study comparing Restylane Kysse with a control treatment found non-inferiority of **lip fullness augmentation** at 8 weeks after the last treatment:^{2*}

	Mean volume in the lips ²
Restylane Kysse	1.82 mL
Control	2.24 mL

~20%

lower volume of Restylane Kysse used than of control treatment for comparable fullness^{2*}

*Post hoc analysis data on the total amount of product needed to show a ≥1-grade improvement in lip fullness (Medicis Lip Fullness Scale, 8 weeks after treatment).

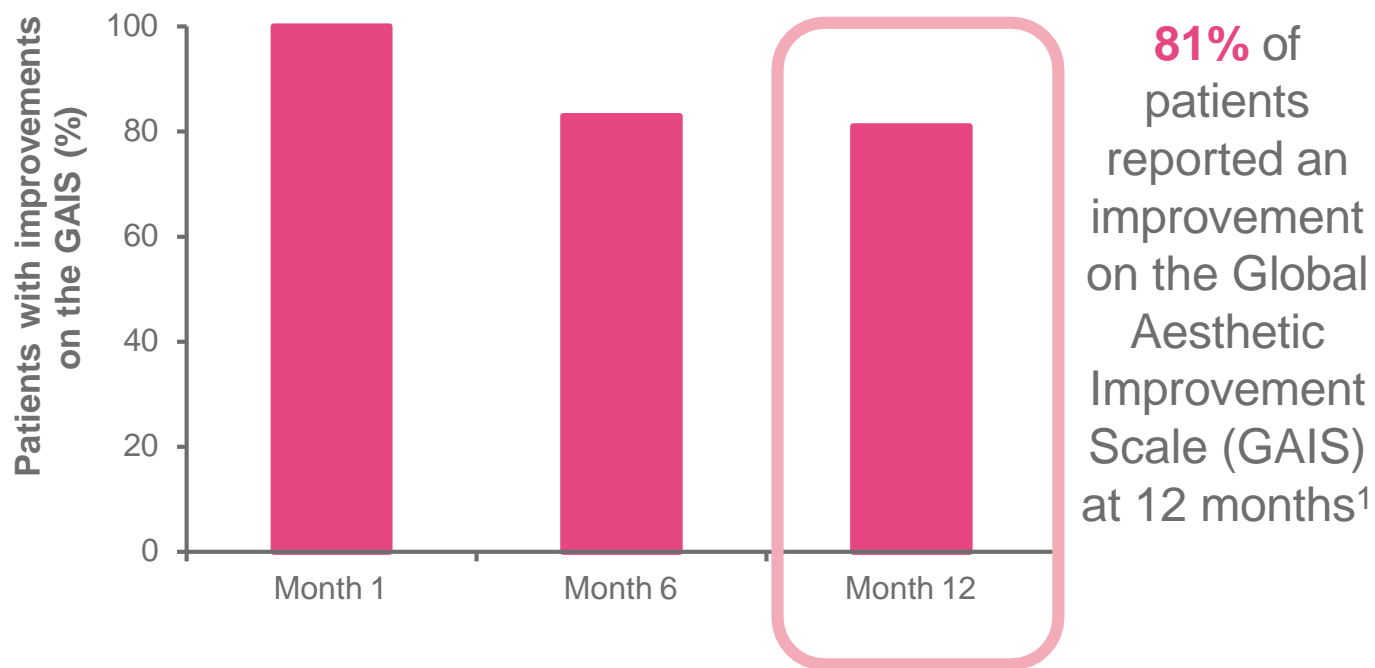
1. Hilton S et al. *Dermatol Surg* 2018;44(2):261–269; 2. Weiss R et al. Poster presented at IMC PS 2024.

Shaping and natural enhancement with lasting results

Durable results that last up to 12 months¹

Supporting information:

Restylane Kysse provides results that last up to 12 months, as assessed by both patients and blinded evaluators¹



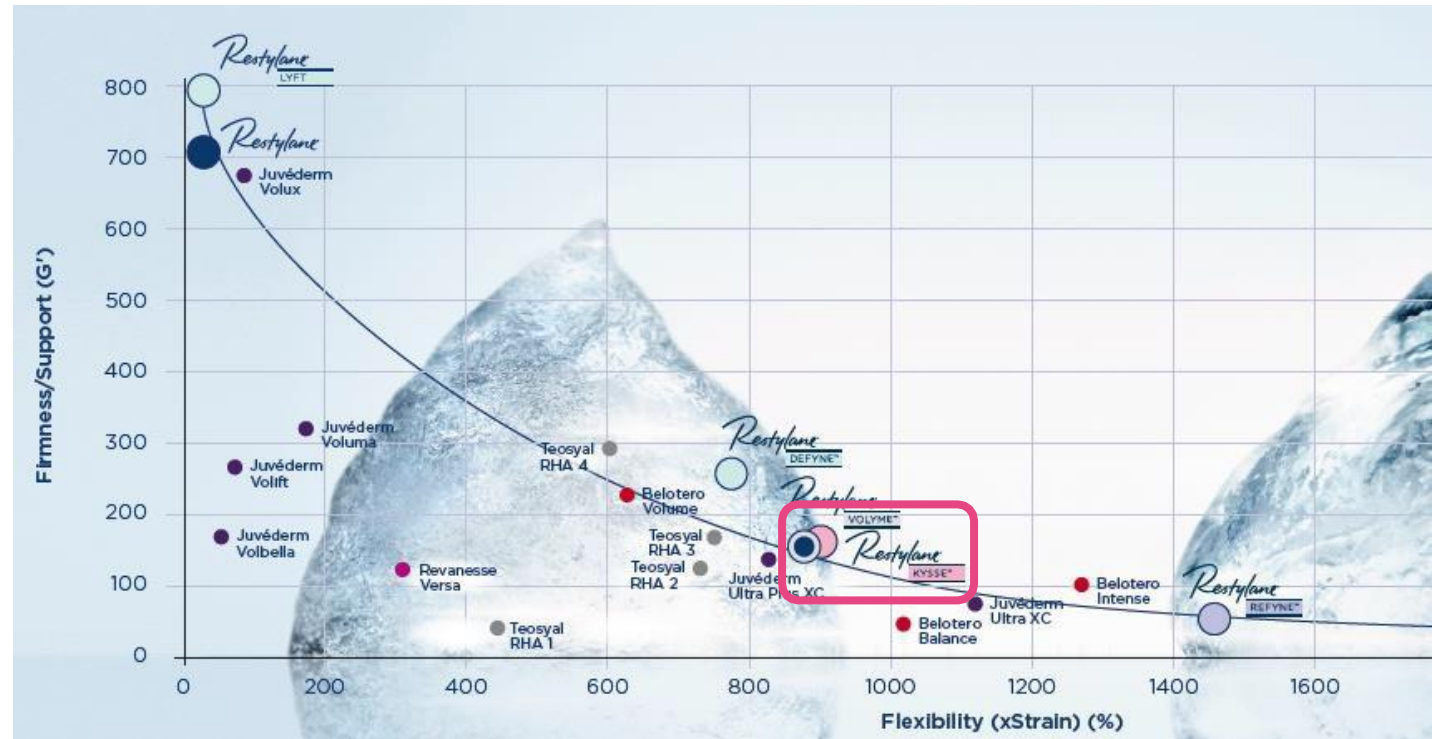
71% of blinded evaluators described an improvement on the GAIS at the same time point¹

Balanced volume for a natural look and feel

Soft and flexible OBT gel technology for natural-feeling softness¹⁻³

Supporting information:

Dynamic treatment areas, such as the lips, require support while maintaining animation



The soft and flexible OBT gel makes Restylane Kysse ideally suited to enhance the volume and shape of the lips^{1,2}

OBT, Optimum Balance Technology.

1. Data on file (MA-43049); 2. Restylane Kysse EU IFU. 2020; 3. Hilton S et al. *Dermatol Surg* 2018;44(2):261-269.

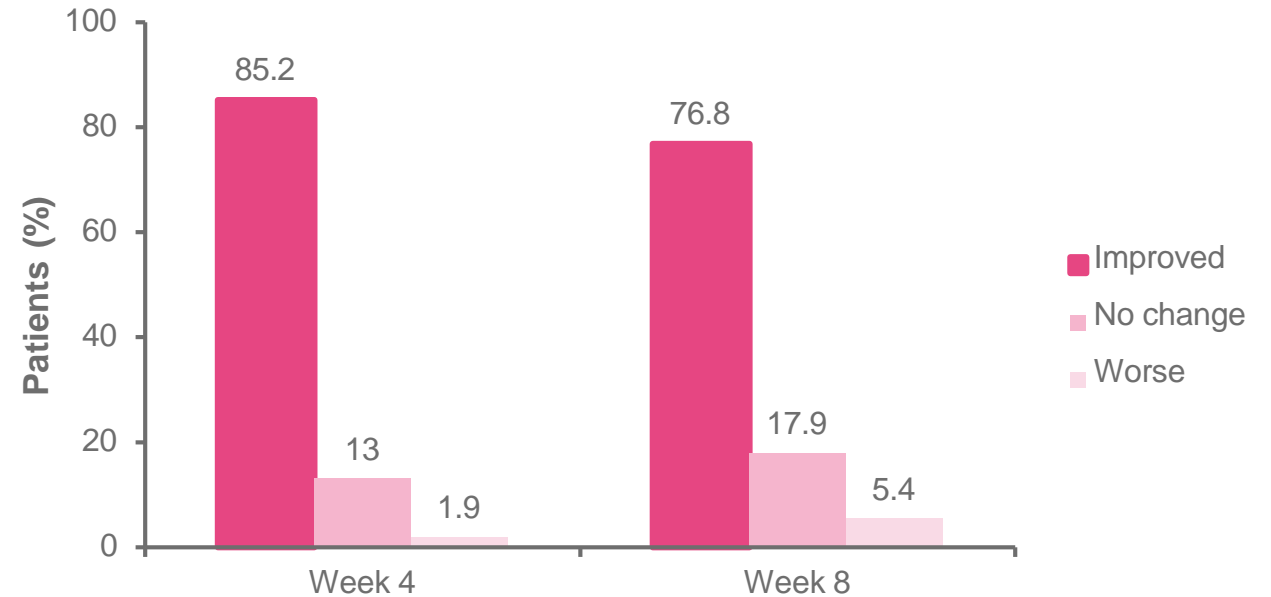
GALDERMA

Balanced volume for a natural look and feel

Improved lip texture¹

Supporting information:

The majority of patients (76.8%) were assessed to have an improved lip texture 8 weeks after treatment with Restylane Kysse^{1*}



Assessment by independent photographic reviewer at Week 8 found naturalness of facial expressions was maintained in the majority of patients (80.4%)¹

*In a Phase 4 clinical study, 59 patients were treated with either Restylane Kysse in the lips only (n=19) or Restylane Kysse in the lips in combination with either Restylane Refyne™/Restylane Defyne™ for the treatment of facial wrinkles and folds surrounding the lips (n=40).

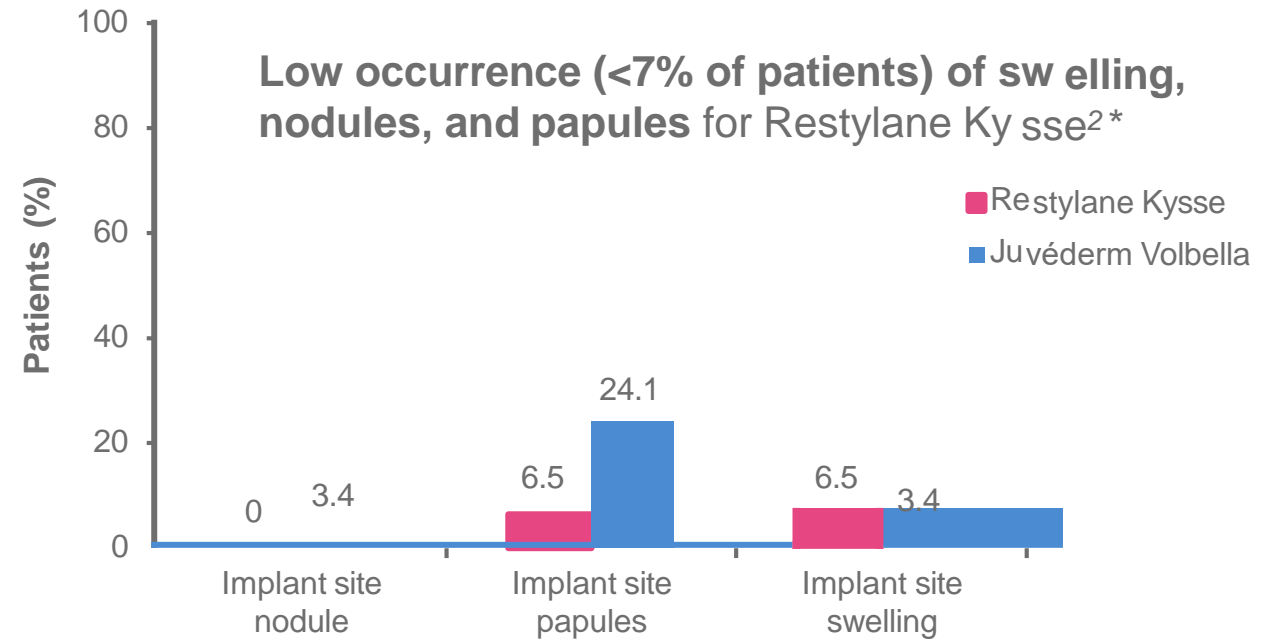
1. Data on file (MA-42436).

Favorable safety profile based on clinical experience

Minimal swelling and nodule formation¹⁻³

Supporting information:

Restylane Kysse has a favorable safety profile established in clinical trials^{1,2}



Only **19.4%** of patients receiving treatment with **Restylane Kysse** reported a treatment-related adverse event, compared with **37.9%** of patients receiving **Juvéderm Volbella**²

*Treatment-related adverse events were recorded by the treating investigator after each treatment and by the patient for 14 days after initial lip treatment with either Restylane Kysse or Juvéderm Volbella.

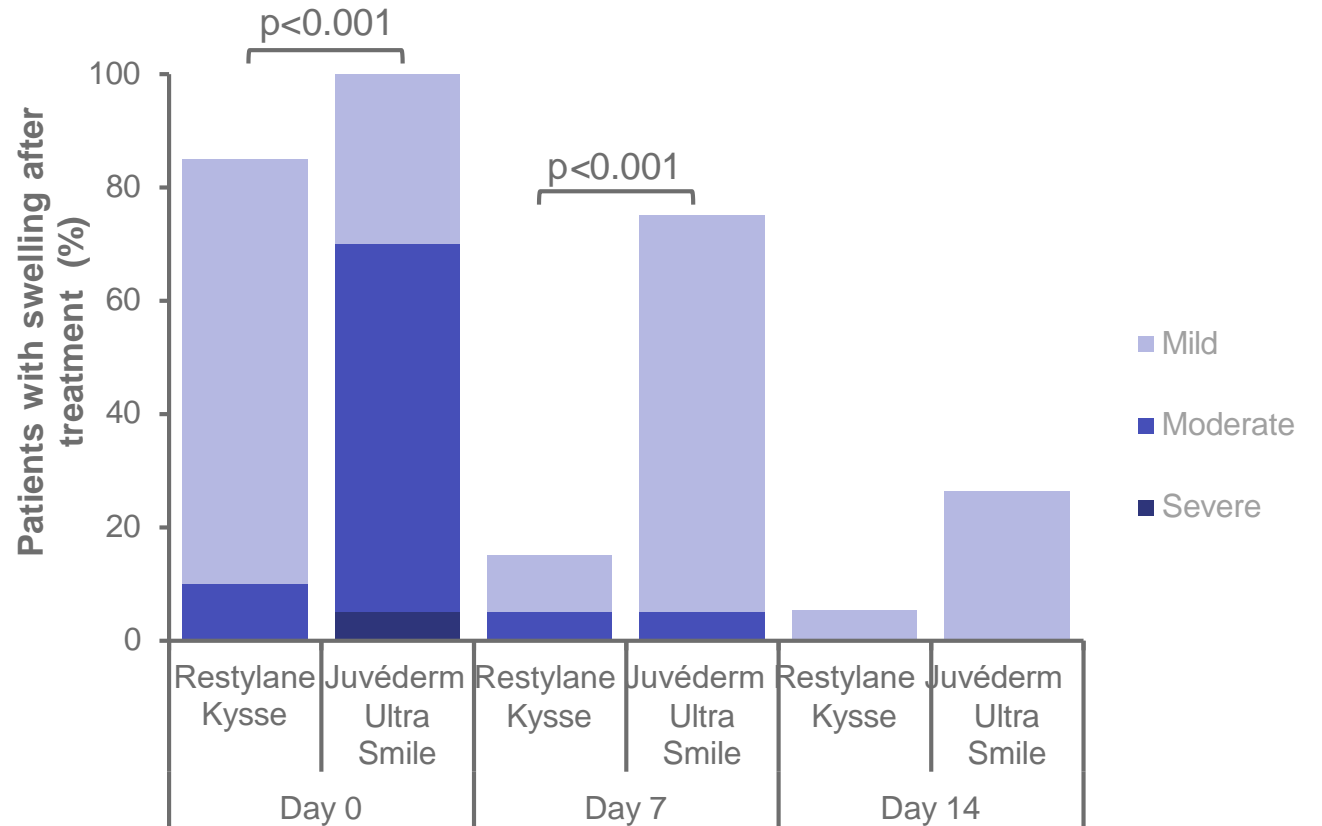
1. Data on file (MA-22124); 2. Hilton S *et al. Dermatol Surg* 2018;44(2):261–269; 3. Data on file (MA-22124) (GALDERMA).

Favorable safety profile based on clinical experience

Minimal swelling and nodule formation¹⁻³

Supporting information:

Significantly less swelling was observed after treatment with Restylane Kysse compared with Juvéderm Ultra™ Smile^{3*}



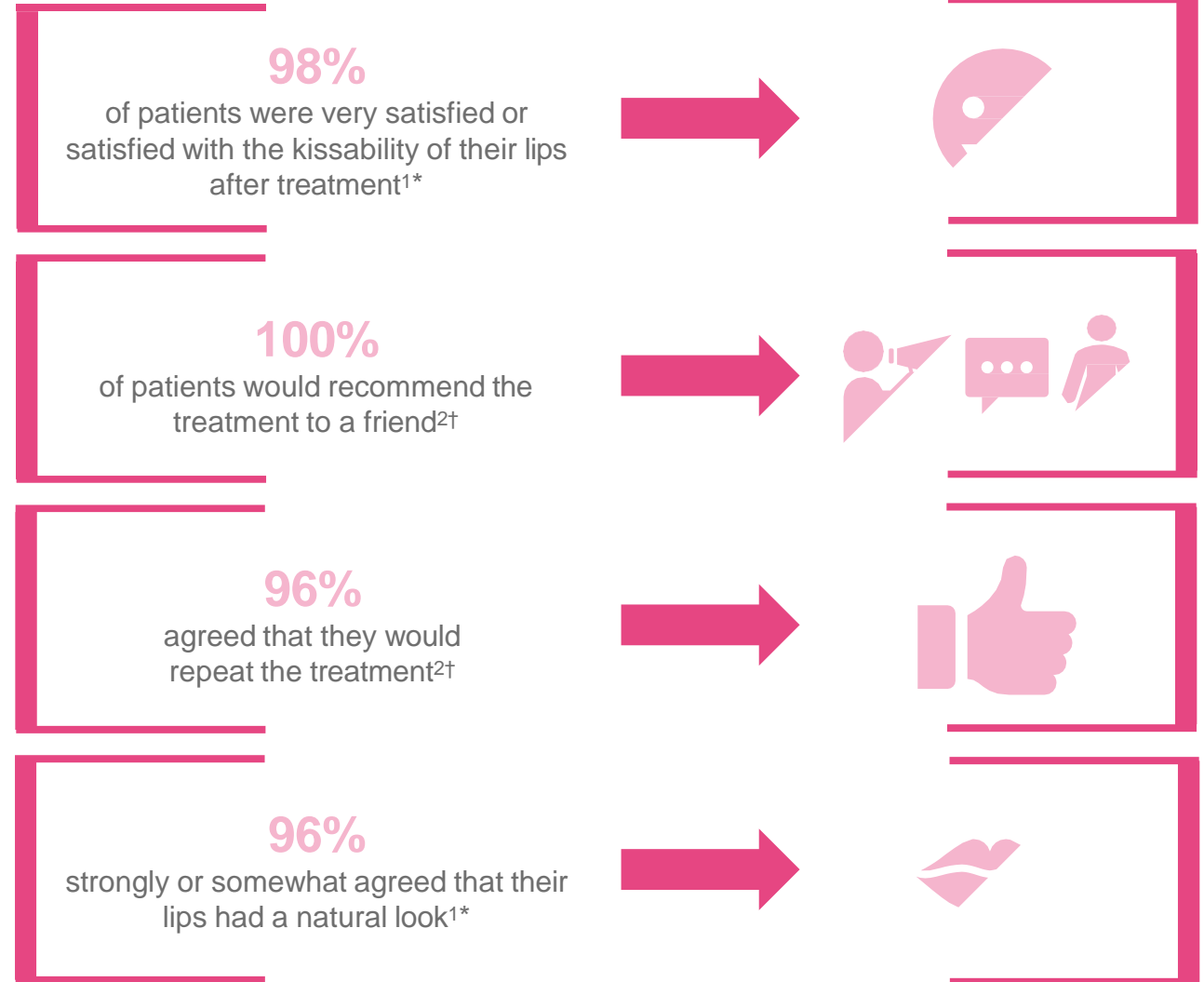
*Swelling was assessed by a blinded evaluator after a single lip treatment with either Restylane Kysse or Juvéderm Ultra Smile and at 1, 3, 7, and 14 days post-treatment. Statistical comparison was carried out using an exact Wilcoxon rank-sum test.

1. Data on file (MA-22124); 2. Hilton S *et al. Dermatol Surg* 2018;44(2):261–269; 3. Data on file (MA-22124); 4. Data on file (MA-22124); 5. Data on file (MA-22124); 6. Data on file (MA-22124).

Proven satisfaction for recommendation and repetition

Patient satisfaction maintained for up to 12 months^{1,2}

Supporting information:



*Percentage of patients who were satisfied with questionnaire items at 8 weeks following their last treatment.

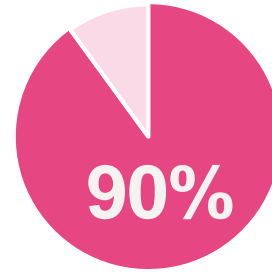
†Percentage of patients surveyed at 12 months following treatment with Restylane Kysse.

1. Nikolis A *et al.* Poster presented at IMCAS 2020; 2. Hilton S *et al.* *Dermatol Surg* 2018;14(5):612-619.

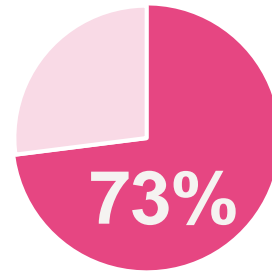
Proven satisfaction for recommendation and repetition

High partner satisfaction with lip enhancement¹

Supporting information:



of partners were satisfied or very satisfied with the appearance of their partners' lips^{1*}



of partners agreed that their partners' lips had a more kissable and natural feel^{1*}

*Percentage of partners who were satisfied with questionnaire items at 8 weeks following the patients' last treatment.

1. Nikolis A *et al.* Poster presented at IMCAS 2020.

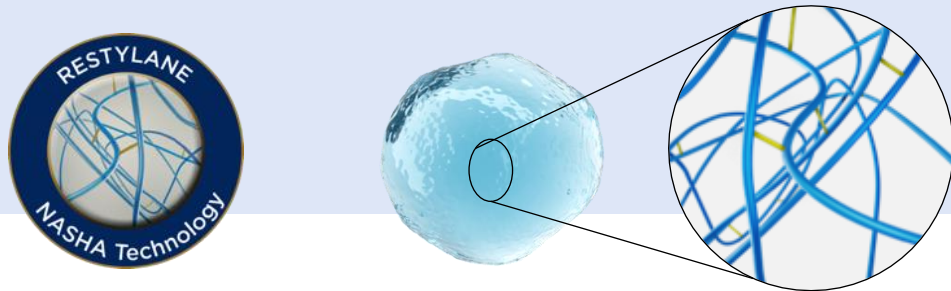
Restylane Gel Technology

GAIN

2 Unique and Complementary Technologies

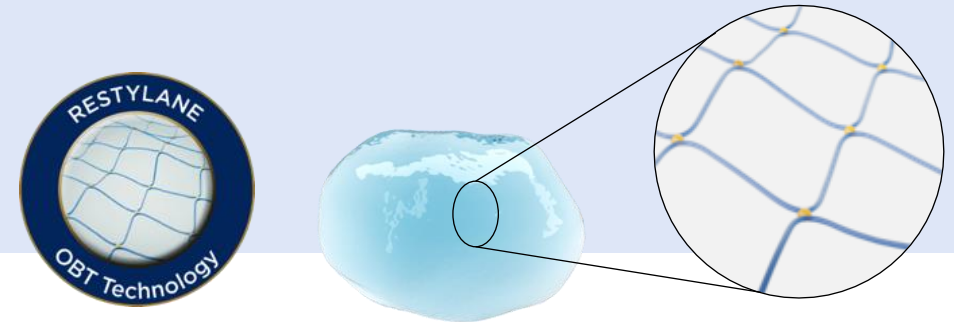
NASHA

- Incorporates a limited number of synthetic cross-links
- Preserves natural cross-links and entanglements of HA network
- Results in a minimally modified version of natural HA (<1% BDDE)
- Higher G' : firm gels for lifting and projection



OBT



- Fewer natural entanglements and a higher degree of chemical cross-linking than NASHA
- Multiple degrees of cross-linking yield gels with different levels of resistance, from very soft to firm
- Cross-linking coupled with controlled particle sizing results in distinct gel textures with different levels of support
- Lower G' : Softer, more flexible gels for contouring and volumization



BDDE, 1,4-butanediol diglycidyl ether; G' , storage modulus; HA, hyaluronic acid, NASHA, nonanimal stabilized hyaluronic acid. Micheels P, et al. *J Drugs Dermatol.* 2016;15(5):600-606.

Characteristics of NASHA and OBT Fillers

GAIN

	 NASHA	 OBT
Product(s)	Restylane, Restylane Lyft, Restylane Silk	Restylane Refyne, Restylane Defyne, Restylane Volyme, Restylane Kysse, Restylane Fynesse*
Manufacturing process	Stabilization: natural entanglements and minimal synthetic cross-linking	Different cross-linking levels
MoD (%)	1	6–8
Particle size	Specifically sized particles (differs by SKU)	Specifically sized particles (differs by SKU)
HA concentration, mg/mL	20	20
Firmness (G') range, Pa	Firm 500–800	Soft to moderately firm 70–300

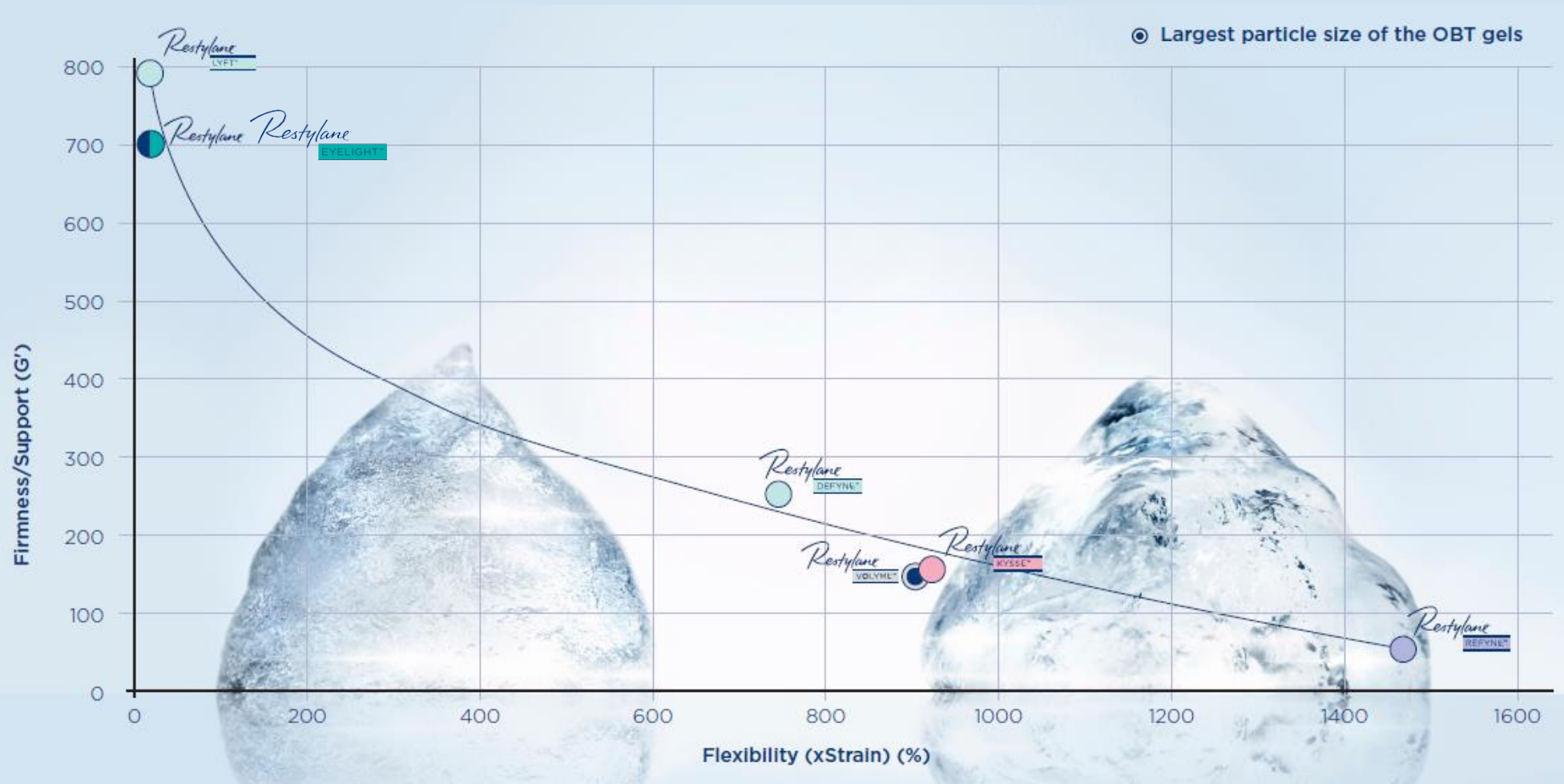
*Product being phased out.

G', storage modulus; HA, hyaluronic acid, MoD, degree of modification; NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology; SKU, stock keeping unit.

Data on file. MA-34483 Study Report v5.0. Fort Worth, TX: Galderma Laboratories, L.P. 2021.

The Restylane Range – From Firm to Flexible¹

GAIN



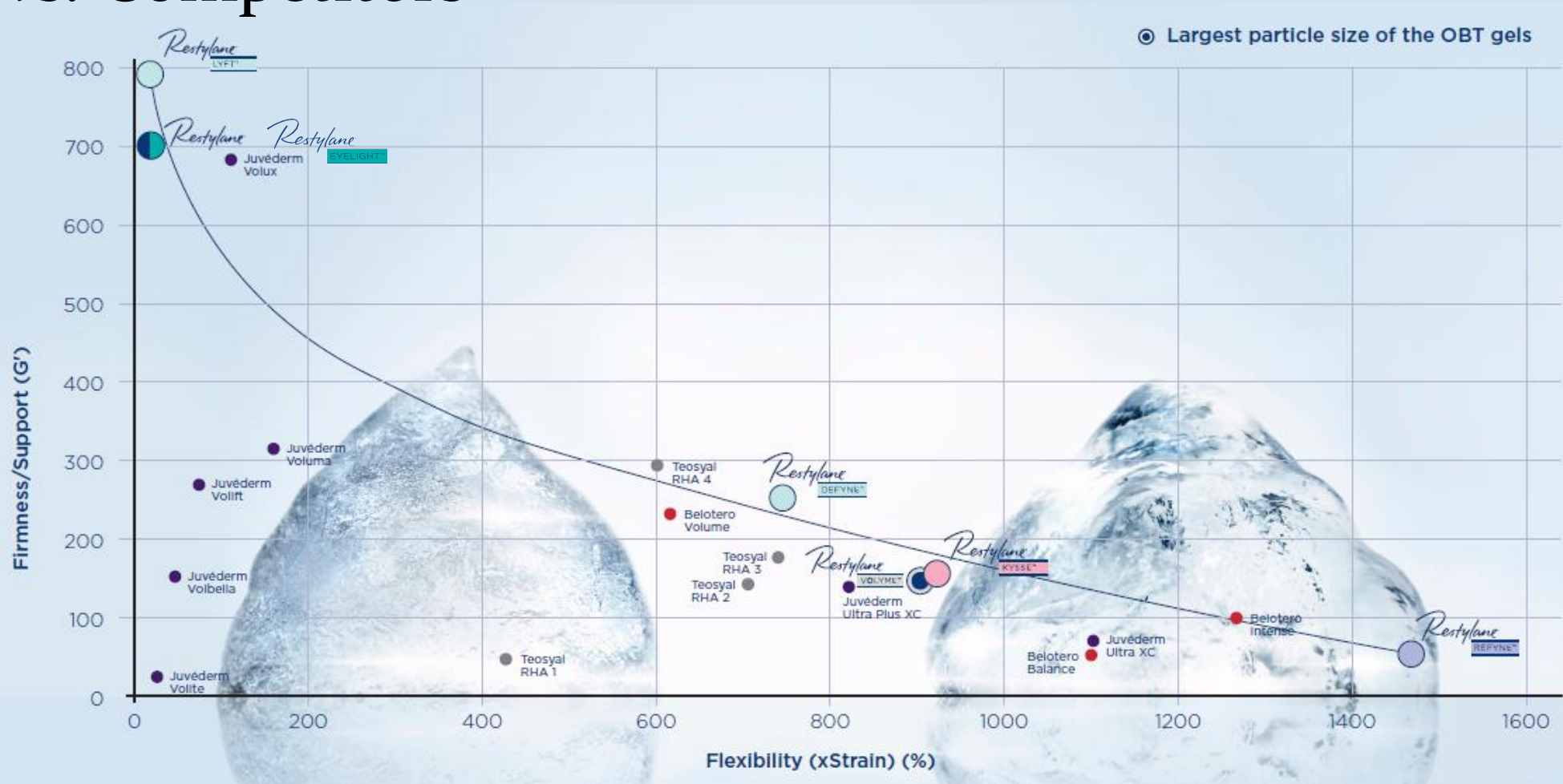
The firmer **NASHA** gels (lower xStrain and higher G') provide more support for lifting and precision and the softer **OBT** gels are more flexible (high xStrain and lower G')

NASHA gels include Restylane Lyft, Restylane, and Restylane Eyelight. OBT gels include Restylane Defyne, Restylane Volyme, Restylane Kysse, and Restylane Refyne. HA, hyaluronic acid; G', storage modulus; NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

1. Data on file (MA-43049).

The Restylane Range – From Firm to Flexible¹ vs. Competitors

GAIN



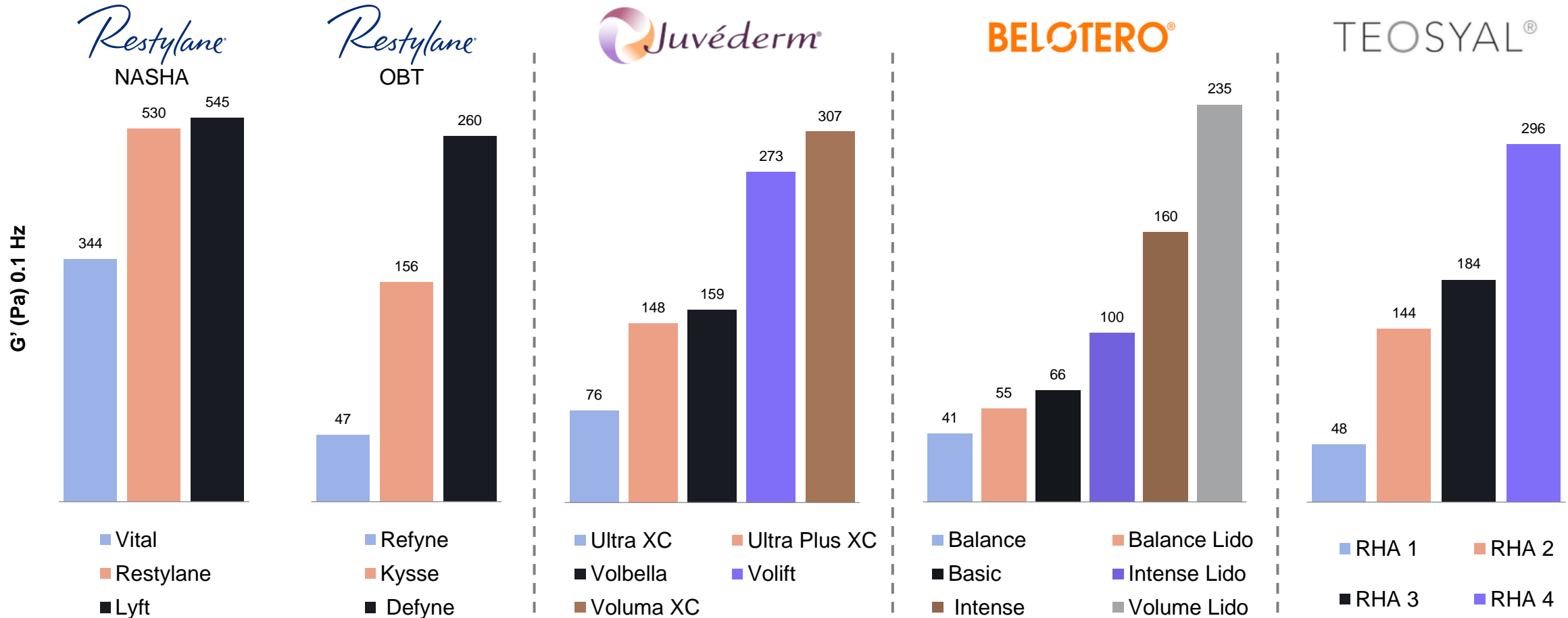
The firmer NASHA gels (lower xStrain and higher G') provide more support for lifting and precision and the softer OBT gels are more flexible (high xStrain and lower G')

NASHA gels include Restylane Lyft, Restylane, and Restylane EYELIGHT. OBT gels include Restylane Defyne, Restylane Volyme, Restylane Kysse, and Restylane Refyne. HA, hyaluronic acid; G', storage modulus; NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

1. Data on file (MA-43049).

Lifting Capacity of Commonly Used HA Fillers^{1,2}

GAIN



G', storage modulus; HA, hyaluronic acid; NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

1. Micheels P, et al. *J Drugs Dermatol.* 2016 ;15(5):600-606. 2. Data on file - MA-43049

GALDERMA

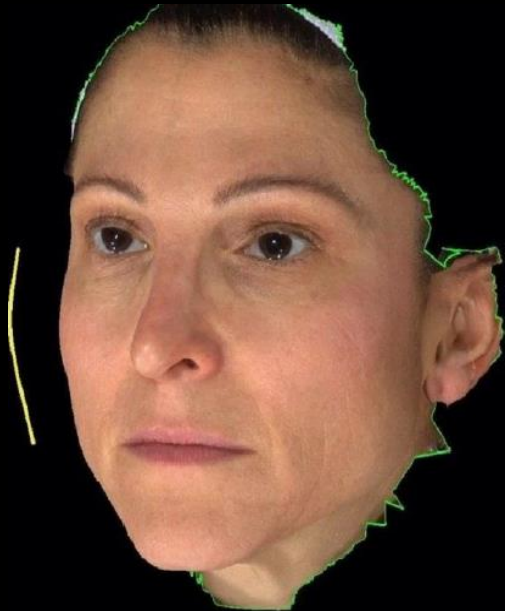
EST. 1981



Tissue Covarage

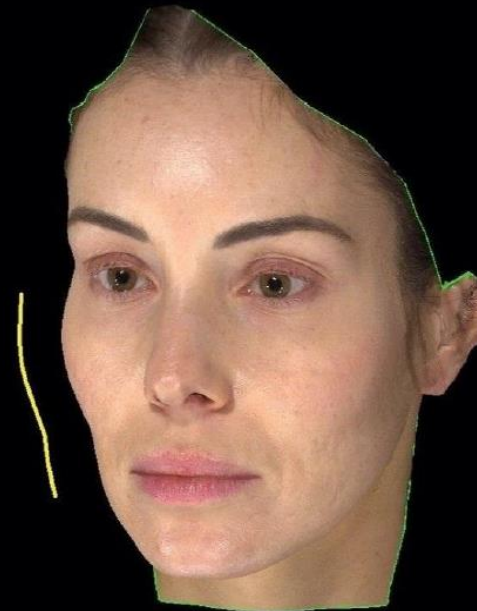
GAIN

Patients with different tissue coverages require fillers with different biomechanical characteristics¹



Thick tissue coverage

Patients with thick tissue coverage require fillers with enough lifting capacity (high G') to sufficiently correct their volume loss¹



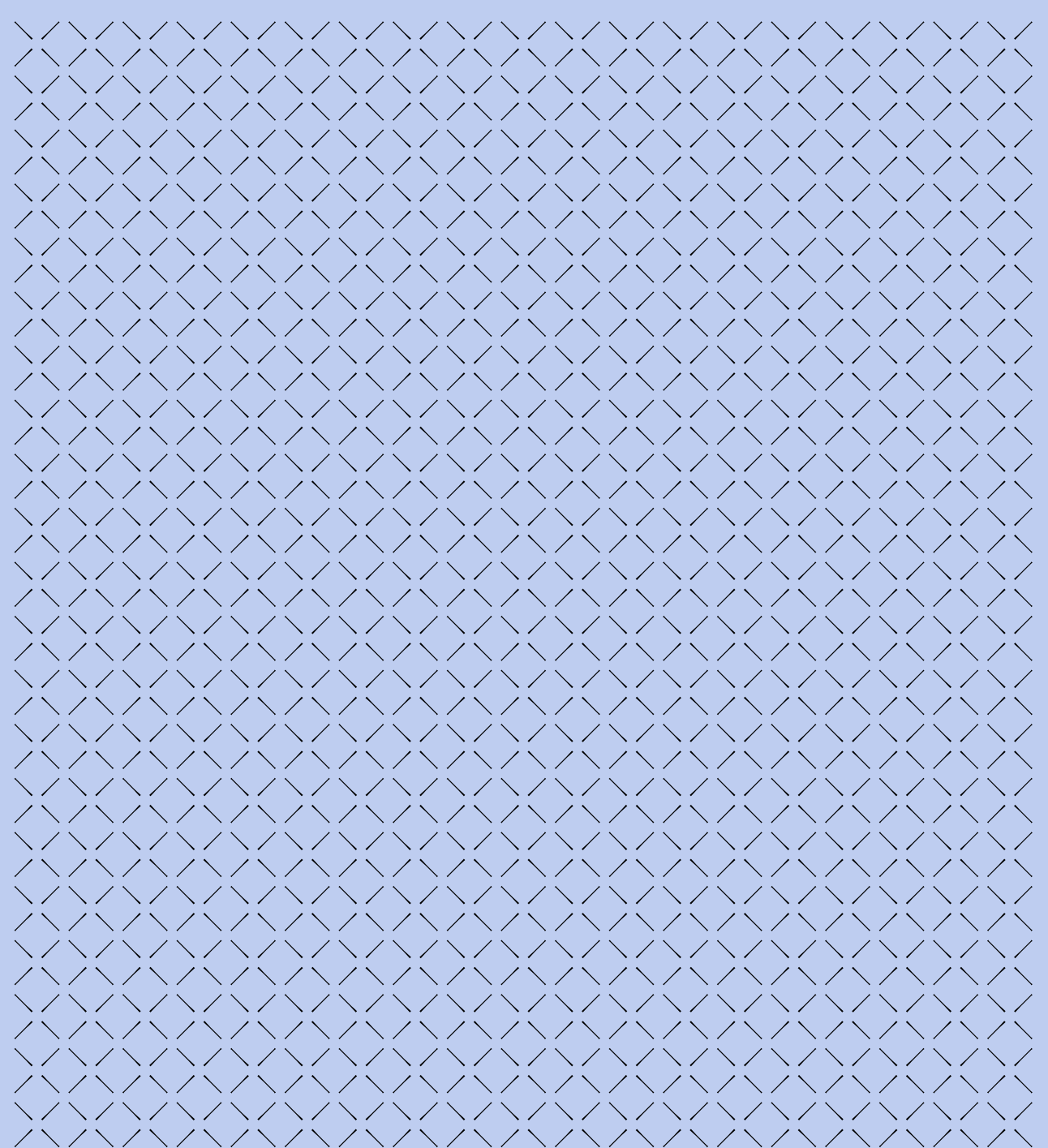
Thin tissue coverage

Patients with thin tissue coverage require dermal fillers with a lower lifting capacity (low G') because a greater lifting capacity would create visible contours and irregularities¹

G' , storage modulus.

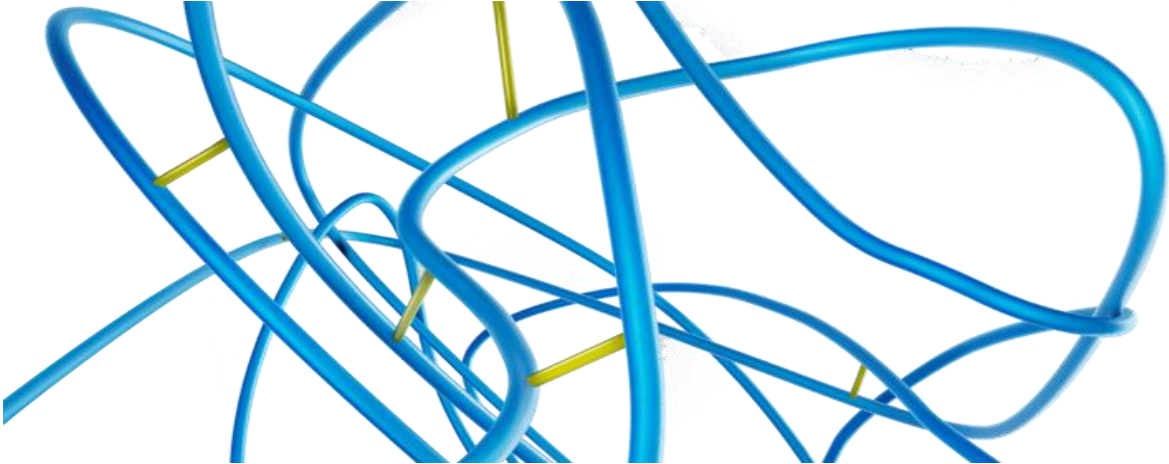
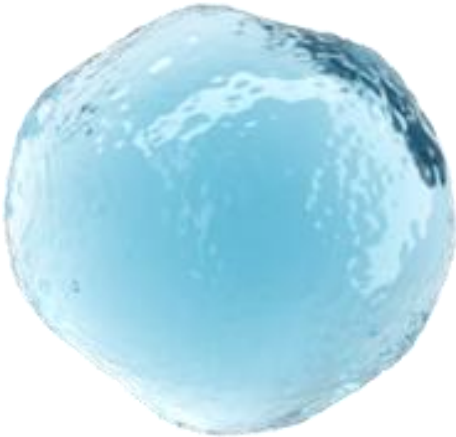
1. Nikolis A et al. *Aesthet Surg J Open Forum*. 2020;2(1):oja005

RESTYLANE®
SKINBOOSTERS™



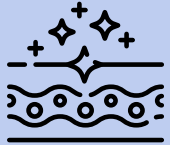
Restylane SKINBOOSTERS™ — the first stabilized HA-based injection for improving skin texture¹

NASHA™ uses the natural entanglement of HA strands for cross-linking to stabilize HA



HA, hyaluronic acid.
1. Galderma MA-33110_HD.
2. Edsman K, et al. Dermatol Surg 2012;38:1170–1179.

Why should I use Restylane® SKINBOOSTERS™?1



To improve skin quality and radiance

As a result of deep hydration and improved elasticity¹⁻³

For long-lasting results (up to 15 months)⁴ and high patient satisfaction⁵



For reliability and safety

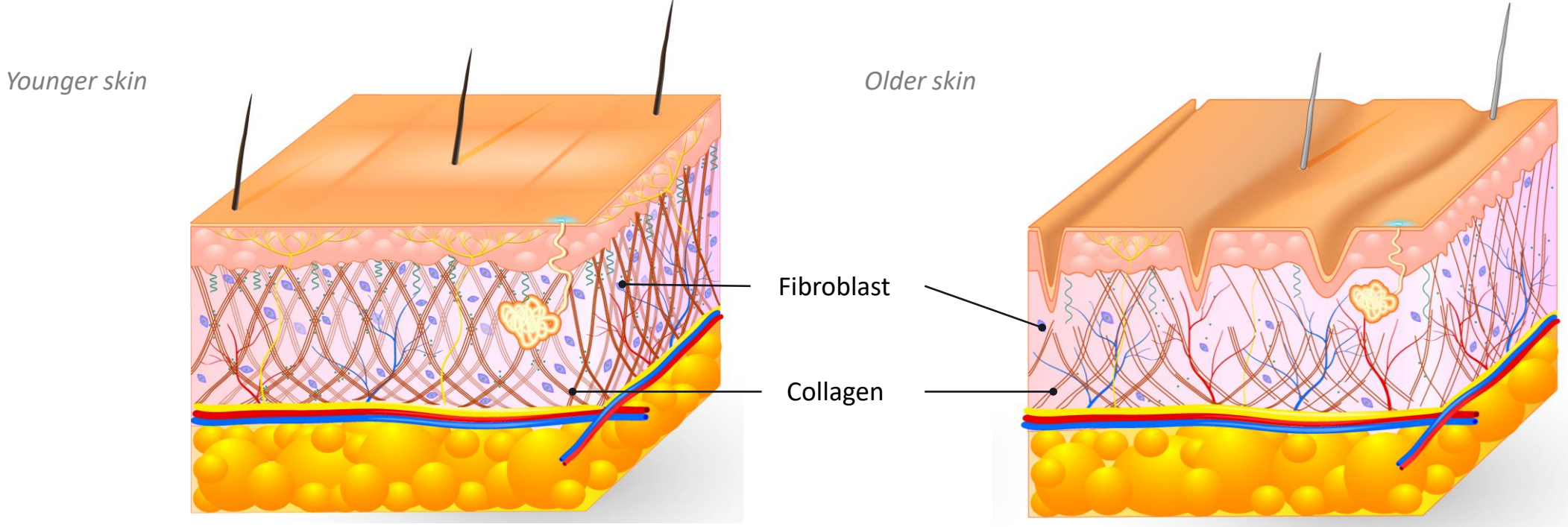
NASHA™ technology⁶ and the SmartClick injection system^{7,8}

Over 16 years' clinical experience⁹

1. Nikolis A, Enright KM. Clin Cosmet Investig Dermatol 2018;11:467-475.
2. Williams S, et al. J Cosmet Dermatol 2009;8(3):216-225.
3. Gubanova E, et al. J Drugs Dermatol 2015; 14:288-295.
4. Wu Y, et al. J Cosmet Dermatol 2020;19:1627-1635.
5. Lee BM et al. Arch Plast Surg 2015;42(3):282-287.

6. Edsman K, et al. Dermatol Surg 2012;38:1170-1179.
7. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01.
8. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.
9. Galderma data on file (MA-33110).

Stretched fibroblasts are critical for normal balanced production of collagen¹



Normal collagen production

Stretched fibroblasts are supported by healthy collagen fibres¹

Fragmentation of dermal collagen

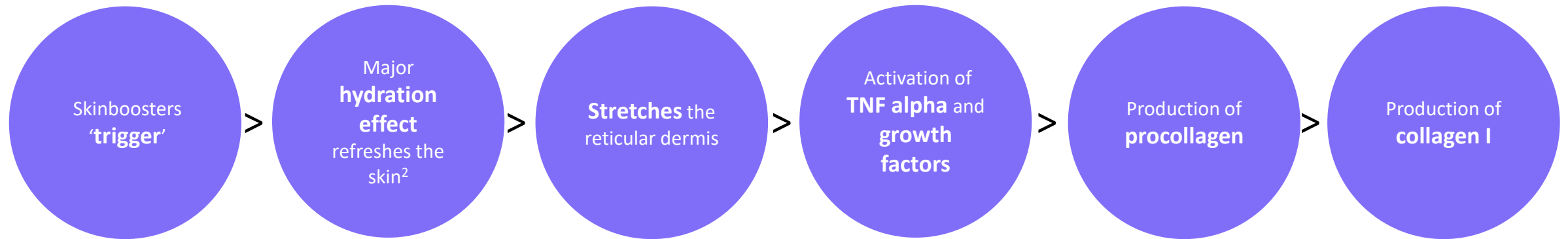
Fibroblasts collapse, and produce less collagen¹

Images: Designua. Aging Skin [Image ID 1687655]. Vectorstock: <https://www.vectorstock.com/royalty-free-vector/collagen-and-elastin-skin-aging-vector-1687655?refer=eml>. Purchased 27 October 2021.

1. Fisher G, et al. Arch Dermatol 2008;144:666–672.

Restylane® SKINBOOSTERS™ VITAL refreshes and rejuvenates the skin

Refreshing effect of Restylane SKINBOOSTERS VITAL injection may partially result from deposition of new collagen^{1,2}



TNF, tumour necrosis factor.

1. Fisher G, et al. Arch Dermatol 2008;144:666–672.

2. Wang F, et al. Arch Dermatol 2007;143:155–163.

GAIN

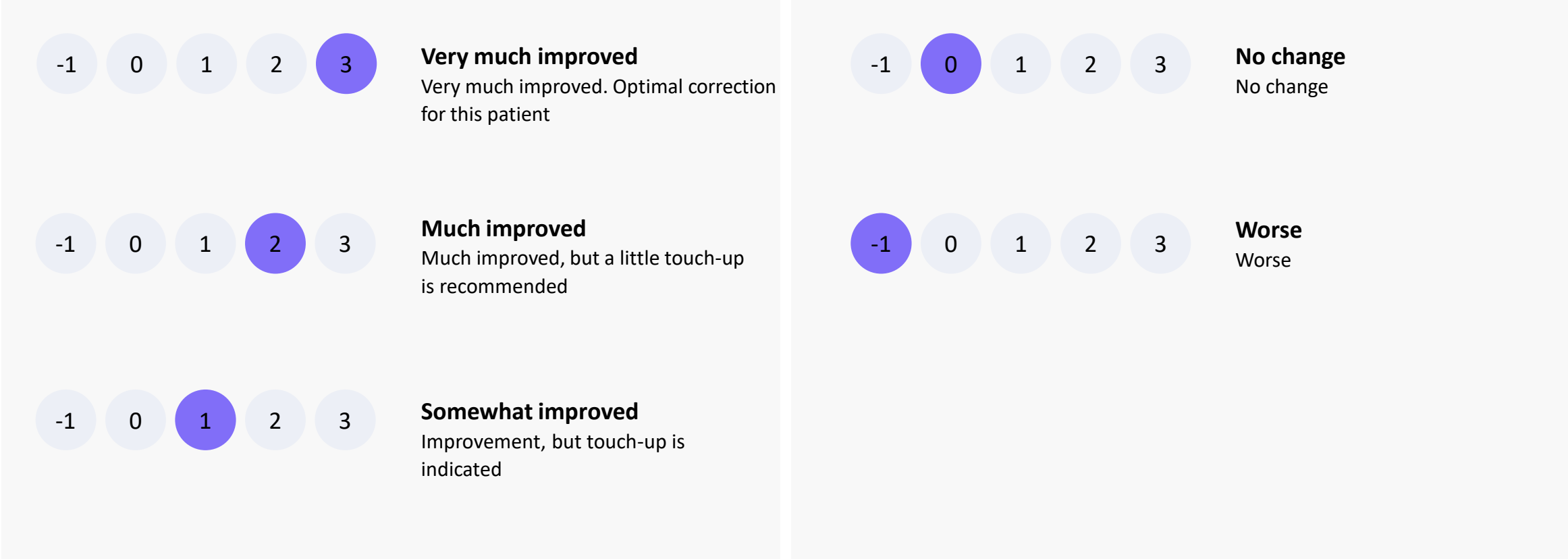
Restylane® SKINBOOSTERS™
have long-lasting results and
high patient satisfaction^{1,2}

1. Wu Y, et al. J Cosmet Dermatol 2020;19:1627–1635.

2. Lee BM et al. Arch Plast Surg 2015;42(3):282–287.

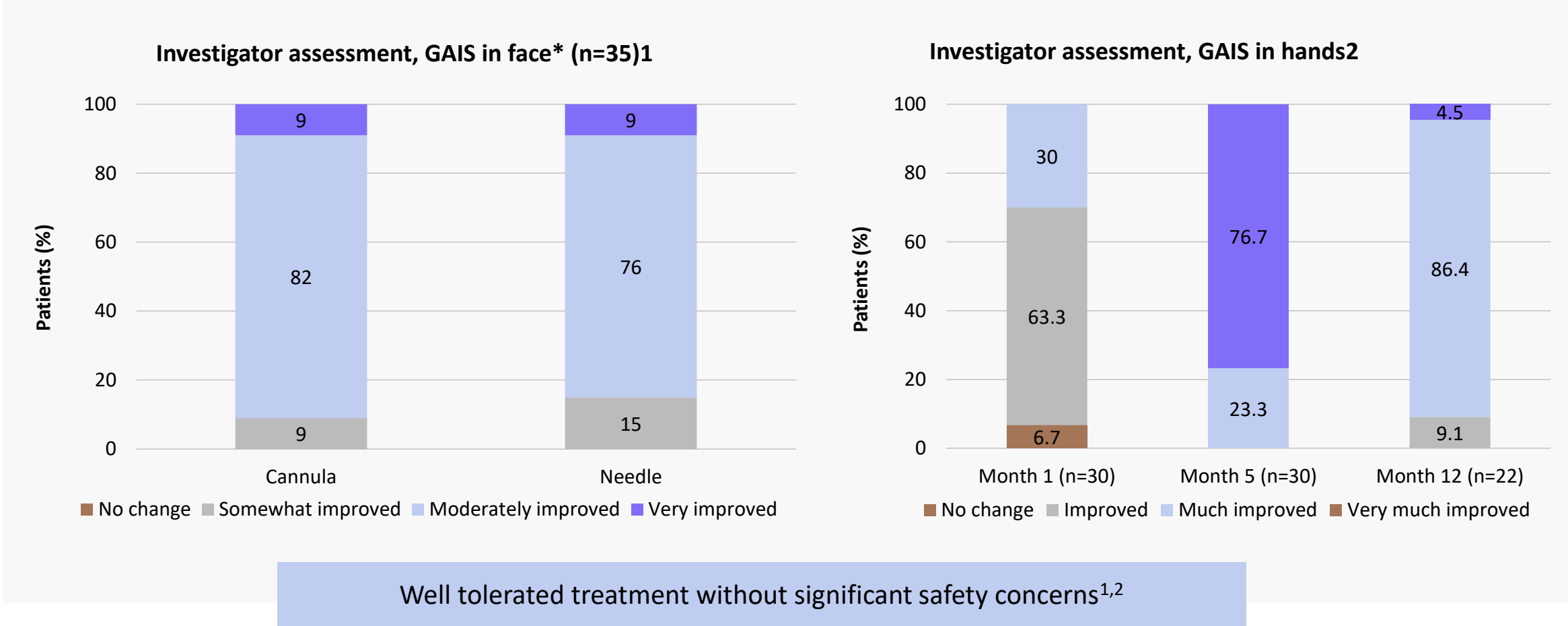
GALDERMA

Assessment tools used in studies — the Global Aesthetic Improvement Scale (GAIS)¹



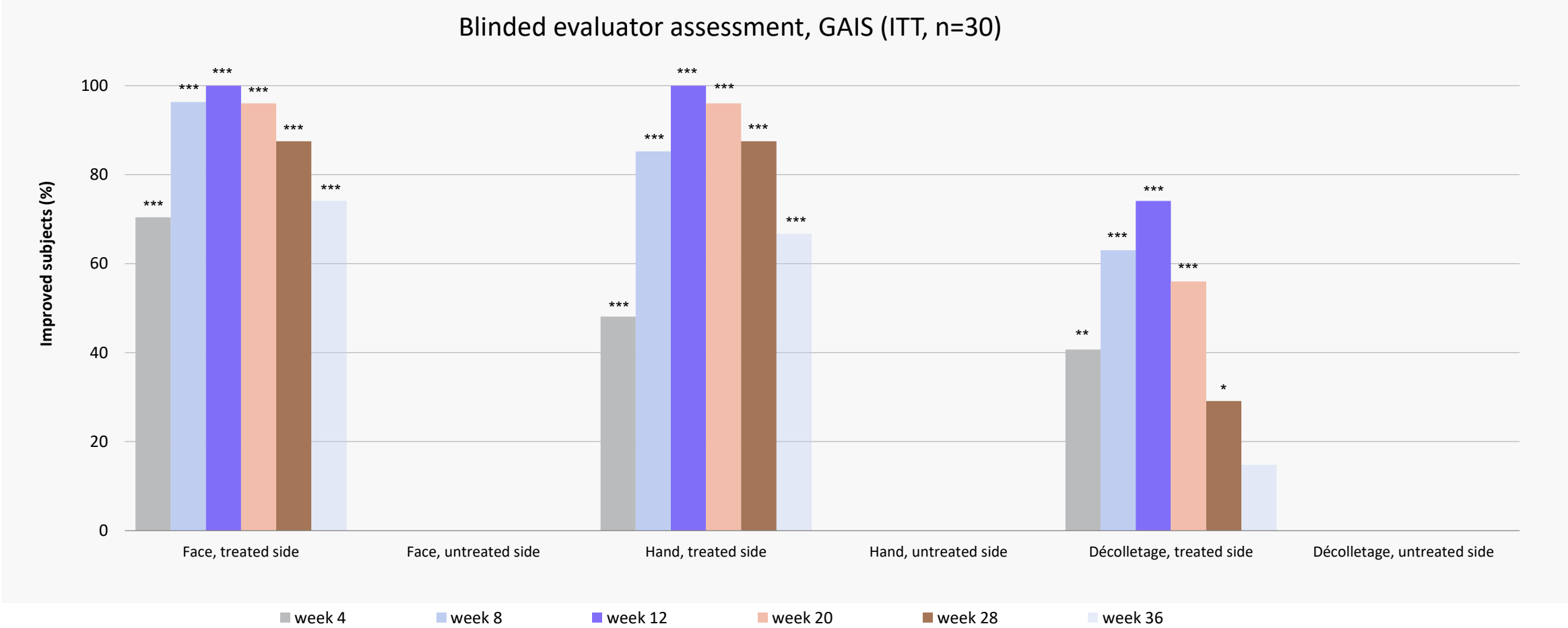
GAIS, Global Aesthetic Improvement Scale.
1. Gubanova E, et al. J Drugs Dermatol 2015;14:288–295.

Longlasting efficacy for face and aging hands 12 months after Restylane® SKINBOOSTERS™ VITAL



*Cheeks and crow's feet. GAIS, Global Aesthetic Improvement Scale.
1. Gubanova E, et al. Injections of stabilized hyaluronic acid with a sharp needle compared with a blunt microcannula for facial skin rejuvenation: 12-month result. Poster IMCAS 2015.
2. Gubanova E, et al. J Drugs Dermatol 2015;14:288-295.

Longlasting efficacy for face, hands and décolletage after Restylane® SKINBOOSTERS™ VITAL LIGHT



*P<0.05; **P<0.01; ***P<0.001 compared to untreated side.

GAIS, Global Aesthetic Improvement Scale.

1. Streker M, et al. J Drugs Dermatol 2013;12:990-994.

Restylane® SKINBOOSTERS™ hydrate the face, neck and hands, and are safe and well tolerated¹



Patients moved to the next hydration level — face went **from dry to moisturized** and hands went very dry to dry



Hydration levels of face, neck and hands **continuously improved** in with each consecutive visit



For the face, **significant results were seen** after only one of the three treatment sessions; for the neck and hands, two treatments were needed to significantly increase hydration levels



TEWL analyses revealed that **Restylane® SKINBOOSTERS™ were safe and well tolerated** and did not damage the stratum corneum's ability to retain moisture or effectively act as a barrier



TEWL scores on the hands indicate that **Restylane® SKINBOOSTERS™ may increase the skin's ability to retain moisture and reverse possible damage** to the skin's water-barrier function because after two and three injections the TEWL scores on the hands significantly decreased to below critical levels

TEWL, transepidermal water loss.

1. Nikolis A, Enright KM. Clin Cosmet Investig Dermatol 2018;11:467–475.



GAIN

The Smartclick™ system
enables precision and control

GALDERMA

GAIN

The Smartclick™ system
enables precision and control

GALDERMA

The Smartclick™ system increases precision and control

Smartclick™ activation button

Comfortable finger grip

Ergonomic thumb rest

Luer lock

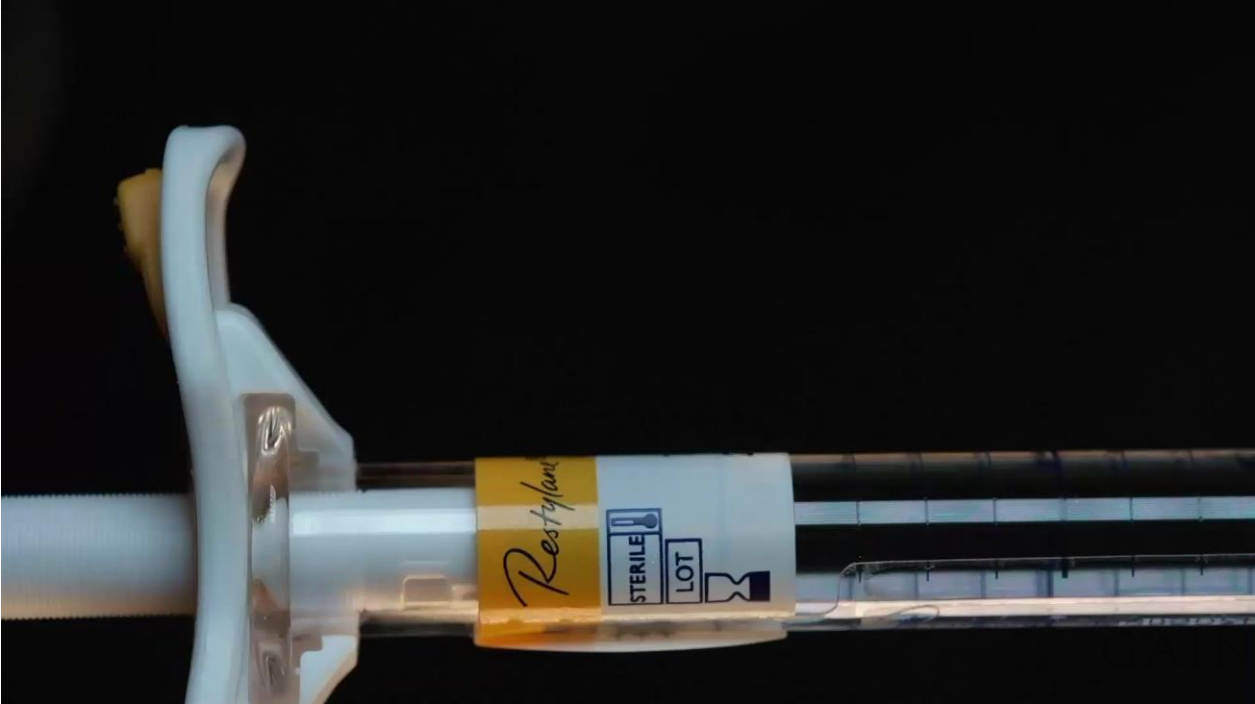
Tamper-proof seal



reddot award 2014
winner

1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01. 2. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

The SmartClick™ audible dosage indicator delivers ~10 µL microdroplets for every click that you hear^{1,2}



1 mL delivers approximately 100 doses^{1,2}

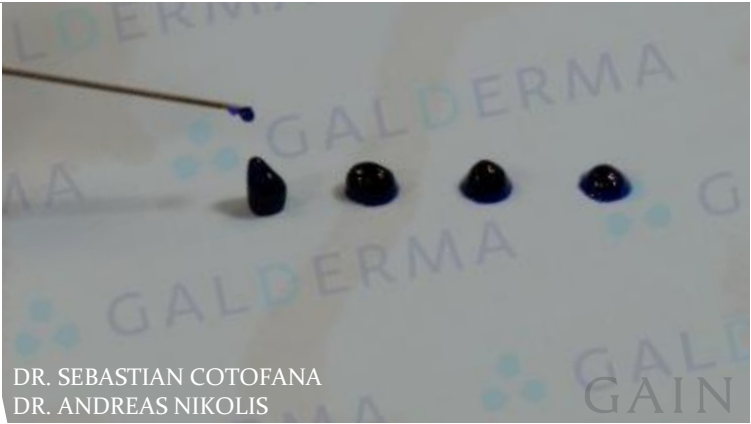


Allows for focus on injection technique, rather than the amount injected

1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01. 2. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

Restylane® Skinboosters™ Vital injection using the SmartClick™ vs not using SmartClick™

The Smartclick™ system increases precision and control





GAIN

Treatment

GALDERMA

Restylane® SKINBOOSTERS™ VITAL and VITAL LIGHT improve skin elasticity in the face, neck and hands



Restylane SKINBOOSTERS VITAL LIGHT lidocaine¹

To improve skin elasticity in:

- Lower cheek/jawline
- Face
- Upper neck^{1*}



Restylane SKINBOOSTERS VITAL lidocaine²

To improve skin smoothness, appearance, and elasticity in:

- Lower cheek/jawline
- Face
- Dorsal hands^{2*}

*Indications may change for different markets.

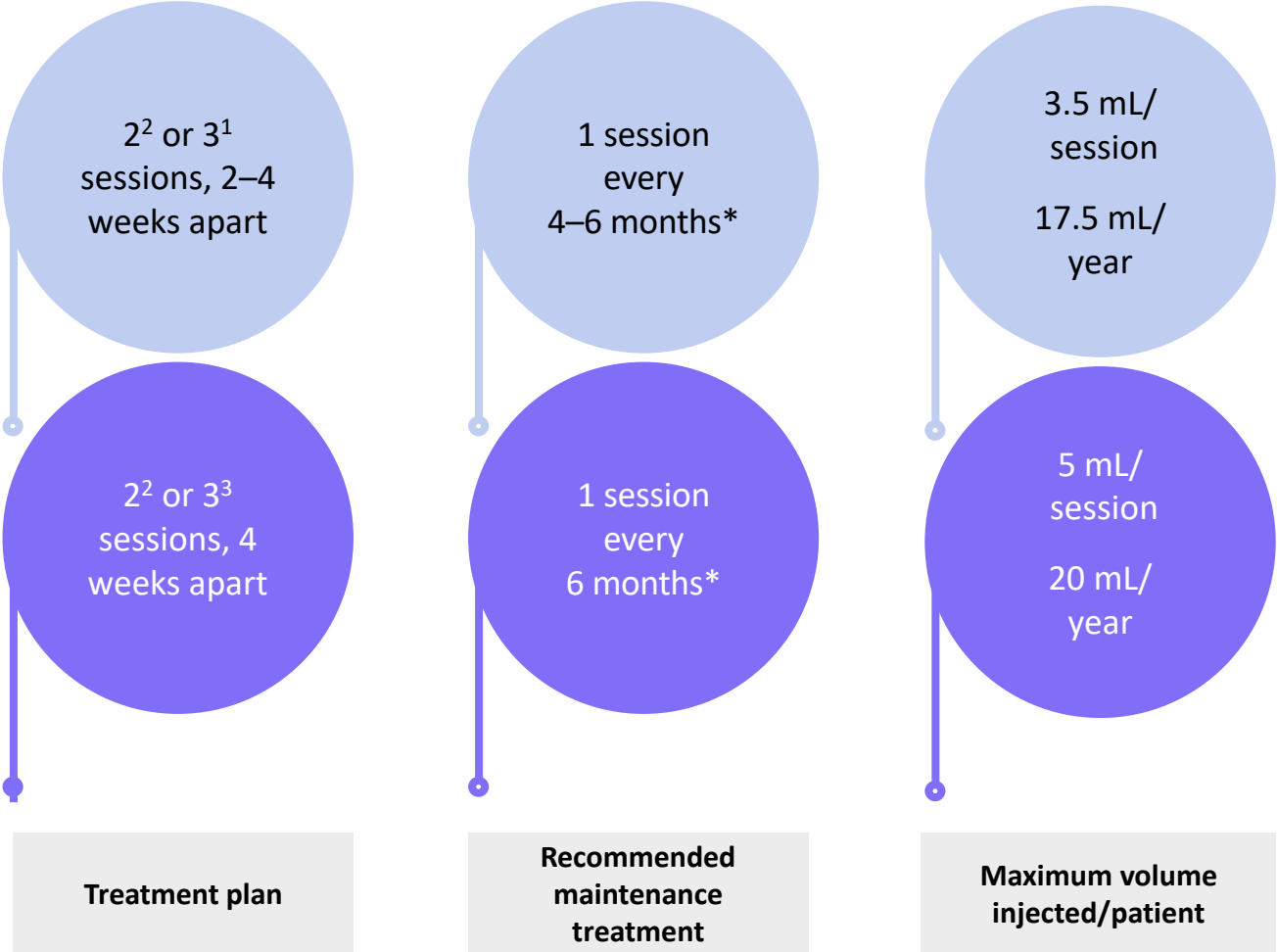
1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01. 2. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

The Restylane® SKINBOOSTERS™ treatment plan

Restylane SKINBOOSTERS VITAL LIGHT lidocaine¹



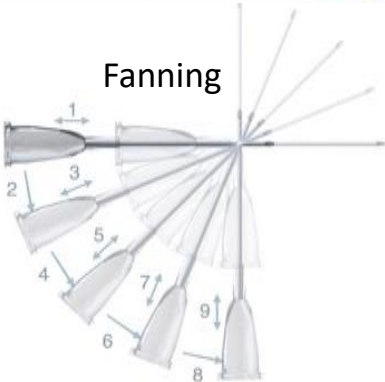
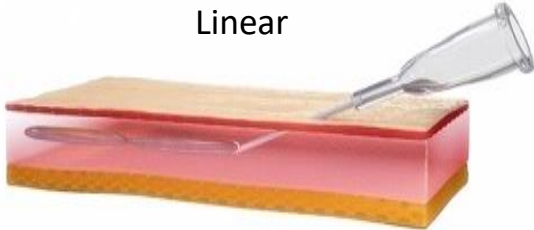
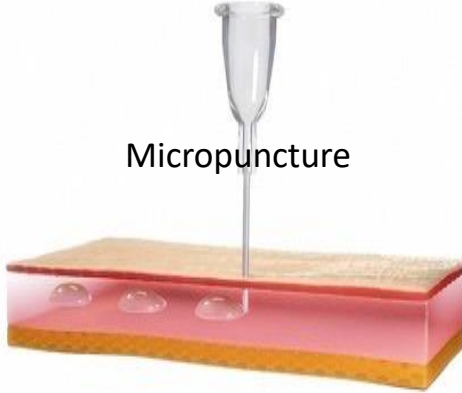
Restylane SKINBOOSTERS VITAL lidocaine³



*Results and patient preferences may vary.
 1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01.
 2. Nikolis A, Enright KM. Clin Cosmet Investig Dermatol 2018;11:467–475.
 3. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

Restylane® SKINBOOSTERS™ are injected into the dermis

Restylane® SKINBOOSTERS™ VITAL injection techniques



Restylane® SKINBOOSTERS™ VITAL LIGHT is injected into the mid-dermis
 Restylane® SKINBOOSTERS™ VITAL is preferably injected in deeper dermis^{1,2}

1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01. 2. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

Injection technique, steps 1 and 2



- Engage the SmartClick™ system
- Assess the direction of the collapsed skin lines (wrinkles)



- Stretch the skin to ensure the needle is located in the dermal layer

Injection technique, steps 3 and 4



- Introduce the needle at 30° to the deep dermal plane (you should see the shape of the needle, but not the needle itself)



- Move the needle retrograde mode perpendicular to the cheek line and click 2–3 times along the movement path (space boluses evenly across the length of the retracting needle)
- Single microboluses can be injected with separate injections as well

Restylane® SKINBOOSTERS™ VITAL LIGHT is injected into the mid-dermis
 Restylane® SKINBOOSTERS™ VITAL is preferably injected in deeper dermis^{1,2}

Injection tips



Mark the treatment area before starting the procedure

Inject at rest, injecting while the patient is smiling makes the procedure more painful



Insert the needle almost parallel to the skin surface to allow injection to the deep dermis

Using horizontal delivery reduces trauma to the skin



If the needle is visible when you introduce it to the skin, withdraw and reintroduce

A visible needle suggests placement is too superficial



Change your needle after delivery of 0.5 ml of the product

Inject at rest, injecting while the patient is smiling makes the procedure more painful

GAIN

Performance
&
Safety Data

GALDERMA

Restylane®: The Gold Standard of HA Fillers

GAIN






Restylane is the standard against which most other fillers are judged and is the most common active comparator in clinical trials



HA, hyaluronic acid.

Clinical Data

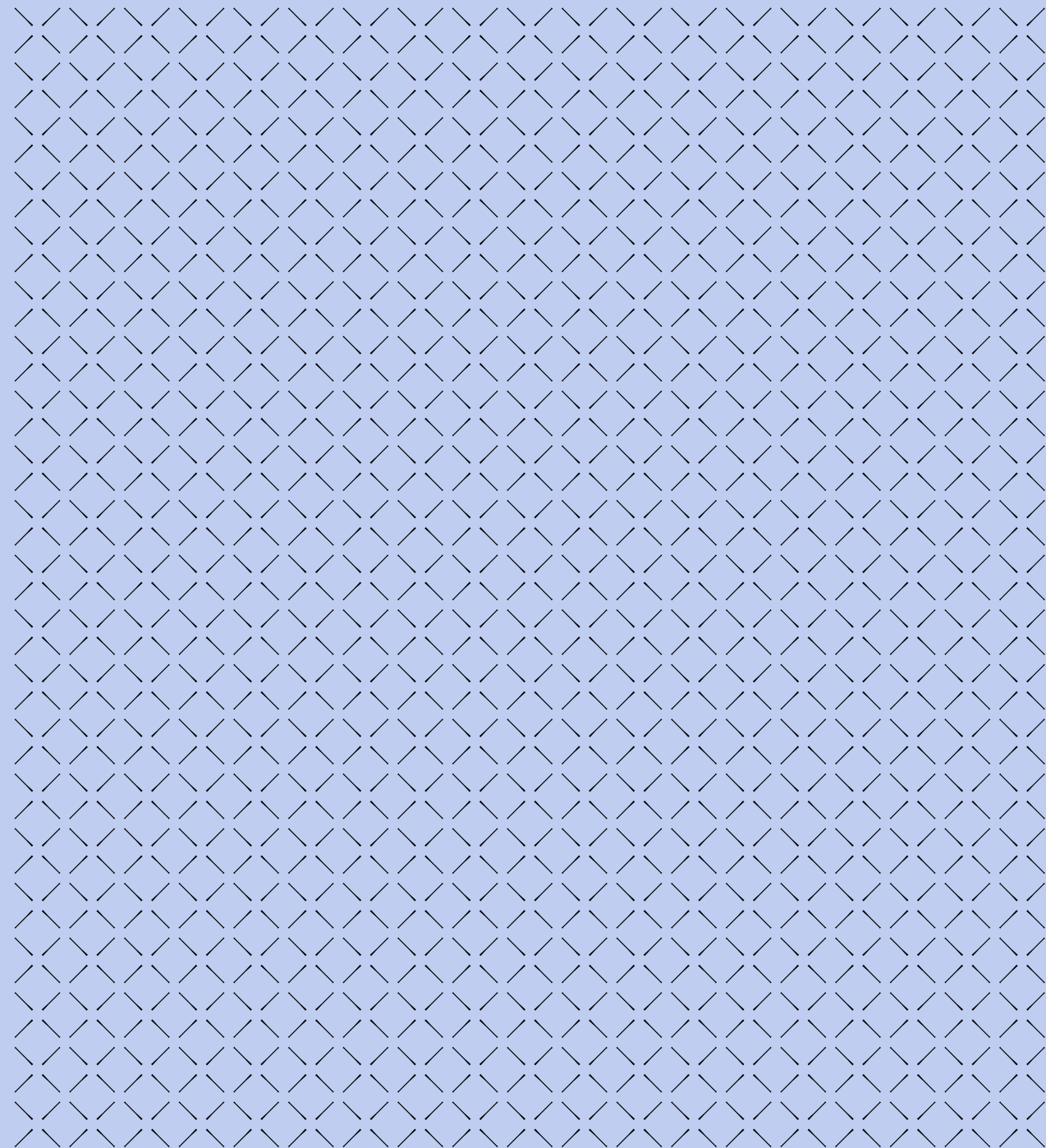
GAIN

	 NASHA	 OBT
Clinical Trials 	>30 (completed or in progress)	>20 (completed or in progress)
Clinical Publications 	~95	~25
Patients Treated 	>2200 in sponsored trials ~4000 in independent studies (eg, not sponsored by Galderma)	>3000 in sponsored trials

NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

GALDERMA

Duration



Duration of Efficacy

GAIN

Randomized, split-face, evaluator-blinded trial (N=68), with optional touch-up at week 3

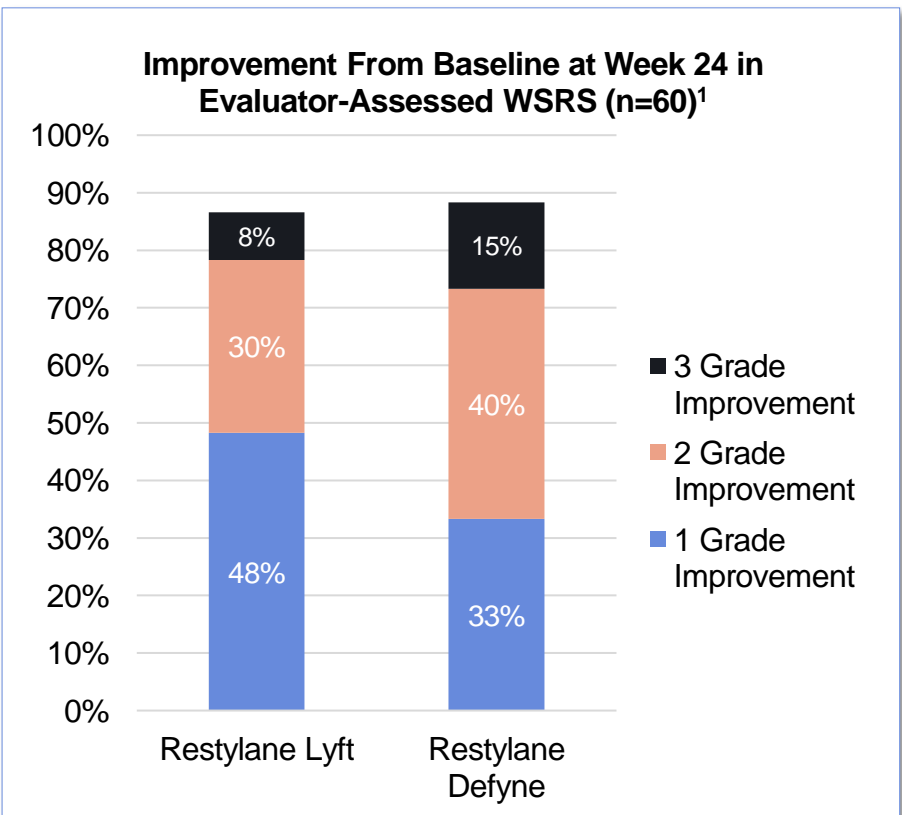
Study product	RESTYLANE LYFT and Emervel Deep (equivalent to Restylane Defyne, but without lidocaine)
Indications	Nasolabial folds

- Both Restylane Lyft and Restylane Defyne were effective and well tolerated for the treatment of severe NLFs^{1,2}
- Responder rates (≥ 1 grade improvement in WSRS)²:

90% Defyne group

88% Lyft group

- Overall response rate over time was 79%–99%²
- **~80% of patients maintained ≥ 1 grade improvement in WSRS for at least 12 months**



NLF, nasolabial fold; WSRS, Wrinkle Severity Rating Scale.

1. Ascher B, et al. *J Cosmet Dermatol*. 2011;10:94-98; 2. Ascher B, et al. *Dermatol Surg*. 2017;43:389-395.

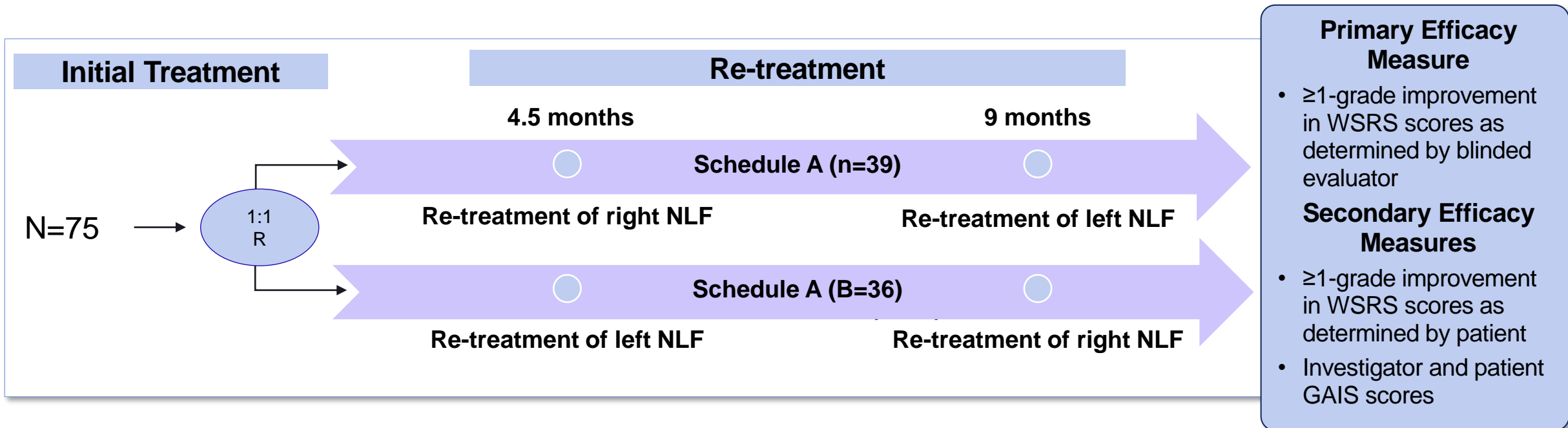
GALDERMA

Duration of Efficacy

GAIN

30-month (primary and extension), randomized, split-face, evaluator-blinded trial (N=75)^{1,2}

Study product	RESTYLANE
Indications	Nasolabial folds



GAIS, Global Aesthetic Improvement Scale; NLF, nasolabial fold; R, randomization; WSRS, Wrinkle Severity Rating Scale.

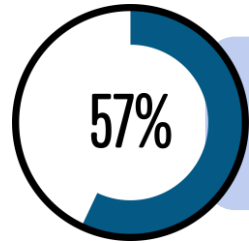
1. Narins RS, et al. *Dermatol Surg.* 2008;34(suppl 1):S2-8; discussion S8; 2. Narins RS, et al. *Dermatol Surg.* 2011;37(5):644-650.

GALDERMA

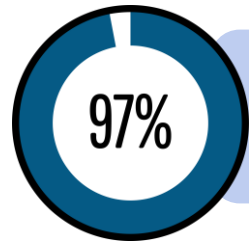
Duration of Efficacy

GAIN

30-month (primary and extension), randomized, split-face, evaluator-blinded trial (N=75)¹



improved by ≥ 2 WSRS grades at 18 months (improvement starting at 4.5 months)¹



showed ≥ 1 grade improvement in WSRS for up to 18 months after initial treatment¹



36 months of continuous response observed in patients re-treated at 18 months in the extension study²

- Re-treatment with Restylane at 4.5 or 9 months led to **persistent efficacy for up to 18 months**¹
- Efficacy continued to 36 months in patients re-treated at 18 months²
- Mean injection volume decreased $\sim 50\%$ with each re-treatment²

WSRS, Wrinkle Severity Rating Scale.

1. Narins RS, et al. *Dermatol Surg.* 2008;34(suppl 1):S2-8; discussion S8; 2. Narins RS, et al. *Dermatol Surg.* 2011;37(5):644-650.

Duration of Efficacy

GAIN

6-month open-label study at 5 centers in France and Germany in multiple aesthetic indications (N=77)¹

Inclusion Criteria

- Augmentation for ≥ 3 indications
 - LRS score 3–4 for NLF
 - LRS ≥ 2 for periorbital lines, cheek folds, upper lip lines, marionette lines
 - LFGS 0–2 for upper or lower lip

Indications

Cheeks, cheek folds, NLFs, periorbital lines, tear troughs, upper lip lines, lips, marionette lines

SKU*	Indication
Restylane Defyne	Deep dermis (moderate to deep wrinkles)
Restylane Refyne	Mid-dermis (moderate to deep wrinkles)
Restylane Volyme	SC fat tissue (correction of facial volume)
Restylane Fynesse [†]	Superficial dermis (periorbital lines, upper lip lines, cheek folds)
Restylane Kysse	Submucosal layer (restore or augment the volume of the lips)

*Most frequently used in NFLs and MLs were Restylane Defyne and Refyne; [†]Product being phased out.

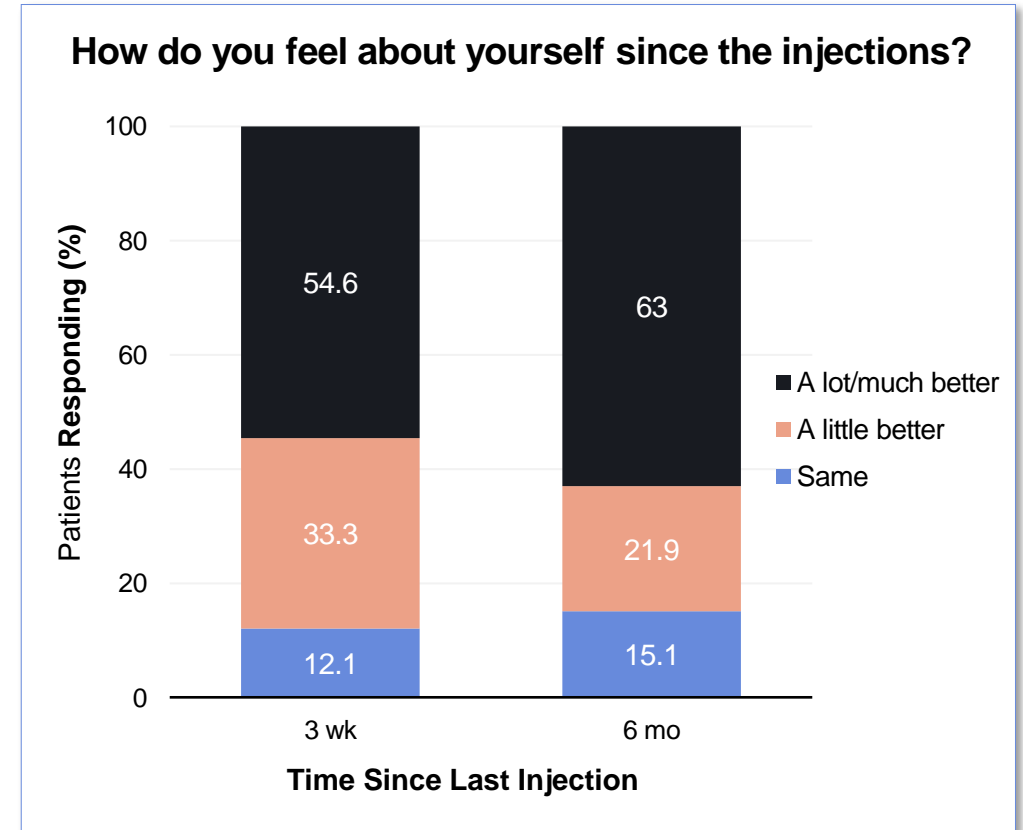
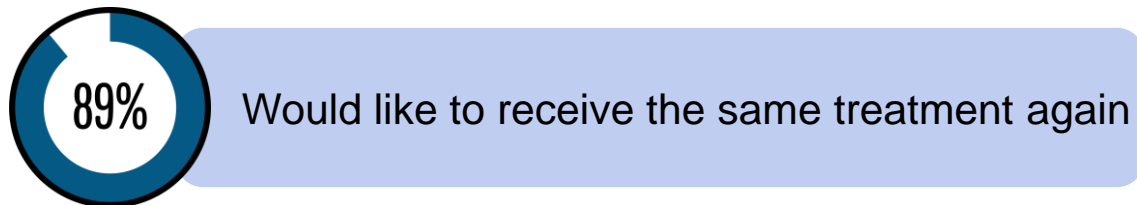
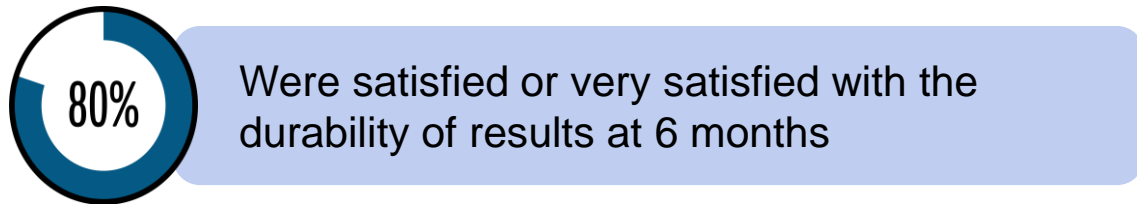
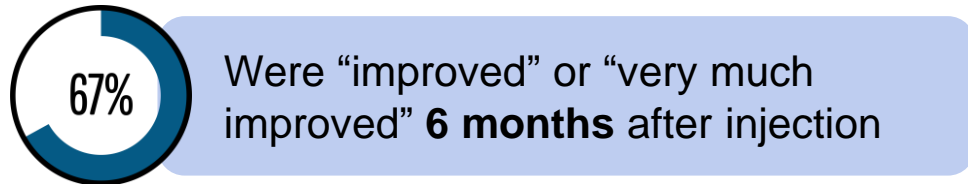
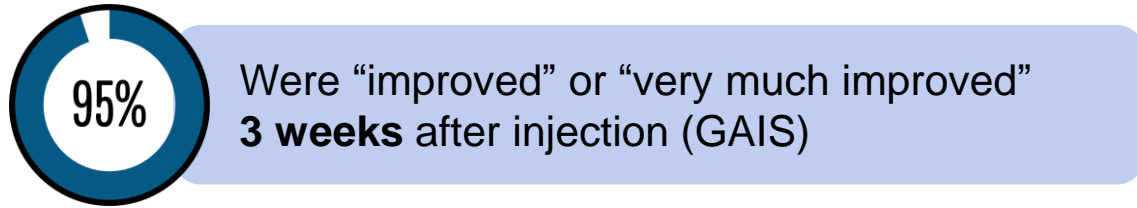
LFGS, Lip Fullness Grading Scale; LRS, Lemperle Rating Scale; NLF, nasolabial fold; ML, marionette line; SC, subcutaneous; SKU, stock keeping unit.

1. Rzany B, et al. *Dermatol Surg.* 2012;38(7 pt 2):1153-1161.

Duration of Efficacy

GAIN

6-month open-label study at 5 centers in France and Germany in multiple aesthetic indications (N=77)¹



Aesthetic improvement and high satisfaction were sustained for 6 months posttreatment

GAIS, Global Aesthetic Improvement Scale.

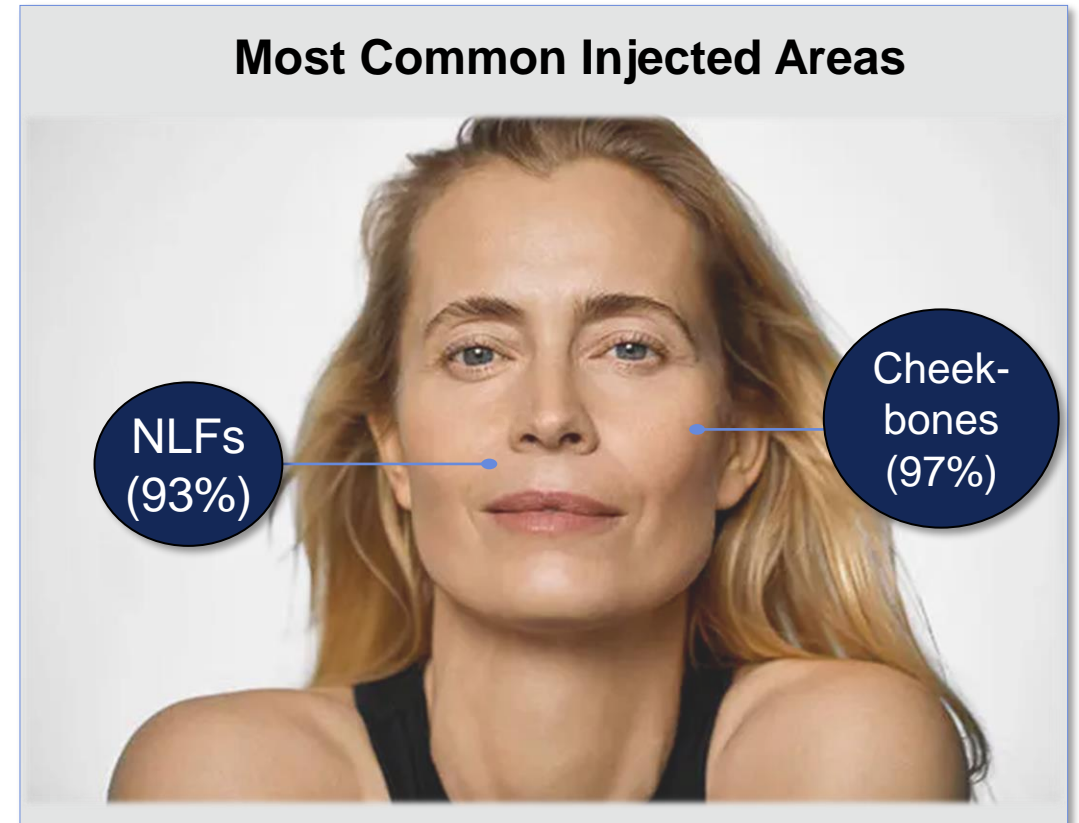
1. Rzany B, et al. *Dermatol Surg.* 2012;38(7 pt 2):1153-1161.

Duration of Efficacy

GAIN

18-month open-label study of full-face rejuvenation with Restylane Volyme (N=60)^{1*}

- Treatment for 6 indications
 - Chin
 - Temples
 - Jawline
 - Cheek
 - Cheekbones
 - NLFs
- Most patients received treatment at 3–4 sites
- Efficacy assessments: GAIS, VLS, LRS
- 3-D digital imaging to calculate volume variations



*Mean injection volume of 7.4±2.8 mL.

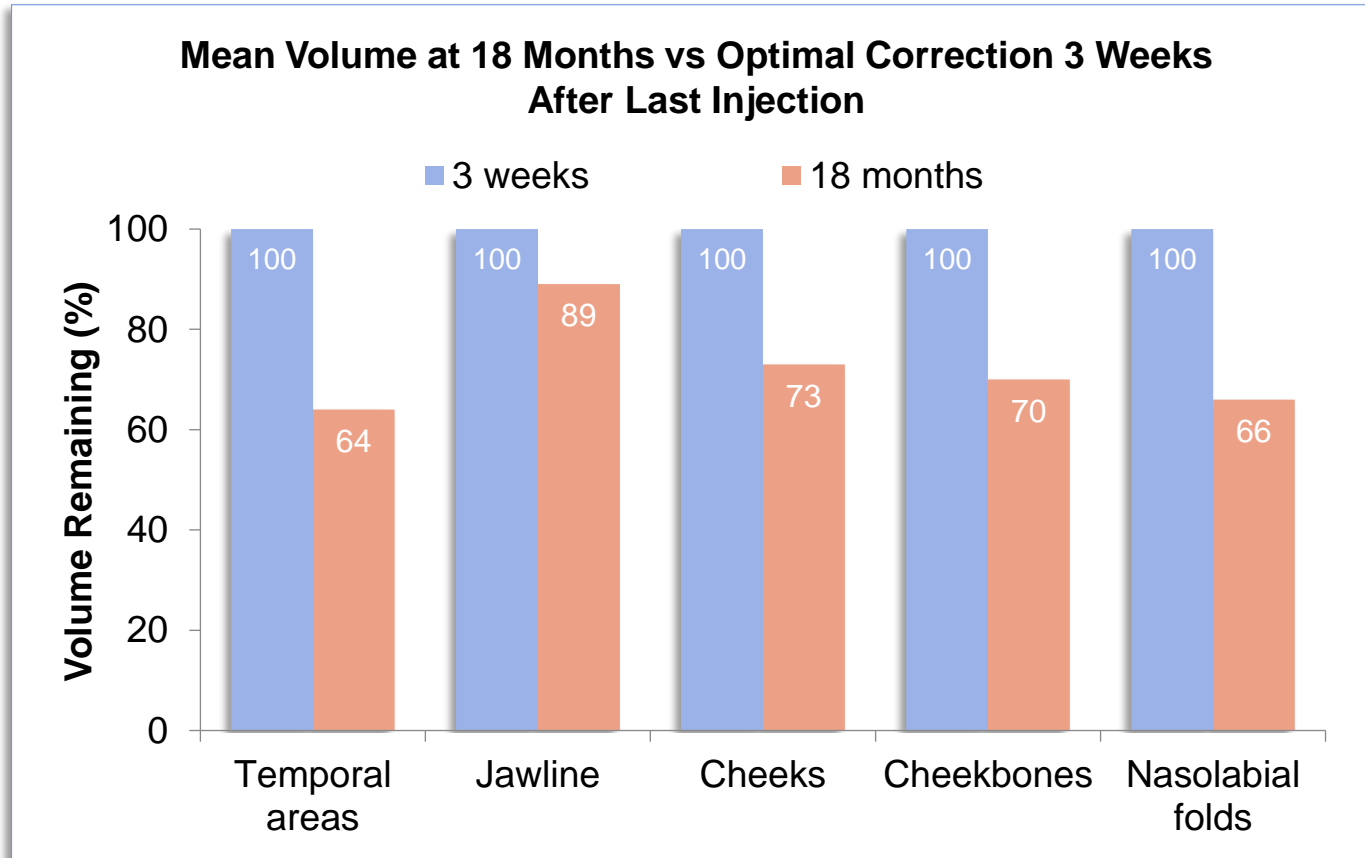
GAIS, Global Aesthetic Improvement Scale, LRS, Lemperte Rating Scale; NLF, nasolabial fold; VLS; Volume Loss Scale.

1. Talarico S, et al. *Dermatol Surg.* 2015;41:1361-1369.

Duration of Efficacy

GAIN

18-month open-label study of full-face rejuvenation with Restylane Volyme (N=60)¹



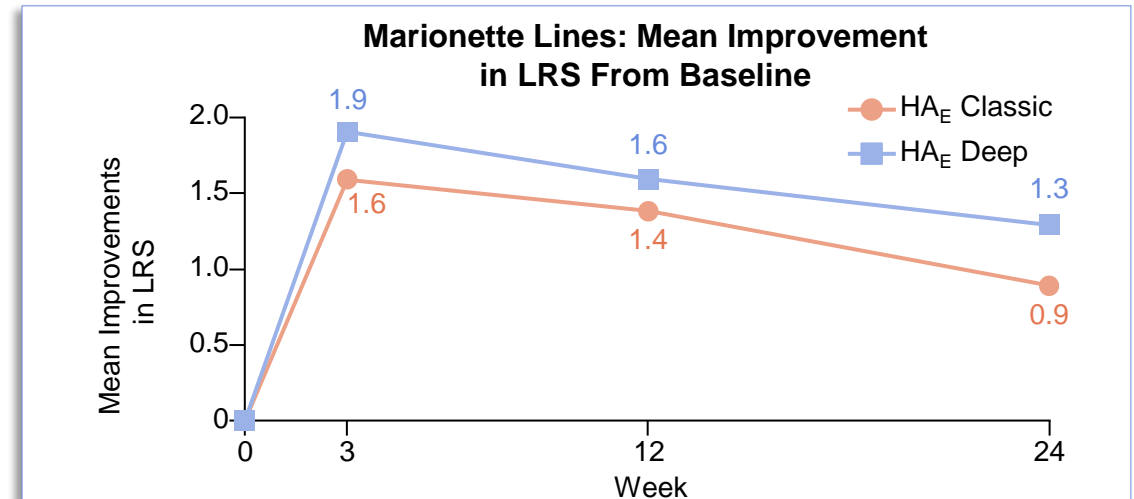
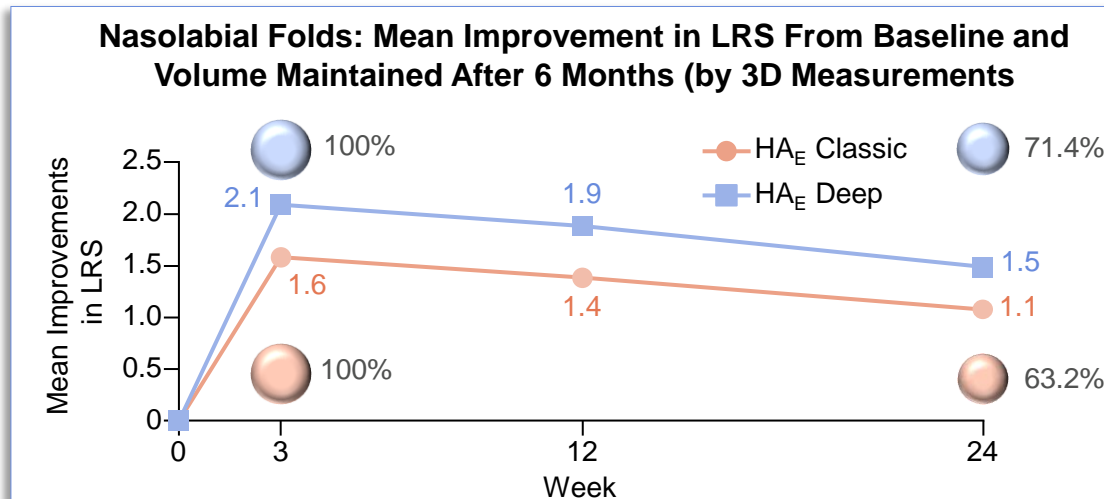
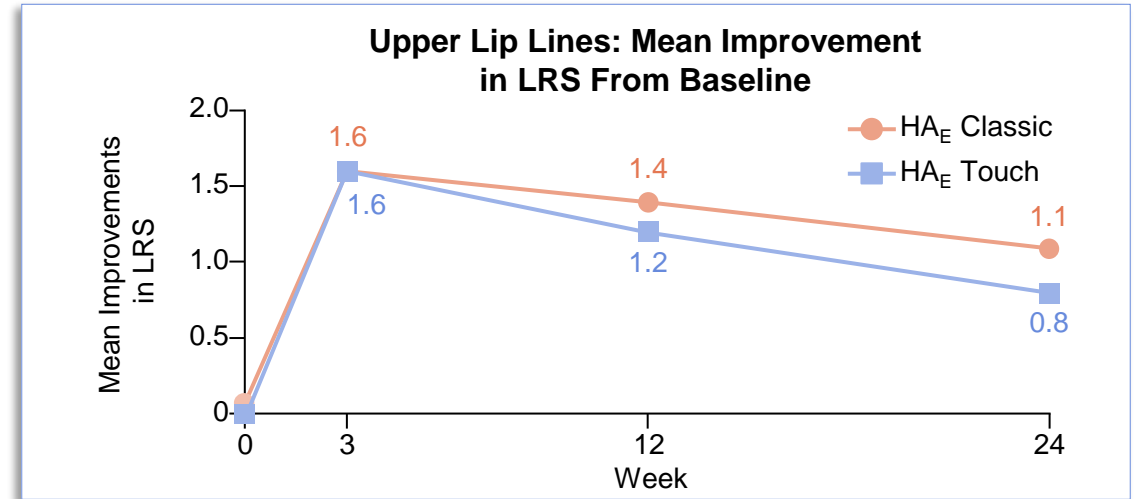
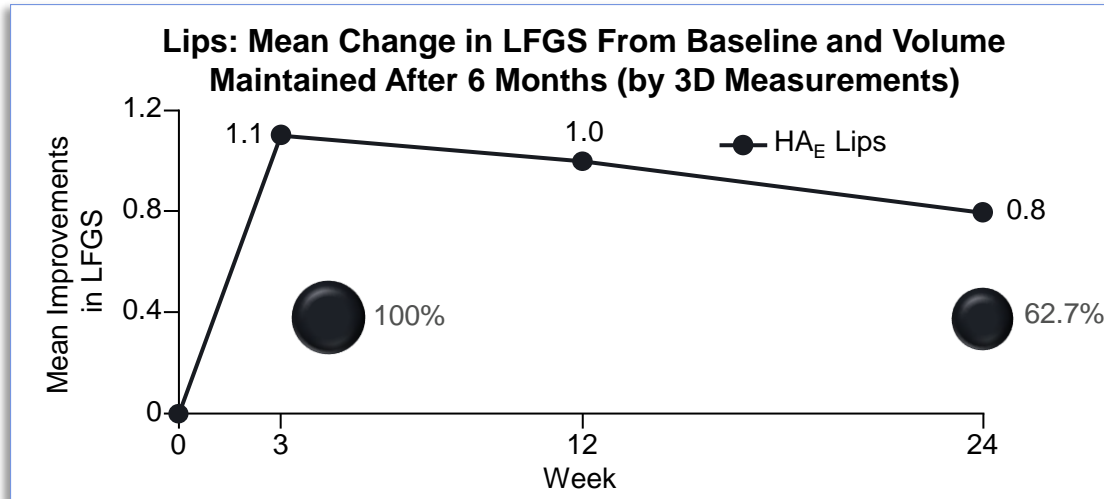
- Full-face restoration with Restylane Volyme produced durable volume improvement in mobile midface areas
- Patients reported high satisfaction with injection comfort, aesthetic outcomes, and durability of results
- All patients indicated that they would recommend the treatment to family/friends and would like to receive the treatment again

>60%
of volume
increase was
sustained at
18 months for all
indications

1. Talarico S, et al. *Dermatol Surg.* 2015;41:1361-1369.

Persistent Efficacy 6 Months After Injection

GAIN

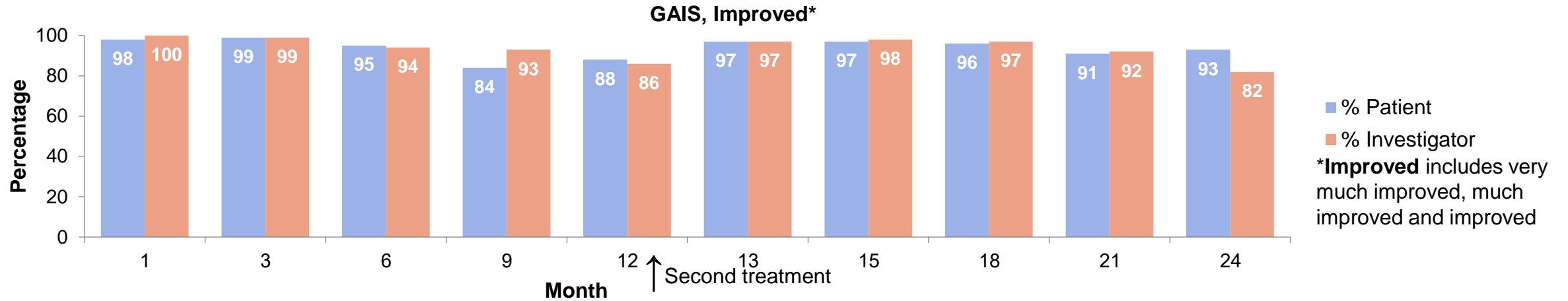


- The spheres at week 24 represent the volume maintained compared to the volume obtained at optimal correction (week 3)

Restylane and Restylane Lyft – Long-Lasting Results

GAIN

Open, evaluator-blinded, noncomparative, multicenter study to assess the safety and efficacy of Restylane and Restylane Lyft for facial augmentation in Asian population^{1,2}

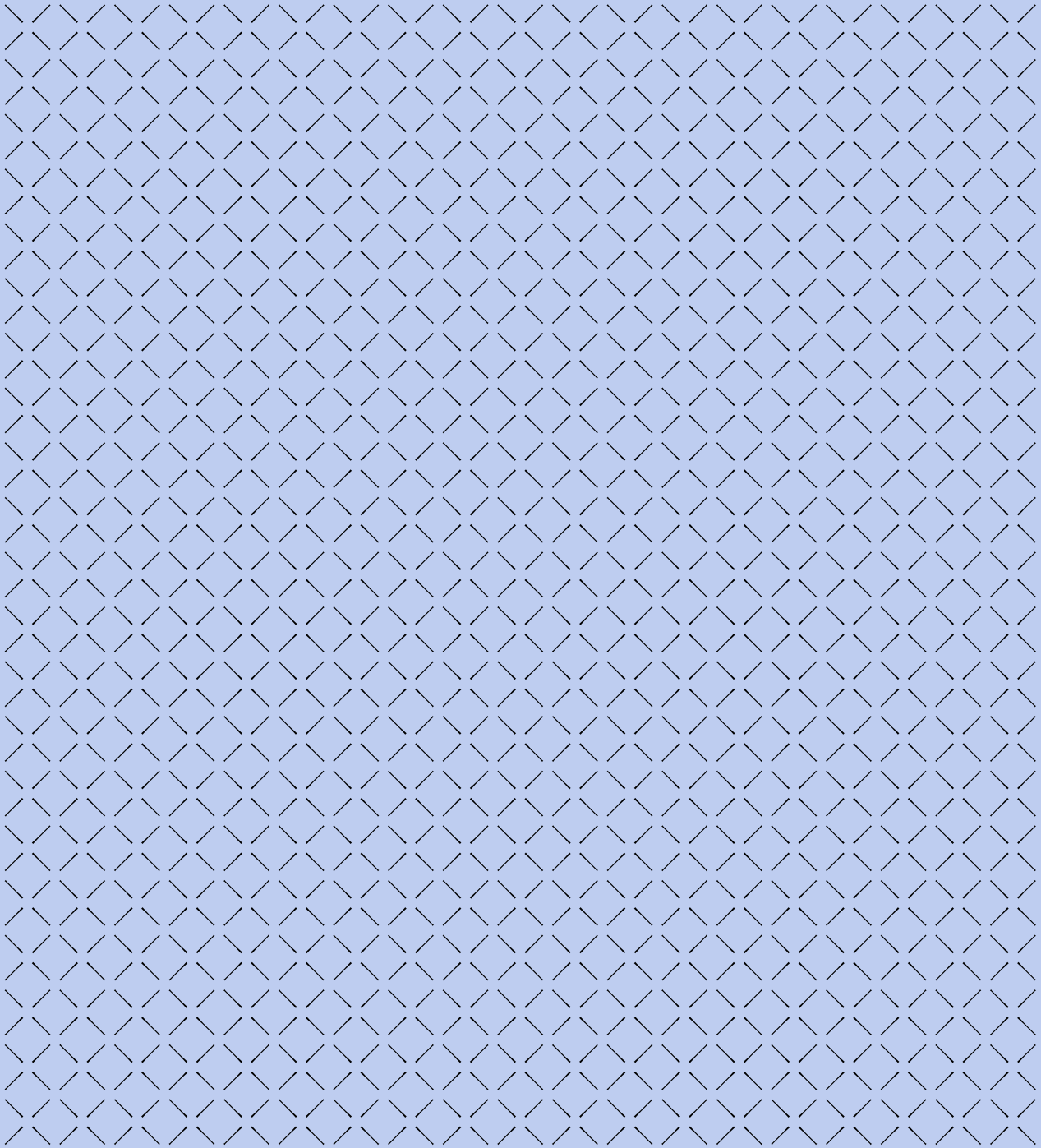


Conclusions GAIS	
Patient self-assessment	Investigator assessment
<ul style="list-style-type: none"> 88% and 93% assessed themselves as improved up to 12 months after the first and second treatment, respectively 	<ul style="list-style-type: none"> ≥82% of patients were assessed by the investigator as improved up to 12 months after both treatments

≥80%
of patients were satisfied 12 months after both treatments

GAIS, Global Aesthetic Improvement Scale.
 1. Study 05DF1315, Data on file; 2. Huang S and Tsai T. *J Drugs Dermatol.* 2020;19(9):836-842.

Patient Satisfaction



Patient Satisfaction

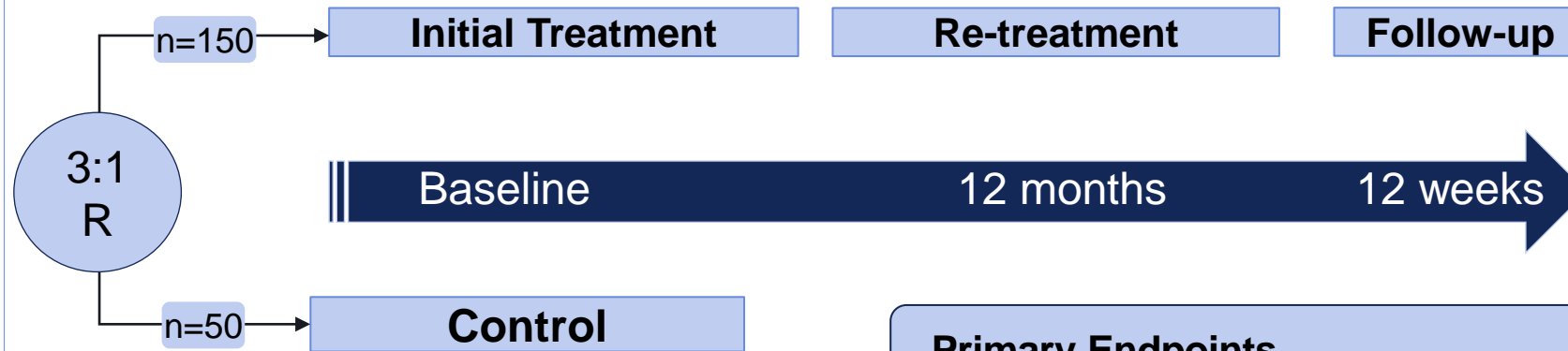
GAIN

15-month, randomized, evaluator-blinded, no-treatment control study (N=200)¹

Study product RESTYLANE LYFT Lidocaine

Indications Midface augmentation

Study Design



Primary Endpoints

- ≥ 1 -grade improvement in MMVS on each side of face at 8 weeks as assessed by blinded evaluator

Secondary Endpoints

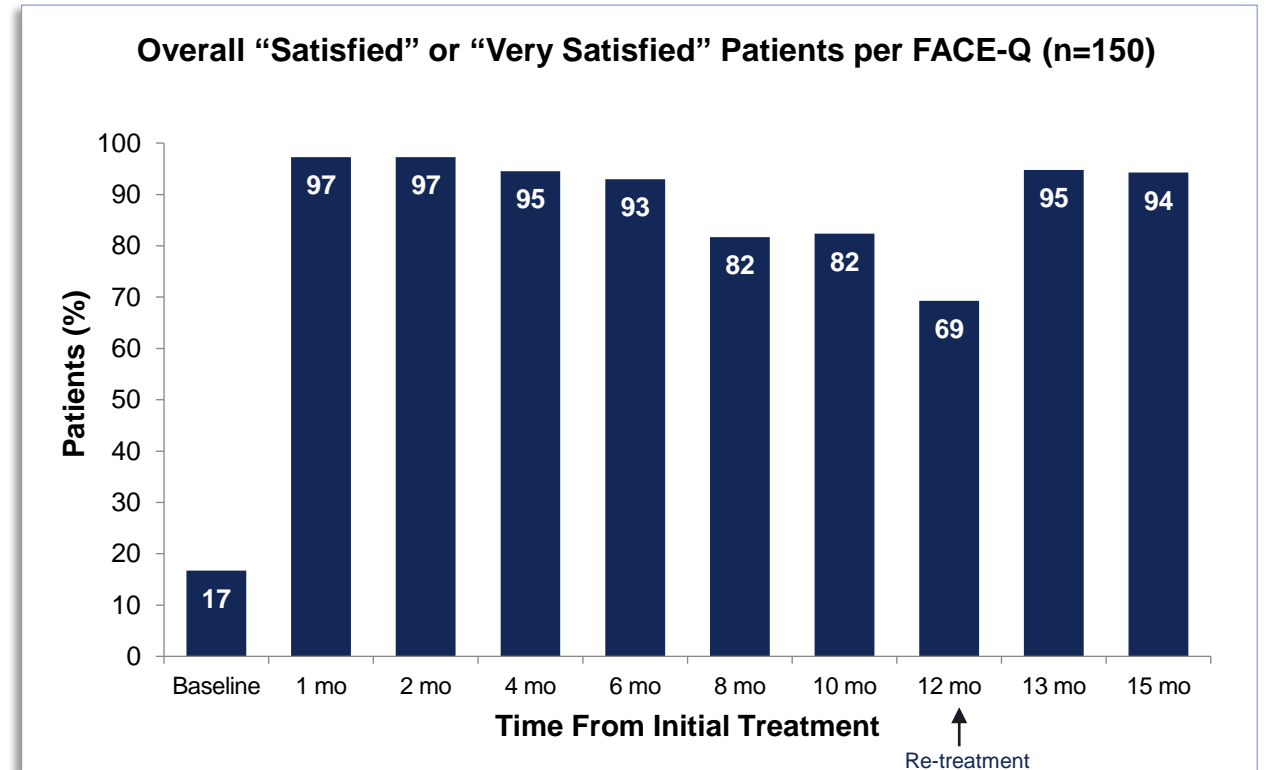
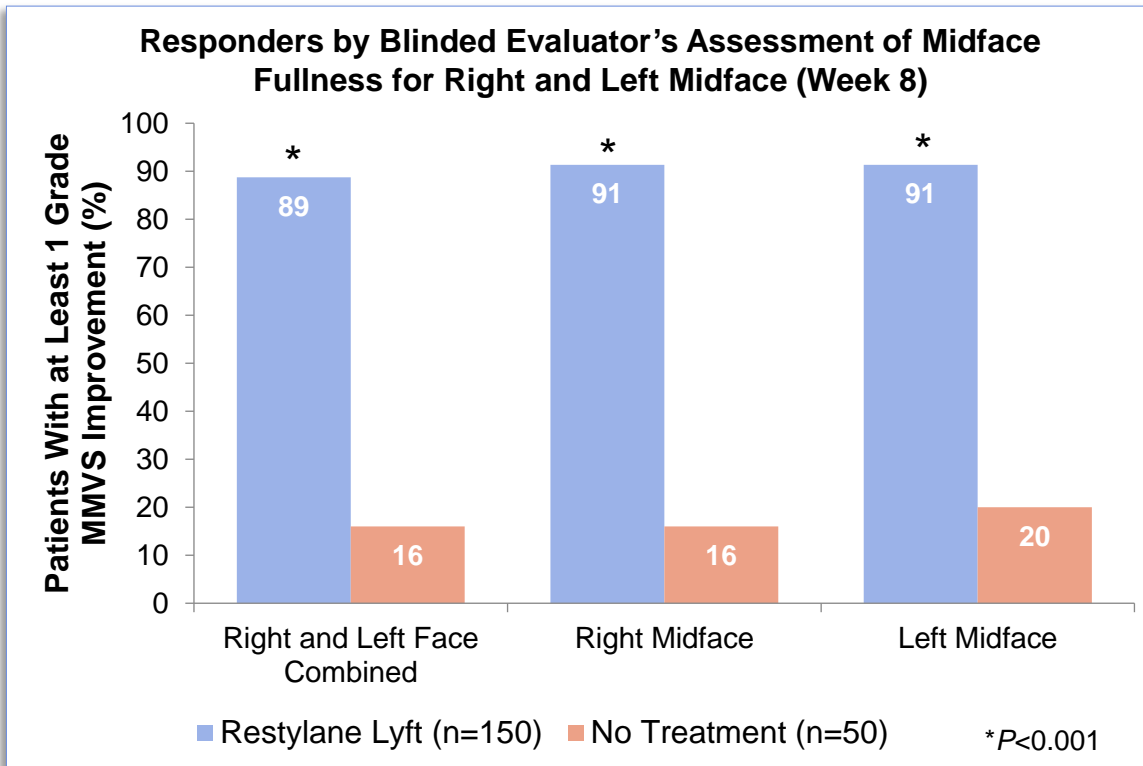
- MMVS at all time points
- Investigator and patient GAIS and FACE-Q scores

GAIS Global Aesthetic Improvement Scale; MMVS, Medicis Midface Volume Scale; R, randomization.
1. Weiss RA, et al. *Dermatol Surg.* 2016;42(6):699-709.

Patient Satisfaction

GAIN

15-month, randomized, evaluator-blinded, no-treatment control study (N=200)¹



Repeat treatment posed no additional risk and extended treatment efficacy and patient satisfaction

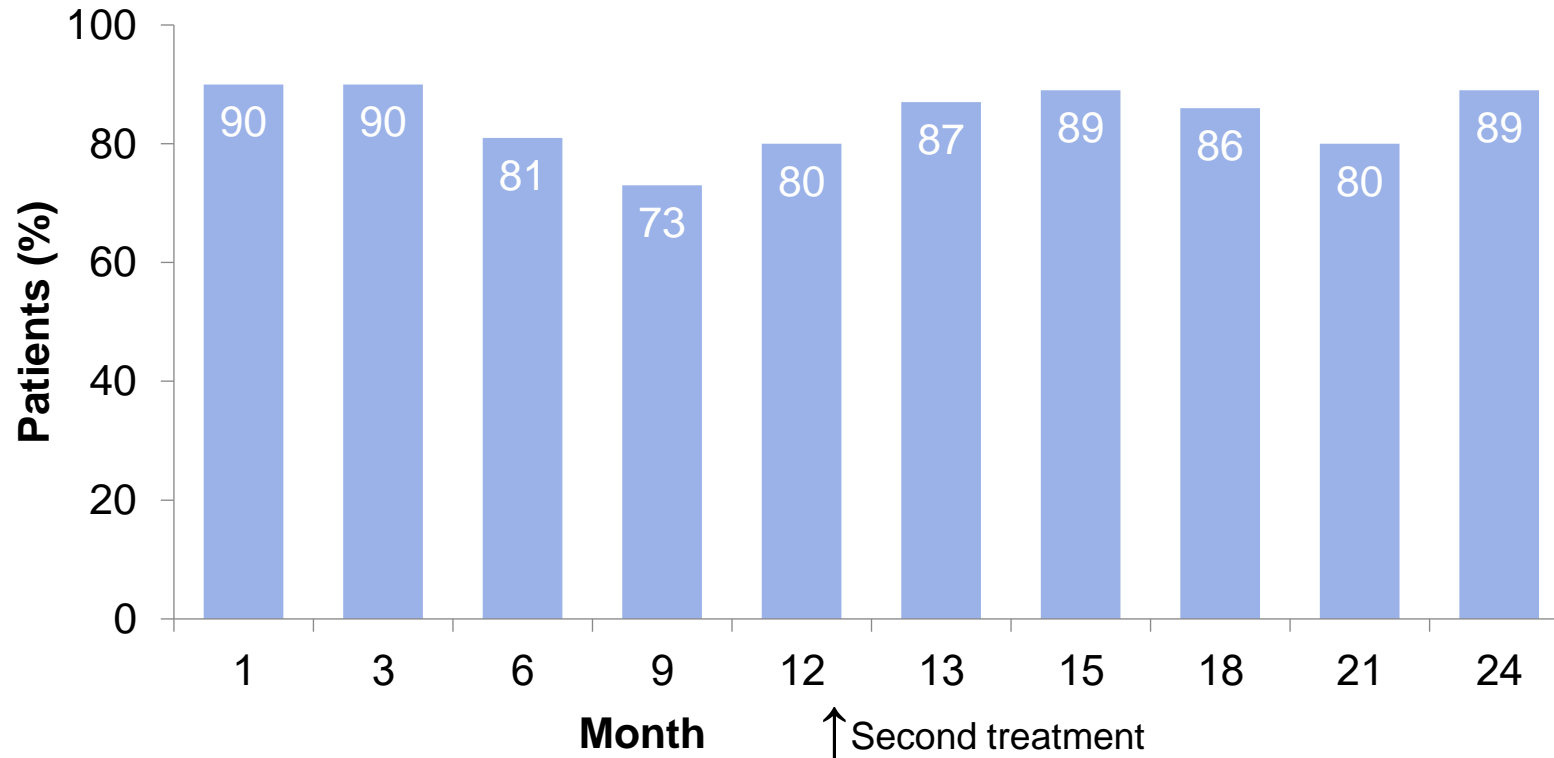
MMVS, Medicis Midface Volume Scale.

1. Weiss RA, et al. *Dermatol Surg.* 2016;42(6):699-709.

Restylane and Restylane Lyft - High Patient Satisfaction 1 Year After the Treatment

GAIN

Satisfaction With Treatment Result



- Most patients (73%–90%) were satisfied with the treatment results throughout the study
- At least 80% remained satisfied with the treatment results during the 12-month follow-up period after the second treatment

Patient Satisfaction - Restylane® KYSSE

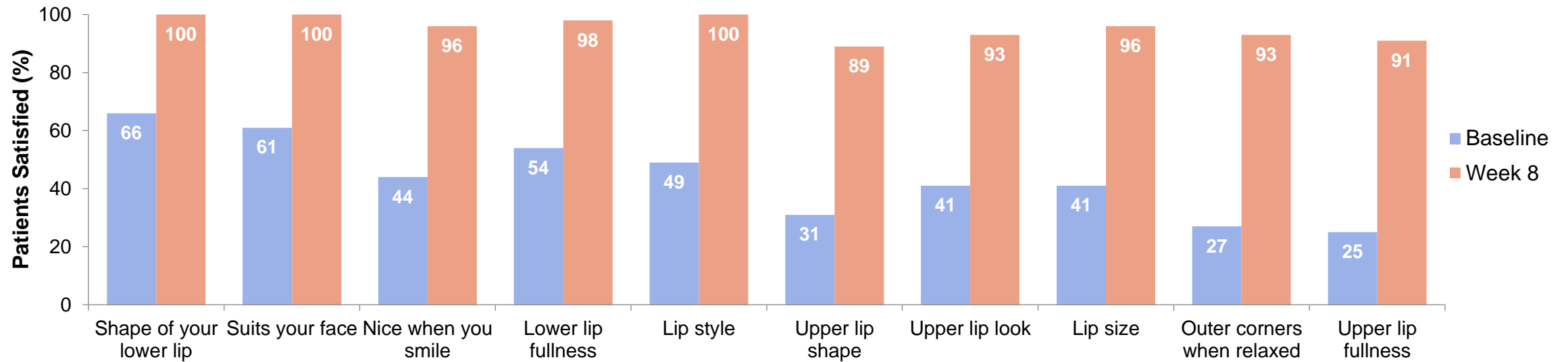
GAIN

Study product	RESTYLANE® KYSSE
Design	Open-label study, satisfaction assessed at week 8 using questionnaires (FACE-Q™ [patients] and KISSABILITY [patients and partners])
Indications	Lip enhancement
Main conclusions	Treatment with Restylane KYSSE for lip enhancement results in high levels of patient and partner satisfaction

- This study evaluated the patient and partner satisfaction with the treatment of Restylane® KYSSE for lip enhancement at week 8 after the treatment

Patient Satisfaction - Restylane® KYSSE

GAIN

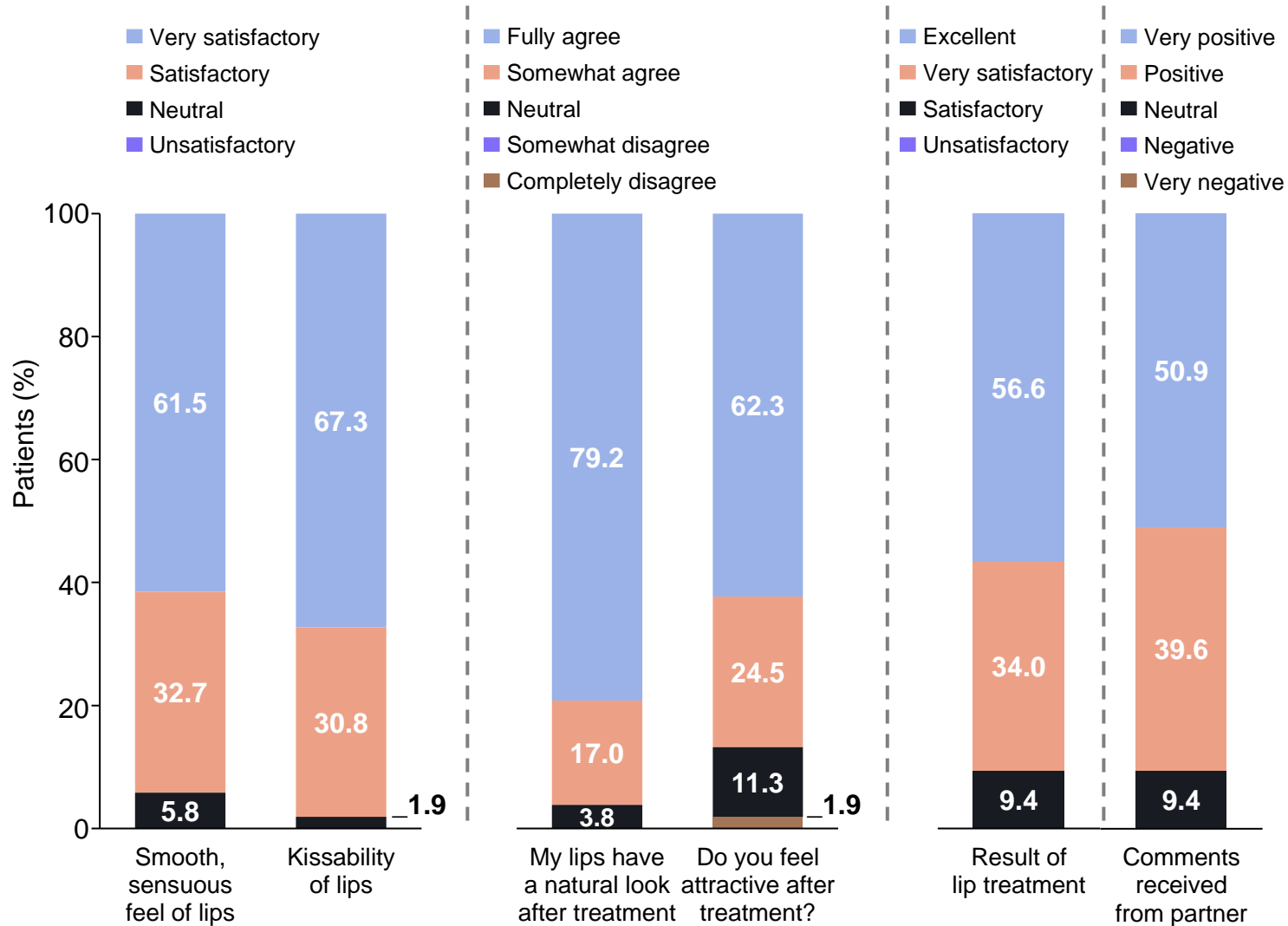


Study product	RESTYLANE® KYSSE
Design	Open-label study, satisfaction assessed at week 8 using questionnaires (FACE-Q™ [patients] and KISSABILITY [patients and partners])
Indications	Lip enhancement
Main conclusions	Lip enhancement with high levels of patient and partner satisfaction

- This graph shows the overall FACE-Q patient satisfaction at week 8 with the outcome of lip enhancement
- Most of the patients were highly satisfied with the results at week 8 after the treatment

Patient Satisfaction - Restylane[®] KYSSE

GAIN



• This graph shows the overall response for patients in KISSABILITY questionnaire. Most of the patients were very satisfied or satisfied with the smooth or sensuous feel of their lips and felt more attractive

Study product	RESTYLANE [®] KYSSE
Design	Open-label study, satisfaction assessed at week 8 using questionnaires (FACE-Q [™] [patients] and KISSABILITY [patients and partners])
Indications	Lip enhancement
Main conclusions	Lip enhancement with high levels of patient and partner satisfaction

Bertucci V, et al. *J Cosmet Dermatol.* 2021;00:1-6.

Performance Data

GAIN

Key Takeaways

Uniform results

Predictable results in many different skin types^{1,2}



Long duration

Duration up to 12 months³⁻⁵

Duration up to 36 months with re-treatment^{3,4}

Patient satisfaction

High patient satisfaction for most treatment types⁶

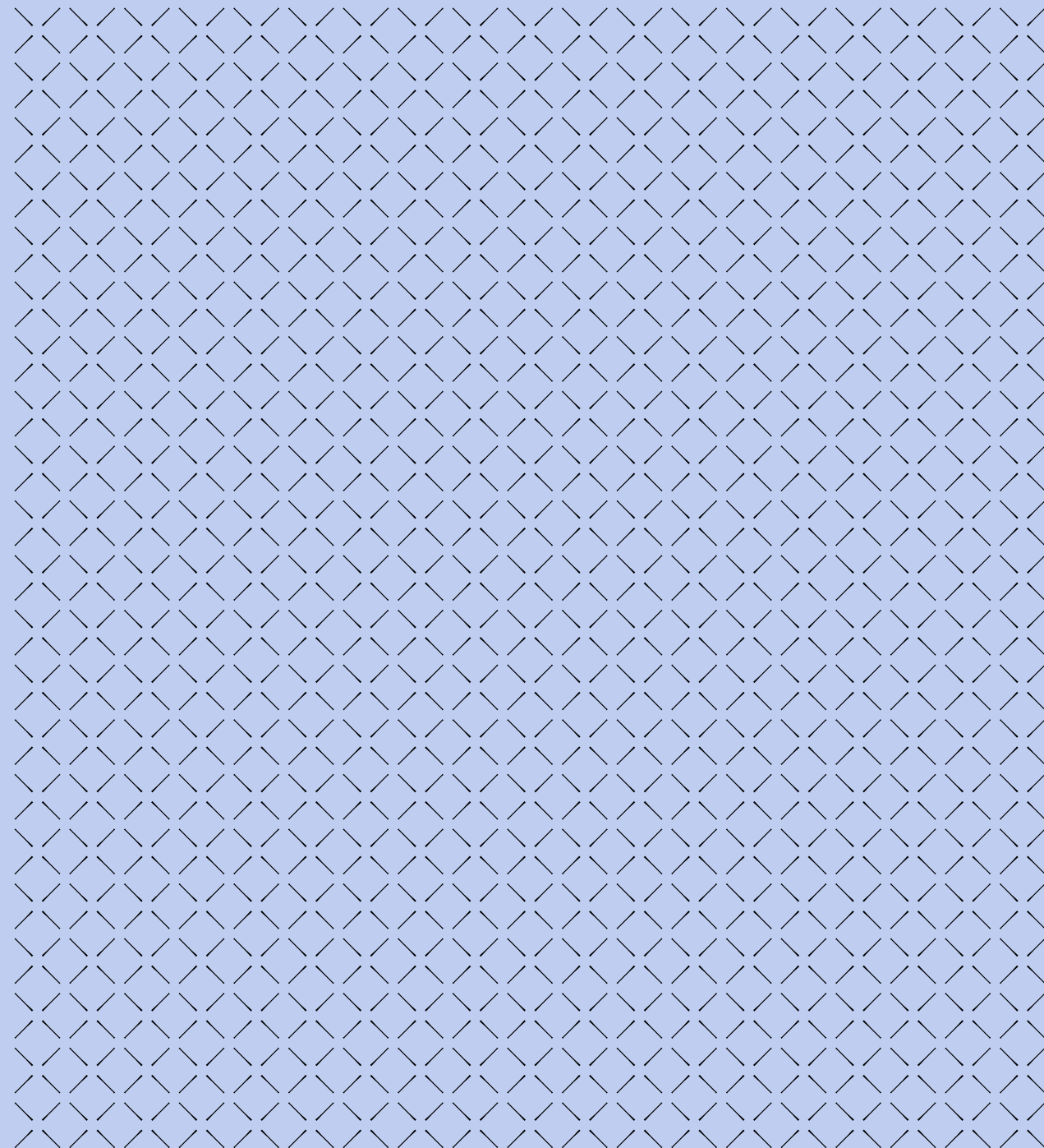


Optimal use

Less product needed to achieve optimal result with each successive re-treatment

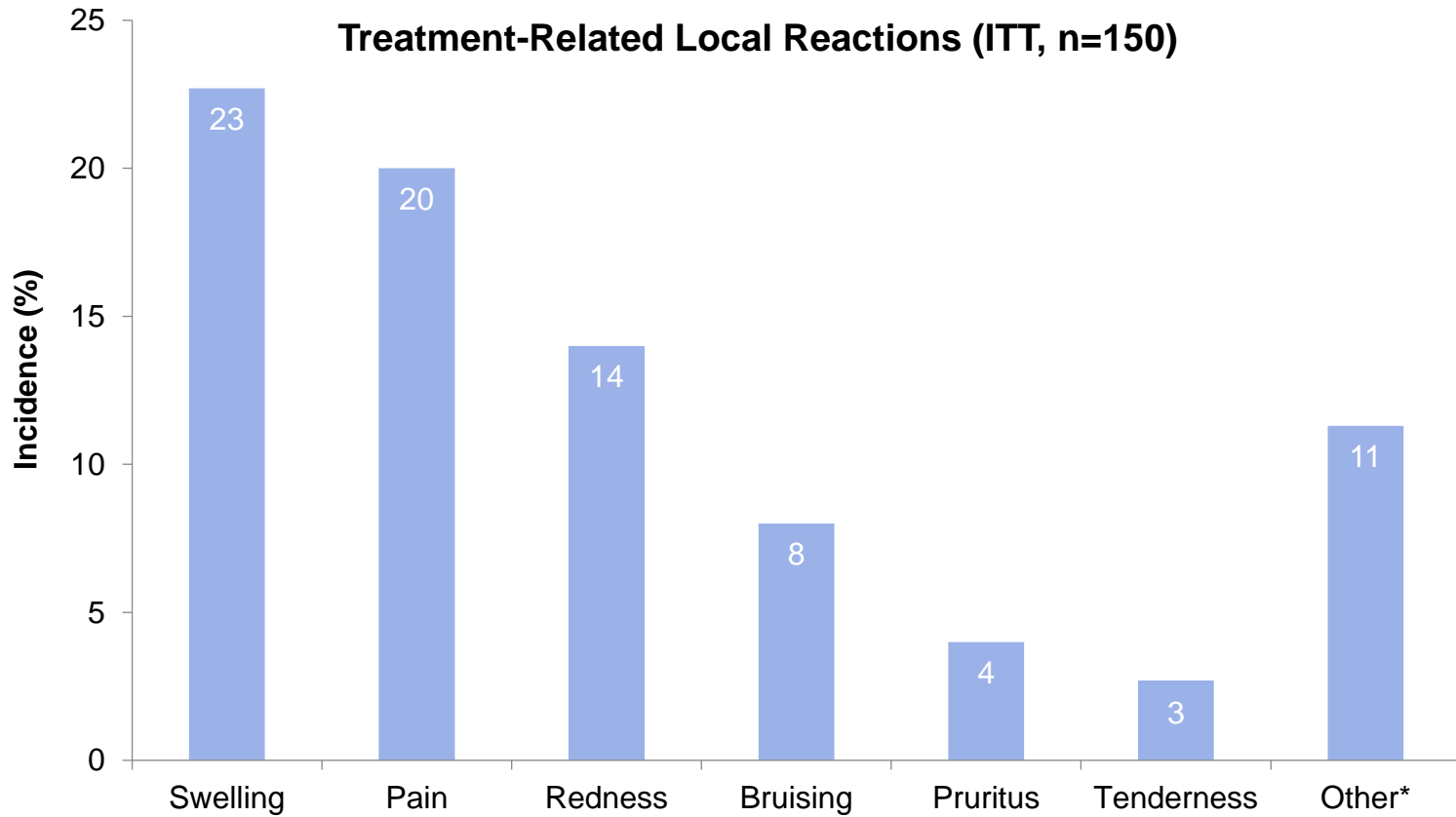
1. Yan X, et al. *Plast Reconstr Surg* 2009;124:256e-257e; 2. Taylor SC, et al. *Dermatol Surg* 2010;36:741-749; 3. Narins RS, et al. *Dermatol Surg* 2008;34:S2-S8; 4. Narins RS, et al. *Dermatol Surg* 2011;37:644-650; 5. Data on file; 6. Weiss RA, et al. *Dermatol Surg*. 2016;42(6):699-709.

Safety Data



Safety – Local Injection-Site Reactions

GAIN



*Includes injection-site induration, rash, skin discoloration, and inflammation.

ITT, intent to treat.
Carruthers J, et al. *Dermatol Surg.* 2005;31:276-280.

Study product	RESTYLANE® LYFT
Design	Evaluator-blinded, randomized, controlled study
Indication	Nasolabial folds
Main conclusions	Acceptable safety profile

GALDERMA

Study products	RESTYLANE® and RESTYLANE® LYFT
Design	<ul style="list-style-type: none">• 2 randomized controlled trials comprising 433 patients• Skin testing, serology, and histopathology for type 1 and 4 hypersensitivity
Indications	Nasolabial folds
Main conclusions	No clinical or laboratory evidence for elicitation of humoral or cell-mediated immunity to Restylane® or Restylane® Lyft in different skin types

Adverse Events – Clinical Studies

GAIN

Study products	RESTYLANE® / RESTYLANE® LYFT
Design	Multicenter, controlled, randomized, double-blind, split-face clinical study
Indications	Moderate to severe nasolabial folds
Main conclusions	Both products were well tolerated, with few AEs

System Organ Class / Preferred Term*	Restylane® (n=81)¹	Restylane® Lyft (n=68)²
Total no. of AEs	34	31
Total no. of patients with AEs	26 (32.1%)	20 (29.4%)
Cystitis	2 (2.5%)	1 (1.5%)
Headache	3 (3.7%)	1 (1.5%)
Injection site edema	2 (2.5%)	N/A
Nasopharyngitis	4 (4.9%)	5 (7.4%)
Influenza	1 (1.2%)	2 (2.9%)
Toothache	N/A	3 (4.4%)
Related AEs	4 (4.9%)	1 (1.5%)

*With a frequency >2% in one of the studies.

1. Data on file (a); 2. Data on file (b).

Adverse Events: Postmarketing Surveillance

GAIN

- AE reporting frequencies (nonexhaustive list)

The frequency of reporting is based on the number of estimated treatments performed with the Restylane NASHA fillers

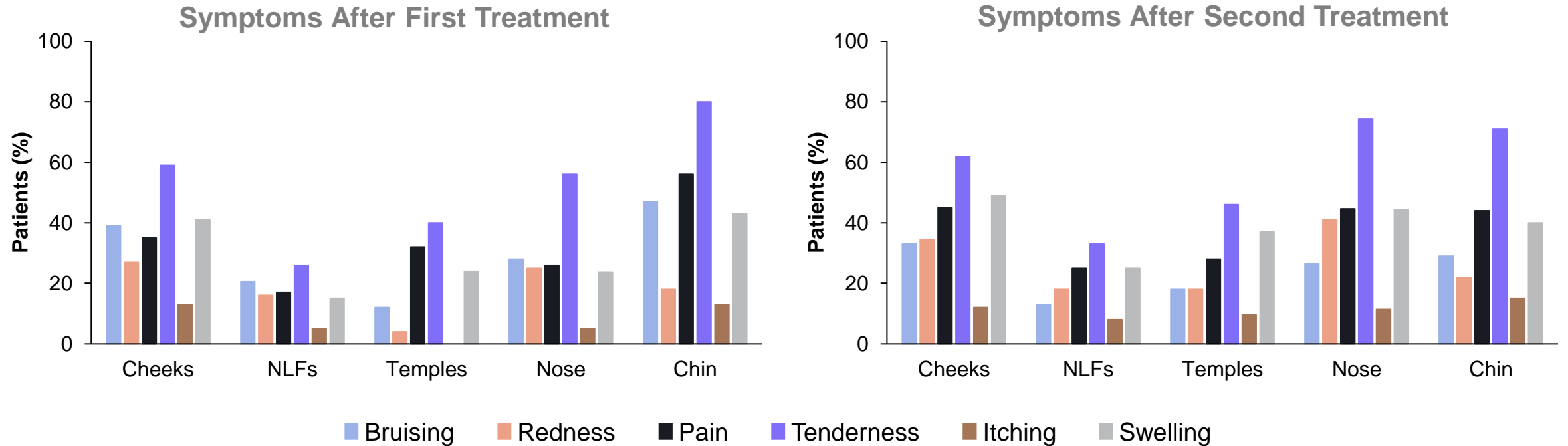
Reporting Frequency	AE
1/1000 – 1/10,000	Swelling
1/10,000 – 1/50,000	Bruising, discoloration, erythema, infection, inflammation, ischemia/necrosis, mass, pain/tenderness, papules/nodules
1/50,000 – 1/100,000	Hypersensitivity, induration, neurological symptoms such as paresthesia, pruritus, short duration of effect
<1/100,000	Abscess, acne, angioedema, atrophy/scarring, blisters, capillary disorders such as telangiectasia, dermatitis, device dislocation, fistula, granuloma, rash, reactivation of herpes infection, urticaria, visual disturbance

AE, adverse event; NASHA, nonanimal stabilized hyaluronic acid.
Instructions for Use, EU, Restylane.

Restylane and Restylane Lyft – Proven Safety Profile

GAIN

Percentage of Patients Reporting Symptoms Within 14 Days After Each Injection



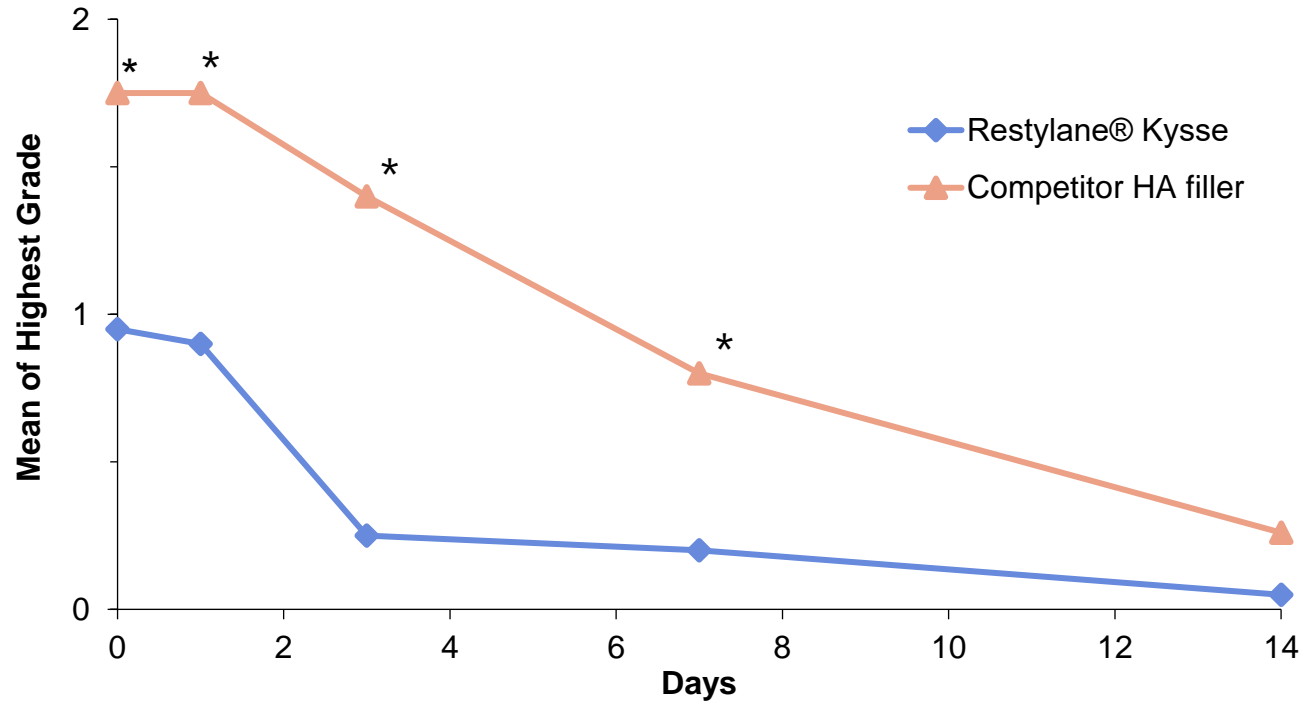
n=100	Patients, n (%)	Events, n
Adverse events related to any product and/or injection procedure	16 (16.0)	29
Serious adverse events	0	0
Nonserious adverse events	16 (16.0)	29

NLF, nasolabial fold.
Instructions for Use, EU, Restylane.

Safety – Low Swelling

GAIN

Intensity of Edema/Swelling (ITT, n=40)
(Patients' Diary Assessment Over 14 Days)



* $P < 0.001$ exact Wilcoxon rank sum test.

GAIS, Global Aesthetic Improvement Scale; HA, hyaluronic acid; ITT, intent to treat.
Data on file (Said Hilton)

Study product	RESTYLANE® KYSSSE vs Juvéderm Ultra Smile
Design	<ul style="list-style-type: none"> • Randomized, controlled, evaluator-blinded clinical study • 24-week follow-up
Indication	Lip contour
Main conclusions	<ul style="list-style-type: none"> • Low intensity of edema/swelling, erythema and pain/tenderness • A majority of patients (90%) remained improved at week 24 (GAIS, blinded evaluator)

Adverse Events: Postmarketing Surveillance

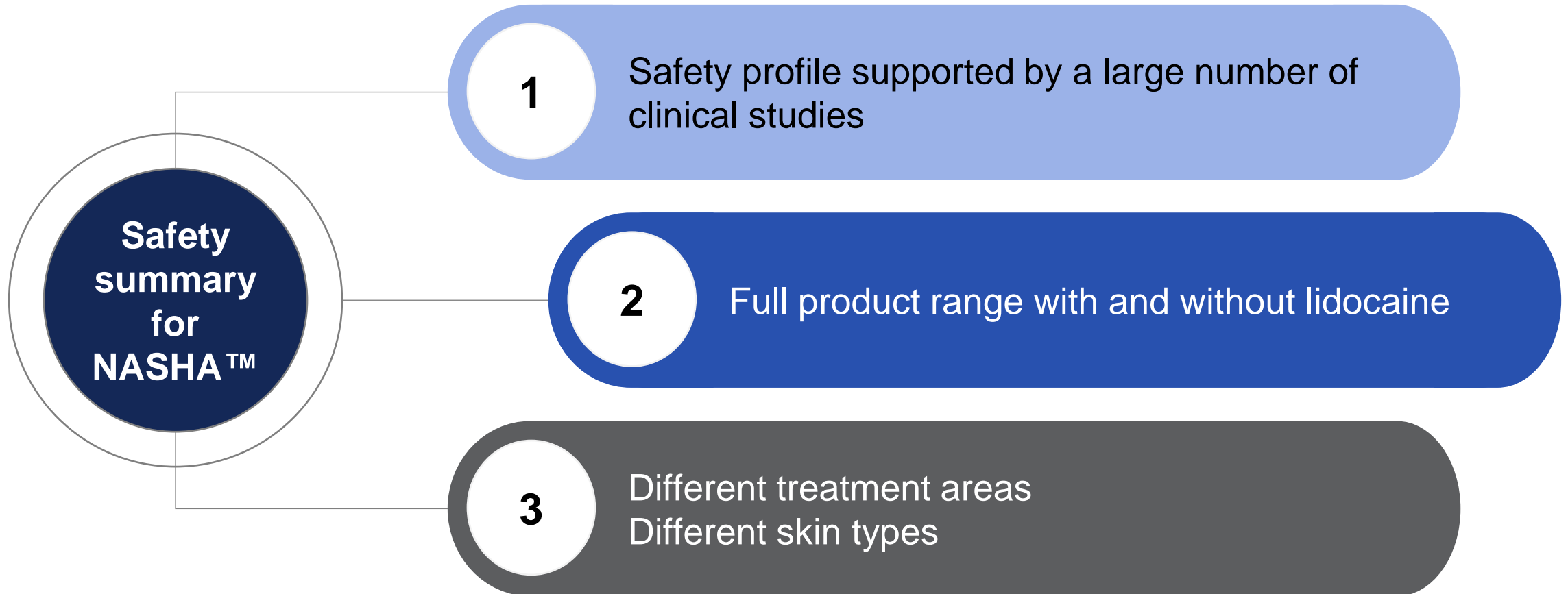
GAIN

- AE reporting frequencies (non-exhaustive list)

The frequency of reporting is based on the number of estimated treatments performed with the Restylane OBT gel products

Reporting Frequency	AE
1/1000 – 1/10,000	Swelling
1/10,000 – 1/50,000	Bruising/bleeding, erythema, infection, inflammation, mass/induration, pain/tenderness, papules/nodules, swelling face
1/50,000 – 1/100,000	Hypersensitivity/angioedema, injection site reactions, nondermatological events
<1/100,000	Blisters/vesicle, capillary disorder, dermatitis, device ineffective, discoloration, herpes, ischemia/necrosis, medical device implantation, other dermatological events, procedural complications, pruritus, scar/scab/skin atrophy

AE, adverse event; OBT, Optimal Balance Technology.
Data on file.



NASHA, nonanimal stabilized hyaluronic acid.



NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

NASHA Indications

GAIN

SKU	Injection Depth	Indication*
Restylane	<ul style="list-style-type: none"> • Mid-to-deep dermis • Submucosa 	<ul style="list-style-type: none"> • Moderate to severe facial wrinkles and folds (eg, nasolabial) • Lip augmentation
Restylane Lyft	<ul style="list-style-type: none"> • Deep dermis to superficial cutis • Subcutaneous to supraperiosteal implantation • Subcutaneous plane in the dorsal hand 	<ul style="list-style-type: none"> • Moderate to severe facial wrinkles and folds (eg, nasolabial) • Cheek augmentation, age-related midface contour deficiencies • Volume deficit in dorsal hand
Restylane Silk[†]	<ul style="list-style-type: none"> • Mid-to-deep dermis • Submucosa 	<ul style="list-style-type: none"> • Correction of perioral rhytids • Lip augmentation

*Specific indications vary by country/region. Refer to appropriate IFU for details.

[†]US and Canada only.

IFU, instructions for use; NASHA, nonanimal stabilized hyaluronic acid; SKU, stock keeping unit.

OBT Indications

GAIN

SKU	Injection Depth	Indication*
Restylane Refyne	Mid-to-deep dermis	Moderate to severe facial wrinkles and folds (eg, nasolabial)
Restylane Volyme	Supraperiostic zone or subcutis	Cheeks
Restylane Defyne	Mid-to-deep dermis	Moderate to severe facial wrinkles and folds (eg, nasolabial)
Restylane Kysse	Submucosal layer	Lip augmentation
Restylane Fynesse†	Superficial dermis	Superficial wrinkles (eg, perioral and periorbital lines)

*Specific indications vary by country/region. Refer to appropriate IFU for details.

†Product being phased out.

IFU, instructions for use; OBT, Optimal Balance Technology; SKU, stock keeping unit.

NASHA Clinical Studies, Galderma Sponsored

GAIN

By Indication

Study #	Products	Study Design	N	Follow-up	Reference(s)
Lips					
MA-1300-14	Restylane	Prospective, noncomparative, open label	21	12 weeks	Solish N and Swift A. An open-label, pilot study to assess the effectiveness and safety of hyaluronic acid gel in the restoration of soft tissue fullness of the lips. <i>J Drugs Dermatol.</i> 2011;10(2):145-149.
MA-1300-15	Restylane (n=135) vs no treatment (n=45)	RCT	180	24 weeks	Glogau RG, et al. A randomized, evaluator-blinded, controlled study of the effectiveness and safety of small gel particle hyaluronic acid for lip augmentation. <i>Dermatol Surg.</i> 2012;38(7 Pt 2):1180-1192. Smith SR, et al. Functional safety assessments used in a randomized controlled study of small gel particle hyaluronic acid for lip augmentation. <i>Dermatol Surg.</i> 2015;41(suppl 1):S137-142. Smith SR, et al. Small gel particle hyaluronic acid injection technique for lip augmentation. <i>J Drugs Dermatol.</i> 2013;12(7):764-769.
31GE1102	Restylane Lip Volume Restylane Lip Refresh	Open label, noncomparative	60	36 weeks	Samuelson U, Fagrell D, Wetter A, Kuusk S, Hamilton L, Haglund P. An open-label, multicenter, evaluator-blinded study to assess the efficacy and safety of a new hyaluronic acid-based gel product for lip enhancement. <i>Dermatol Surg.</i> 2015;41(9):1052-1059.
Midface					
43USC1633	Restylane Lyft Lidocaine	Prospective, noncomparative	60	16 weeks	Jones DH, et al. Microcannula injection of large gel particle hyaluronic acid for cheek augmentation and the correction of age-related midface contour deficiencies. <i>Dermatol Surg.</i> 2020;46(4):465-472.
MA-1400-04	Perlane-L	Prospective, open label	40	24 weeks	Bertucci V, et al. Safety and effectiveness of large gel particle hyaluronic acid with lidocaine for correction of midface volume loss. <i>Dermatol Surg.</i> 2013;39(11):1621-1629.
MA-1400-05	Restylane Lyft (n=150) vs no treatment (n=50)	RCT	200	15 months	Weiss RA, et al. Effectiveness and safety of large gel particle hyaluronic acid with lidocaine for correction of midface volume deficit or contour deficiency. <i>Dermatol Surg.</i> 2016;42(6):699-709.
43CH1507	Restylane Perlane Lidocaine vs no treatment	RCT	169	12 months	Not published
05DF1707	Restylane Volyme Restylane Defyne Restylane Lyft Lidocaine	Open label, noncomparative	90	24 weeks	Not published
Nasal Dorsum, Nasal Root					
43CH1310	Restylane Perlane vs no treatment	Randomized, open label	132	6 months + 12 months	Not published

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

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By Indication, cont'd

Study #	Products	Study Design	N	Follow-up	Reference(s)
Nasolabial Folds					
40072	Perlane vs Emervel Deep	RCT, split-face	68	12 months	Ascher B, et al. Efficacy and safety of a new hyaluronic acid dermal filler in the treatment of severe nasolabial lines – 6-month interim results of a randomized, evaluator-blinded, intra-individual comparison study. <i>J Cosmet Dermatol.</i> 2011;10(2):94-98. Ascher B, et al. A 12-month follow-up, randomized comparison of effectiveness and safety of two hyaluronic acid fillers for treatment of severe nasolabial folds. <i>Dermatol Surg.</i> 2017;43(3):389-395.
31GE0002	Perlane	RCT, split-face	68	1 year	Lindqvist C, et al. A randomized, evaluator-blind, multicenter comparison of the efficacy and tolerability of Perlane versus Zyplast in the correction of nasolabial folds. <i>Plast Reconstr Surg.</i> 2005;115(1):282-289.
31GE0703	Perlane vs Perlane with lidocaine	RCT, split-face	43	1 year	Hedén P, et al. Injection of stabilized hyaluronic acid-based gel of non-animal origin for the correction of nasolabial folds: comparison with and without lidocaine. <i>Dermatol Surg.</i> 2010;36(1):775-781.
43CH1408	Restylane vs Restylane Lyft	RCT, split-face	100	1 year	Li D, et al. A multi-center comparative efficacy and safety study of two different hyaluronic acid fillers for treatment of nasolabial folds in a Chinese population. <i>J Cosmet Dermatol.</i> 2019;18(3):755-761.
MA-04-003	Restylane retreatment schedule 1 (n=39), Restylane retreatment schedule 2 (n=36)	RCT, split-face	75	18 months	Narins RS, et al. Persistence and improvement of nasolabial fold correction with nonanimal-stabilized hyaluronic acid 100,000 gel particles/mL filler on two retreatment schedules: results up to 18 months on two retreatment schedules. <i>Dermatol Surg.</i> 2008;34(suppl 1):S2-8; discussion S8. Narins RS, et al. Persistence of nasolabial fold correction with a hyaluronic acid dermal filler with retreatment: results of an 18-month extension study. <i>Dermatol Surg.</i> 2011;37(5):644-650.
MA-1100-01	Restylane-L vs Restylane	RCT, split-face	60	2 weeks	Weiss R, et al. Randomized, double-blind, split-face study of small-gel-particle hyaluronic acid with and without lidocaine during correction of nasolabial folds. <i>Dermatol Surg.</i> 2010;36(1):750-759.
MA-1400-01	Restylane vs Perlane	RCT, split-face	150	24 weeks	Hamilton RG, et al. Immunogenicity studies of cosmetically administered nonanimal-stabilized hyaluronic acid particles. <i>Dermatol Surg.</i> 2007;33(suppl 2):S176-185. Taylor SC, et al. Safety of nonanimal stabilized hyaluronic acid dermal fillers in patients with skin of color: a randomized, evaluator-blinded comparative trial. <i>Dermatol Surg.</i> 2009;35(suppl 2):1653-1660. Taylor SC, Burgess CM, Callender VD. Efficacy of variable-particle hyaluronic acid dermal fillers in patients with skin of color: a randomized, evaluator-blinded comparative trial. <i>Dermatol Surg.</i> 2010;36(1):741-749.

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By Indication, cont'd

Study #	Products	Study Design	N	Follow-up	Reference(s)
Nasolabial Folds, cont'd					
MA-1400-03	Perlane vs Perlane with lidocaine	RCT, split-face	60	14 days	Brandt F, et al. A lidocaine-containing formulation of large-gel particle hyaluronic acid alleviates pain. <i>Dermatol Surg.</i> 2010;36(suppl 3):1876-1885.
31GE0003	Restylane vs Zyplast	RCT, split-face	138	6 months	Narins RS, et al. A randomized, double-blind, multicenter comparison of the efficacy and tolerability of Restylane versus Zyplast for the correction of nasolabial folds. <i>Dermatol Surg.</i> 2003;29(6):588-595.
31GE0308	Restylane	Prospective, noncomparative	86	6 months	Yan X, et al. A multicenter study of the efficacy and safety of Restylane in the treatment of nasolabial folds in China. <i>Plast Reconstr Surg.</i> 2009;124(5):256e-257e.
31GE0701	Restylane Perlane v Juvéderm Ultra Plus	RCT, split-face	60	12 months	Not published
31GE1010	Restylane Perlane vs Hylaform	RCT, split-face	150	6 + 6 months	Carruthers A, et al. Randomized, double-blind comparison of the efficacy of two hyaluronic acid derivatives, Restylane Perlane and Hylaform, in the treatment of nasolabial folds. <i>Dermatol Surg.</i> 2005;31(11 Pt 2):1591-1598; discussion 1598.
43TW1628	Restylane Perlane Lidocaine vs Restylane Perlane	RCT	70	1 month	Not published
43CH1504	Restylane Restylane Lidocaine	RCT	70	2 weeks	Not published
43CH1508	Restylane Defyne vs Restylane	RCT, split-face	175	12 months	Not published
43CH1509	Restylane	Retrospective	300	15 months	Not published
05DF1312	Restylane	Open label, noncomparative	110	12 months	Not published
40073	Restylane Emervel Classic	RCT, split-face	81	18 months	Rzany B, et al. Efficacy and safety of a new hyaluronic acid dermal filler in the treatment of moderate nasolabial folds: 6-month interim results of a randomized, evaluator-blinded, intra-individual comparison study. <i>J Cosmet Laser Ther.</i> 2011;13(3):107-112. Rzany B, et al. An 18-month follow-up, randomized comparison of effectiveness and safety of two hyaluronic acid fillers for treatment of moderate nasolabial folds. <i>Dermatol Surg.</i> 2017;43(1):58-65.

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By Indication, cont'd

Study #	Products	Study Design	N	Follow-up	Reference(s)
Multiple Indications					
31GD0303	Restylane SubQ	Prospective, noncomparative, open-label	57	1 year	DeLorenzi C, et al. Multicenter study of the efficacy and safety of subcutaneous non-animal-stabilized hyaluronic acid in aesthetic facial contouring: interim report. <i>Dermatol Surg.</i> 2006;32(2):205-211. DeLorenzi C, et al. The long-term efficacy and safety of a subcutaneously injected large-particle stabilized hyaluronic acid-based gel of nonanimal origin in aesthetic facial contouring. <i>Dermatol Surg.</i> 2009;35(suppl 1):313-321.
29097	Restylane Lidocaine, Perlane Lidocaine, Restylane Sub-Q Lidocaine, Restylane Lip Volume, or Restylane Lip Refresh plus Azzalure	Prospective, open-label	60	6 months	Molina B, et al. Patient satisfaction and efficacy of full-facial rejuvenation using a combination of botulinum toxin type A and hyaluronic acid filler. <i>Dermatol Surg.</i> 2015;41(suppl 1):S325-332.
05PDF1401	Restylane Refyne, Restylane Defyne, Restylane Lidocaine, or Restylane Lyft Lidocaine (n=33) vs Azzalure/Dysport (n=32) vs Azzalure/Dysport + HA filler + Restylane Skinboosters Vital Lidocaine or Restylane Skinboosters Vital (n=65)	RCT, parallel group	65	18 months	Hedén P, et al. Effective and safe repeated full-face treatments with abobotulinumtoxinA, hyaluronic acid filler, and skin boosting hyaluronic acid. <i>J Drugs Dermatol.</i> 2019;18(7):682-689. Hexsel D, et al. Efficacy, safety, and subject satisfaction after abobotulinumtoxinA treatment of upper facial lines. <i>Dermatol Surg.</i> 2018;44(12):1555-1564.
MA-1400-02	Restylane (n=142) vs Perlane (n=141)	RCT	283	24 weeks	Hamilton RG, et al. Immunogenicity studies of cosmetically administered nonanimal-stabilized hyaluronic acid particles. <i>Dermatol Surg.</i> 2007;33(suppl 2):S176-185. Glogau RG and Kane MA. Effect of injection techniques on the rate of local adverse events in patients implanted with nonanimal hyaluronic acid gel dermal fillers. <i>Dermatol Surg.</i> 2008;34(suppl 1):S105-109. Dover JS, et al. Review of the efficacy, durability, and safety data of two nonanimal stabilized hyaluronic acid fillers from a prospective, randomized, comparative, multicenter study. <i>Dermatol Surg.</i> 2009;35(suppl 1):322-330; discussion 330-331.
MA-1900-01	Restylane, Perlane	Prospective, noncomparative, open-label	20	4 weeks	Brandt F, et al. Safety and effectiveness of small and large gel-particle hyaluronic acid A23:G28in the correction of perioral wrinkles. <i>J Drugs Dermatol.</i> 2011;10(9):982-987.
MA-1900-02	Restylane Lidocaine, Restylane Perlane Lidocaine	Prospective, noncomparative, open-label	40	4 weeks	Not published

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By Indication, cont'd

Study #	Products	Study Design	N	Follow-up	Reference(s)
Multiple Indications, cont'd					
05DF1315	Restylane Lidocaine vs Restylane Perlane Lidocaine	Open label, noncomparative	100	24 months	Huang SH and Tsai TF. Safety and effectiveness of hyaluronic acid fillers with lidocaine for full-face treatment in Asian patients. <i>J Drugs Dermatol.</i> 2020;19(9):836-842.
05DF1211	Emervel Classic Lidocaine, Emervel Deep Lidocaine, Restylane Lidocaine, Restylane Perlane Lidocaine, Restylane Vital Lidocaine, Azzalure	RCT, parallel group	61	18 months	Cartier H, et al. Repeated full-face aesthetic combination treatment with abobotulinumtoxinA, hyaluronic acid filler, and skin-boosting hyaluronic acid after monotherapy with abobotulinumtoxinA or hyaluronic acid filler. <i>Dermatol Surg.</i> 2020;46(4):475-482.

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By Indication

Reference	Study Design	N	Products	Follow-up
Acne Scars				
Dierickx C, et al. Effectiveness and safety of acne scar treatment with nonanimal stabilized hyaluronic acid gel. <i>Dermatol Surg.</i> 2018;44(suppl 1):S10-S18.	Prospective, noncomparative	12	Restylane Skinboosters Vital Lidocaine	36 weeks
Halachmi S, et al. Treatment of acne scars with hyaluronic acid: an improved approach. <i>J Drugs Dermatol.</i> 2013;12(7):e121-123.	Prospective, noncomparative	12	Restylane Skinboosters Vital	Not specified
Arms				
Distante F, et al. Stabilized hyaluronic acid of non-animal origin for rejuvenating the skin of the upper arm. <i>Dermatol Surg.</i> 2009;35(suppl 1):389-393;discussion 394.	Prospective, noncomparative, open label	16	Restylane Skinboosters Vital	90 days
Vartanian AJ, et al. Injected hyaluronidase reduces Restylane-mediated cutaneous augmentation. <i>Arch Facial Plast Surg.</i> 2005;7(4):231-237.	Prospective, noncomparative	12	Restylane	120 days
Wang F, et al. In vivo stimulation of de novo collagen production caused by cross-linked hyaluronic acid dermal filler injections in photodamaged human skin. <i>Arch Dermatol.</i> 2007;143(2):155-163.	Prospective, comparative	11	Restylane vs no treatment	13 weeks
Cheek/Midface				
Kersch M, et al. Rejuvenating influence of a stabilized hyaluronic acid-based gel of nonanimal origin on facial skin aging. <i>Dermatol Surg.</i> 2008;34(5):720-726.	Prospective, noncomparative	19	Restylane Skinboosters Vital	12 weeks
Reuther T, et al. Effects of a three-session skin rejuvenation treatment using stabilized hyaluronic acid-based gel of non-animal origin on skin elasticity: a pilot study. <i>Arch Dermatol Res.</i> 2010;302(1):37-45.	Prospective, noncomparative	19	Restylane Skinboosters Vital	24 weeks
Roh NK, et al. A split-face study of the effects of a stabilized hyaluronic acid-based gel of nonanimal origin for facial skin rejuvenation using a stamp-type multineedle injector: a randomized clinical trial. <i>Plast Reconstr Surg.</i> 2016;137(3):809-816.	RCT, split-face	25	Restylane Skinboosters Vital and Vital Injector	12 weeks
Sito G. Transoral injection of Restylane SubQ for aesthetic contouring of the cheeks. <i>Aesthet Surg J.</i> 2006;26(1S):S22-27.	Prospective, noncomparative	52	Restylane SubQ	10 months
Taub AF. Cheek augmentation improves feelings of facial attractiveness. <i>J Drugs Dermatol.</i> 2012;11(9):1077-1080.	Prospective, comparative	10	Perlane vs no treatment	2 weeks
Nikolis A, et al. The role of clinical examination in midface volume correction using hyaluronic acid fillers: Should patients be stratified by skin thickness? <i>Aesthet Surg J Open Forum.</i> 2020;2(1):ojaa005.	Prospective, comparative, open label, phase 4	30	Restylane Lyft	4 months

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By Indication, cont'd

Reference	Study Design	N	Products	Follow-up
Facial Lipoatrophy				
Bugge H, et al. Hyaluronic acid treatment of facial fat atrophy in HIV-positive patients. <i>HIV Med.</i> 2007;8(8):475-482.	Prospective, noncomparative	20	Restylane SubQ	52 weeks
Denton AB and Tsaparas Y. Injectable hyaluronic acid for the correction of HIV-associated facial lipoatrophy. <i>Otolaryngol Head Neck Surg.</i> 2007;136(4):563-567.	Prospective, noncomparative	18	Perlane	1 year
Skeie L, et al. Large particle hyaluronic acid for the treatment of facial lipoatrophy in HIV-positive patients: 3-year follow-up study. <i>HIV Med.</i> 2010;11(3):170-177.	Prospective, noncomparative	20	Restylane SubQ	3 year
Glabellar Lines				
Carruthers J and Carruthers A. A prospective, randomized, parallel group study analyzing the effect of BTX-A (Botox) and nonanimal sourced hyaluronic acid (NASHA, Restylane) in combination compared with NASHA (Restylane) alone in severe glabellar rhytides in adult female subjects: treatment of severe glabellar rhytides with a hyaluronic acid derivative compared with the derivative and BTX-A. <i>Dermatol Surg.</i> 2003;29(8):802-809.	RCT	38	Restylane + Botox (n=19) vs Restylane (n=19)	32 weeks
Kono T, et al. Randomized, evaluator-blind, split-face comparison study of single cross-linked versus double cross-linked hyaluronic acid in the treatment of glabellar lines. <i>Dermatol Surg.</i> 2008;34(suppl 1):S25-30.	RCT, split-face	10	Restylane vs Puragen	1 year
Hands				
Brandt FS, et al. Long-term effectiveness and safety of small gel particle hyaluronic acid for hand rejuvenation. <i>Dermatol Surg.</i> 2012;38(7 Pt 2):1128-1135.	Prospective, noncomparative, open label	16	Restylane	1 year
Man J, et al. A double-blind, comparative study of nonanimal-stabilized hyaluronic acid versus human collagen for tissue augmentation of the dorsal hands. <i>Dermatol Surg.</i> 2008;34(8):1026-1031.	RCT	10	Restylane vs Cosmoplast	6 months
Moradi A., et al. A prospective, multicenter, randomized, evaluator-blinded, split-hand study to evaluate the effectiveness and safety of large-gel-particle hyaluronic acid with lidocaine for the correction of volume deficits in the dorsal hand. <i>Plast Reconstr Surg.</i> 2019;144(4):586e-596e.	RCT, split-hand	90	Restylane Lyft with Lidocaine	24 weeks
Wu Y, et al. A randomized study showing improved skin quality and aesthetic appearance of dorsal hands after hyaluronic acid gel treatment in a Chinese population. <i>J Cosmet Dermatol.</i> 2020;19(7):1627-1635.	RCT, split-hand	100	Restylane Skinboosters Vital	15 months

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By Indication, cont'd

Reference	Study Design	N	Products	Follow-up
Lips				
Downie J, et al. A double-blind, clinical evaluation of facial augmentation treatments: a comparison of PRI 1, PRI 2, Zyplast and Perlane. <i>J Plast Reconstr Aesthet Surg.</i> 2009;62(12):1636-1643.	RCT	79	Perlane (n=23) vs PRI 1 (n=19), PRI 2 (n=19), or Zyplast (n=18)	1 year
Jacono AA. A new classification of lip zones to customize injectable lip augmentation. <i>Arch Facial Plast Surg.</i> 2008;10(1):25-29.	Case series, prospective	66	Restylane	Not specified
Zazzaron M. Customized lip enhancement for clinical different lip features: an observational study. <i>J Cosmet Dermatol.</i> 2020;19(1):38-46.	Case series, retrospective	40	Restylane, Restylane Skinbooster Vital, Restylane Lidocaine, and Restylane Kysse	12 weeks
Nasolabial Folds				
Beer K. A randomized, evaluator-blinded comparison of efficacy of hyaluronic acid gel and avian-sourced hylan B plus gel for correction of nasolabial folds. <i>Dermatol Surg.</i> 2007;33(8):928-936.	RCT, split-face	15	Restylane vs Hylaform Plus	6 months
Dai X, et al. Safety and effectiveness of hyaluronic acid dermal filler in correction of moderate-to-severe nasolabial folds in Chinese subjects. <i>Clin Cosmet Investig Dermatol.</i> 2019;12:57-62.	RCT, split-face	120	Restylane vs Princess® VOLUME	52 weeks
Hong JY, et al. Randomized, patient/evaluator-blinded, intraindividual comparison study to evaluate the efficacy and safety of a novel hyaluronic acid dermal filler in the treatment of nasolabial folds. <i>Dermatol Surg.</i> 2018;44(4):542-548.	RCT, split-face	91	Restylane SubQ vs IDHF-001	48 weeks
Lupo MP, et al. The effect of lidocaine when mixed with large gel particle hyaluronic acid filler tolerability and longevity: a six-month trial. <i>J Drugs Dermatol.</i> 2010;9(9):1097-1100.	RCT, split-face	18	Perlane plus lidocaine vs Perlane	6 months
Nikolis A, et al. A randomized, split-face, double-blind, comparative study of the safety and efficacy of small- and large-particle hyaluronic acid fillers for the treatment of nasolabial folds. <i>J Cosmet Dermatol.</i> 2020;20(5):1450-1458.	Prospective, comparative, split-face, randomized	10	Restylane + Lidocaine vs Restylane Lift	1 month
Noh TK., et al. Effects of highly concentrated hyaluronic acid filler on nasolabial fold correction: a 24-month extension study. <i>J Dermatolog Treat.</i> 2016;27(6):510-514.	RCT, extension study, split-face	81	Perlane	24 months
Royo de la Torre J, et al. The evaluation of hyaluronic acid, with and without lidocaine, in the filling of nasolabial folds as measured by ultrastructural changes and pain management. <i>J Drugs Dermatol.</i> 2013;12(3):e46-52.	RCT	119	Perlane (n=62) vs Perlane plus lidocaine (n=57)	1 year
Nose				
Chen L, et al. Comparison of Artecoll, Restylane and silicone for augmentation rhinoplasty in 378 Chinese patients. <i>Clin Invest Med.</i> 2014;37(4):E203-210.	Prospective, comparative	378	Restylane (n=126) vs Artecoll (n=126) or silicone implants (n=126)	1 year
Xue K, et al. Multiplane hyaluronic acid rhinoplasty. <i>Plast Reconstr Surg.</i> 2012;129(2):371e-372e.	Case series, retrospective	50	Restylane-2	8–12 months

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By Indication, cont'd

Reference	Study Design	N	Products	Follow-up
Oral Commissures				
Carruthers J, et al. Safety and efficacy of nonanimal stabilized hyaluronic acid for improvement of mouth corners. <i>Dermatol Surg.</i> 2005;31(3):276-280.	Prospective, noncomparative	15	Restylane	6 months
Periorbital				
Choi HS, et al. Modifying the upper eyelid crease in Asian patients with hyaluronic acid fillers. <i>Plast Reconstr Surg.</i> 2011;127(2):844-849.	Case series, retrospective, noncomparative	7	Restylane	18 months
Goldberg RA and Fiaschetti D. Filling the periorbital hollows with hyaluronic acid gel: initial experience with 244 injections. <i>Ophthalmic Plast Reconstr Surg.</i> 2006;22(5):335-341; discussion 341-343.	Retrospective, noncomparative	155	Restylane	Varied from no follow-up to >3 months
Zamani M, et al. Adjunctive use of hyaluronic acid gel (Restylane Sub-Q) in anophthalmic volume deficient sockets and phthisical eyes. <i>Ophthalmic Plast Reconstr Surg.</i> 2010;26(4):250-253.	Case series, prospective	16	Restylane Sub-Q	12 months
Tear Trough				
Berros P, et al. Hyalurostructure treatment: superior clinical outcome through a new protocol-a 4-year comparative study of two methods for tear trough treatment. <i>Plast Reconstr Surg.</i> 2013;132(6):924e-931e.	Retrospective, comparative	176	Restylane Protocol A (n=41) vs Restylane Protocol B (n=135)	1 year
Donath AS, et al. Quantitative evaluation of volume augmentation in the tear trough with a hyaluronic acid-based filler: a three-dimensional analysis. <i>Plast Reconstr Surg.</i> 2010;125(5):1515-1522.	Prospective, noncomparative, case series	20	Restylane	23 months
Hill RH, 3rd, et al. Evolving minimally invasive techniques for tear trough enhancement. <i>Ophthalmic Plast Reconstr Surg.</i> 2015;31(4):306-309.	Prospective	12	Restylane Perlane	6 weeks
Lim HK, et al. Rejuvenation effects of hyaluronic acid injection on nasojugal groove: prospective randomized split face clinical controlled study. <i>J Cosmet Laser Ther.</i> 2014;16(1):32-36.	RCT, split-face	10	Restylane Skinboosters Vital vs no treatment	6 months
Morley, AM and Malhotra R. Use of hyaluronic acid filler for tear-trough rejuvenation as an alternative to lower eyelid surgery. <i>Ophthalmic Plast Reconstr Surg.</i> 2011;27(2):69-73.	Case series	100	Perlane	18 months
Tung R, et al. Brighter eyes: combined upper cheek and tear trough augmentation: a systematic approach utilizing two complementary hyaluronic acid fillers. <i>J Drugs Dermatol.</i> 2012;11(9):1094-1097.	Case series, comparative	21	Restylane + Perlane vs no treatment	20 weeks
Temples				
Moradi A, et al. A 12-month, prospective, evaluator-blinded study of small gel particle hyaluronic acid filler in the correction of temporal fossa volume loss. <i>J Drugs Dermatol.</i> 2013;12(4):470-475.	Prospective, noncomparative, open label	20	Restylane	12 months

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NASHA Clinical Studies, Not Sponsored

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By Indication, cont'd

Reference	Study Design	N	Products	Follow-up
Temples, cont'd				
Ross JJ and Malhotra R. Orbitofacial rejuvenation of temple hollowing with Perlane injectable filler. <i>Aesthet Surg J.</i> 2010;30(3):428-433.	Retrospective, interventional case series	20	Perlane	Up to 14 months
Multiple Indications				
Lowe NJ and Grover R. Injectable hyaluronic acid implant for malar and mental enhancement. <i>Dermatol Surg.</i> 2006;32(7):881-885;discussion 885.	Prospective, noncomparative	72	Restylane SubQ	64 weeks
Nikolis A and Enright KM. Evaluating the role of small particle hyaluronic acid fillers using micro-droplet technique in the face, neck and hands: a retrospective chart review. <i>Clin Cosmet Investig Dermatol.</i> 2018;11:467-475.	Retrospective, chart review, noncomparative	20	Restylane Skinbooster	12 weeks
Streker M, et al. Stabilized hyaluronic acid-based gel of non-animal origin for skin rejuvenation: face, hand, and décolletage. <i>J Drugs Dermatol.</i> 2013;12(9):990-994.	Prospective, comparative	30	Restylane Skinboosters Vital Light and micropuncture injector device	36 weeks
Biesman BS and Bowe WP. Effect of midfacial volume augmentation with non animal stabilized hyaluronic acid on the nasolabial fold and global aesthetic appearance. <i>J Drugs Dermatol.</i> 2015;14(9):943-947.	Prospective, noncomparative	20	Perlane	6 months
Cartier H, et al. Repeated full-face aesthetic combination treatment with abobotulinumtoxinA, hyaluronic acid filler, and skin-boosting hyaluronic acid after monotherapy with abobotulinumtoxinA or hyaluronic acid filler. <i>Dermatol Surg.</i> 2020;46(4):475-482.	RCT	61	Restylane Lidocaine, Restylane Lyft Lidocaine, Restylane Refyne, or Restylane Defyne (n=31), or Azzalure (n=30) monotherapy vs full-face combination treatments with Azzalure, Restylane filler, and Restylane Skinboosters Vital Lidocaine (n=61)	18 months
Oduze M, et al. Restylane and people of color. <i>Plast Reconstr Surg.</i> 2007;120(7):2011-2016.	Retrospective	60	Restylane	9 months
Morris CL, et al. Patient-preferred sites of Restylane injection in periocular and facial soft-tissue augmentation. <i>Ophthalmic Plast Reconstr Surg.</i> 2008;24(2):117-121.	Case series, retrospective	145	Restylane	Median 8 months
Kanchwala SK, et al. Reliable soft tissue augmentation: a clinical comparison of injectable soft-tissue fillers for facial-volume augmentation. <i>Ann Plast Surg.</i> 2005;55(1):30-35; discussion 35.	Retrospective	976	Restylane (n=86) vs Radiesse (n=141), Hylaform (52), or autologous fat (n=697)	1 year
McCracken MS, et al. Hyaluronic acid gel (Restylane) filler for facial rhytids: lessons learned from American Society of Ophthalmic Plastic and Reconstructive Surgery member treatment of 286 patients. <i>Ophthalmic Plast Reconstr Surg.</i> 2006;22(3):188-191.	Retrospective	286	Restylane	Not specified
Beer KR, et al. Remodeling of periorbital, temporal, glabellar, and crow's feet areas with hyaluronic acid and botulinum toxin. <i>J Cosmet Dermatol.</i> 2014;13(2):143-150.	Prospective, noncomparative, open label	20	Perlane + Dysport vs Dysport	9 months

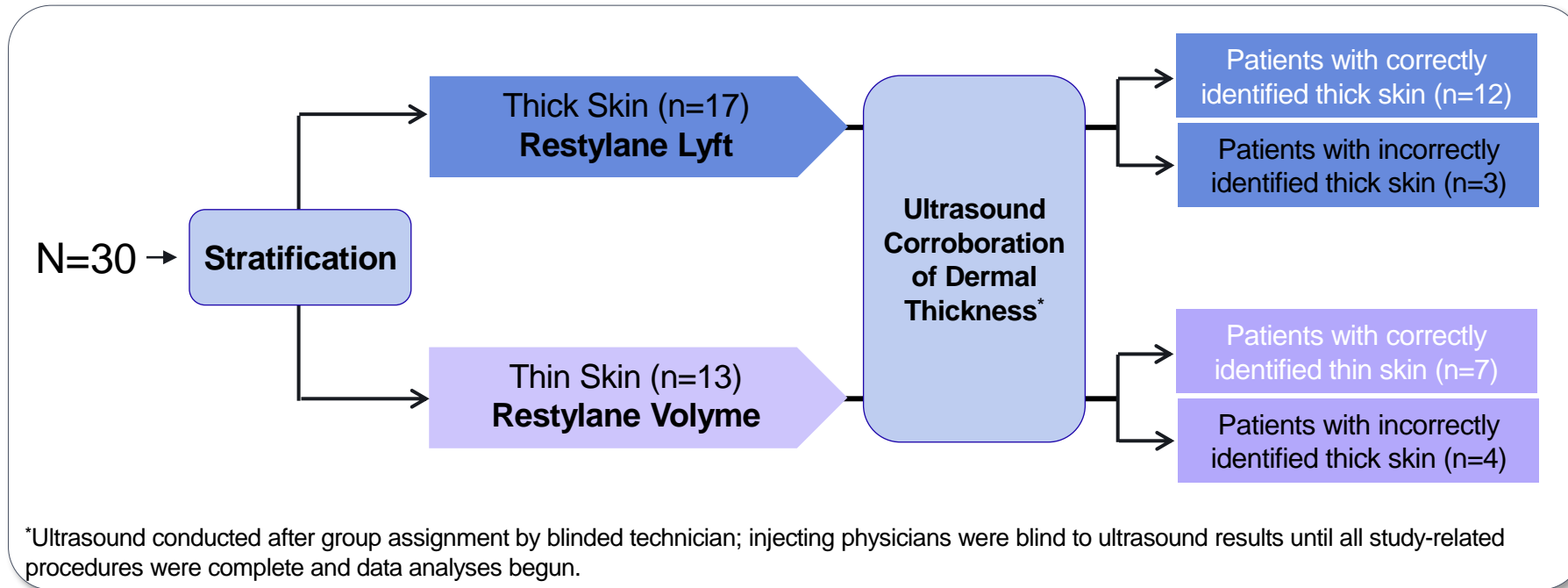
NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

Should Patients Be Stratified Based on Skin Thickness?

GAIN

16-Week, Prospective, Single-Center Trial in Patients Treated for Midface Volume Loss or Contour Deficiency (N=30)¹

Patients were stratified based on skin thickness and assigned to receive either Restylane Lyft (patients with thick skin) or Restylane Volyme (patients with thin skin)



Primary Efficacy Measure

- Change from baseline at week 16 in physician-assessed GAIS score

Secondary Efficacy Measures

Between-group comparisons of

- Physician-assessed GAIS scores
- MMVS scores (blinded review)
- PSQ results

GAIS, Global Aesthetic Improvement Scale; MMVS, Medicis Midface Volume Scale; PSQ, Patient Satisfaction Questionnaire.

1. Nikolis A, et al. *Aesthet Surg J Open Forum*. 2020;2(1):0jaa005.

Should Patients Be Stratified Based on Skin Thickness?

GAIN

PSQ, GAIS, and MMVS response rates per subgroup at week 16

Treatment Group, n (%)	PSQ, n (%)		GAIS score, n (%)				MMVS (Right Side), n (%)		MMVS (Left Side), n (%)	
	Extremely Satisfied	Satisfied	Very Much Improved	Much Improved	Improved	No Change	0	1	0	1
Restylane Lyft										
Correctly identified with thick skin, 12 (46.15)	8 (66.66)	4 (33.33)	2 (16.66)	7 (58.33)	3 (25.0)	0	3 (30.0)	7 (70.0)	2 (20.0)	8 (80.0)
Incorrectly identified with thick skin, 3 (11.53)	1 (33.33)	2 (66.66)	0	1 (33.33)	1 (33.33)	1 (33.33)	0	3 (100.0)	3 (50.0)	3 (50.0)
Restylane Volyme										
Correctly identified with thin skin, 7 (26.92)	3 (42.85)	4 (57.14)	0	2 (28.57)	5 (71.42)	0	1 (16.66)	5 (83.33)	1 (16.66)	5 (83.33)
Incorrectly identified with thin skin, 4 (15.38)	3 (75.0)	1 (25.0)	3 (75.0)	1 (25.0)	0	0	0	4 (100.0)	1 (25.0)	3 (75.0)

MMVS response rate was defined as an at least 1-point improvement.

GAIS, Global Aesthetic Improvement Scale; MMVS, Medicis Midface Volume Scale; PSQ, Patient Satisfaction Questionnaire.

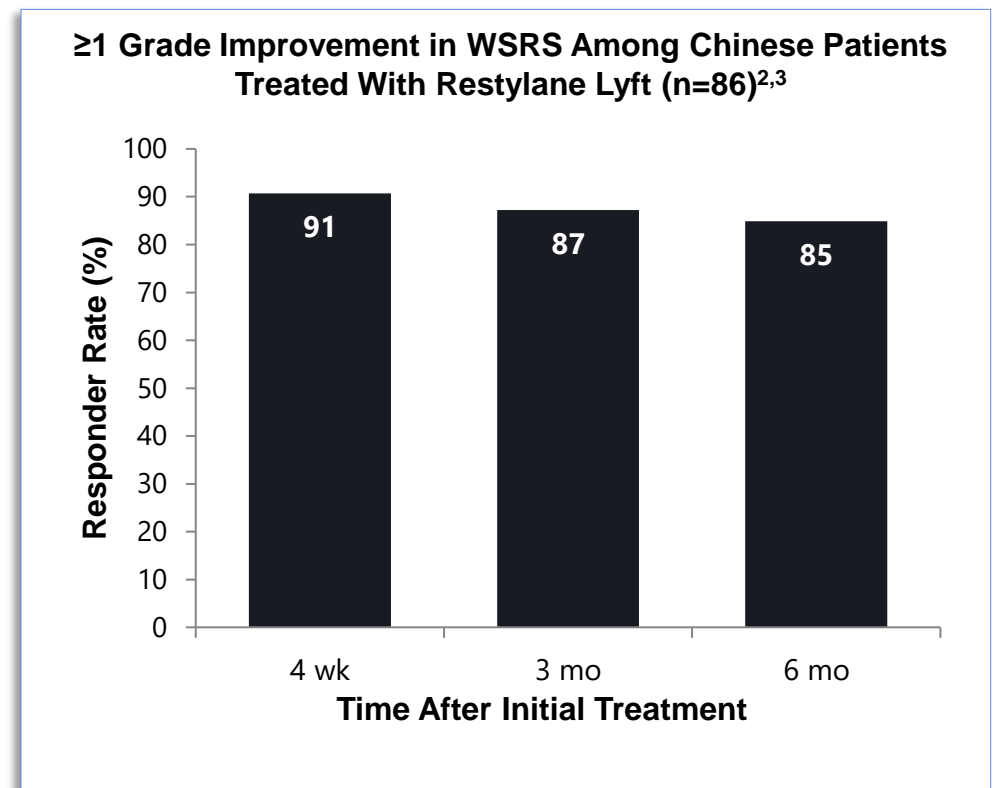
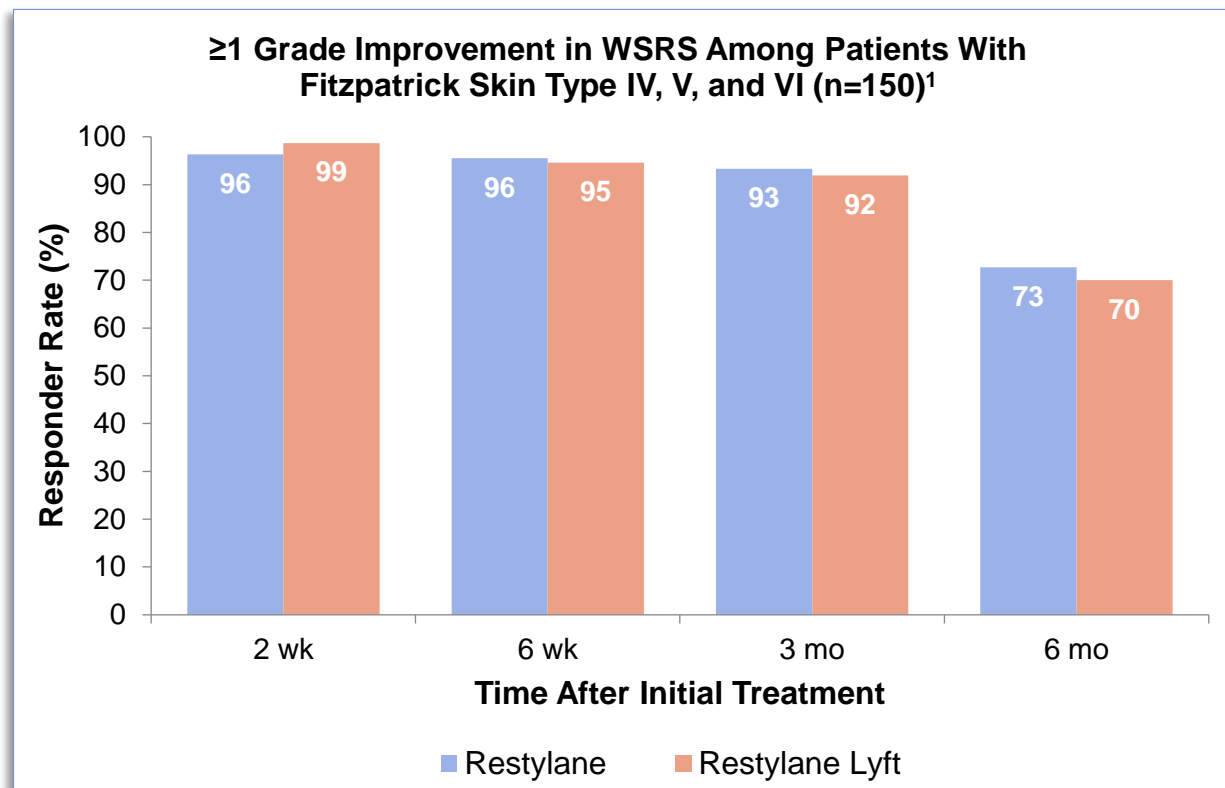
Nikolis A, et al. *Aesthet Surg J Open Forum*. 2020;2(1):0jaa005

Efficacy in Persons of Color

GAIN

Restylane and Restylane Lyft Are Effective in Patients With a Wide Variety of Skin Types

≥70% of patients with Type IV, V, and VI skin types showed sustained reductions in NLF severity following treatment with Restylane or Restylane Lyft,¹ as did 85% of Chinese patients treated with Restylane Lyft²

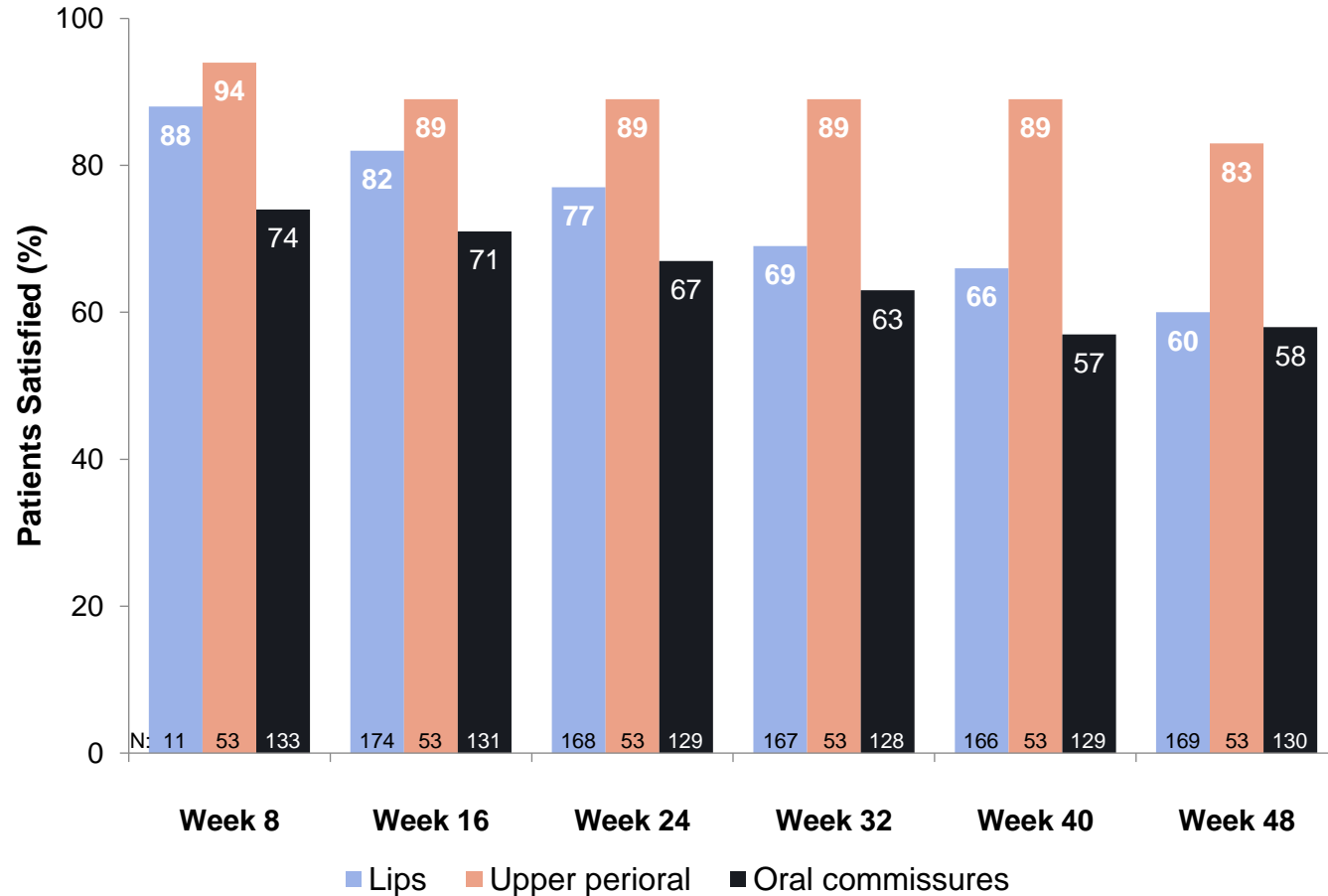


NLF, nasolabial fold; WSRS, Wrinkle Severity Rating Scale.

1. Taylor SC, et al. *Dermatol Surg.* 2010;36:741-749; 2. Yan X, et al. *Plast Reconstr Surg.* 2009;24(5):256; 3. Data on file. Galderma Laboratories, L.P.

Efficacy and Safety - Restylane® KYSSE - Lip Fullness Augmentation

GAIN



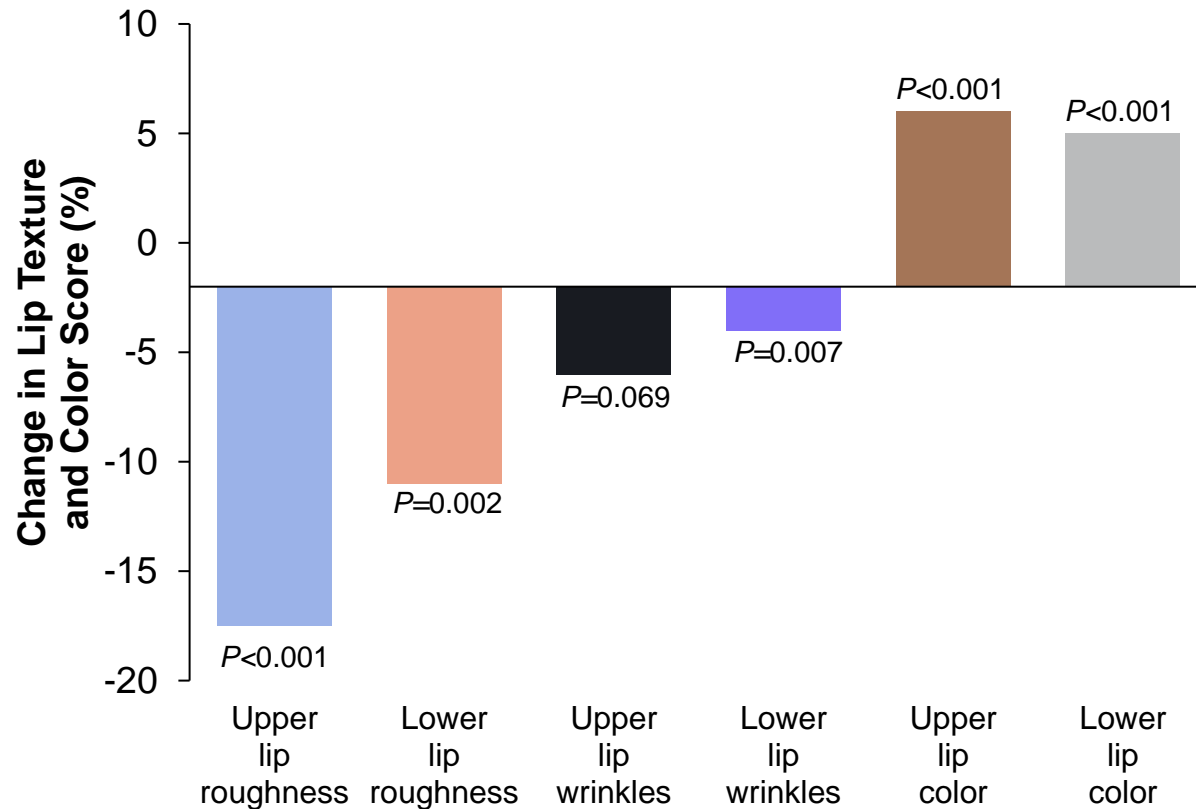
- This graph shows the responder rates from week 8 till week 48
- The average patients' satisfaction score peaked at week 8 after treatment with Restylane® KYSSE and remained higher than the baseline score through week 48
- There were no treatment-emergent adverse events reported for most patients after the treatment

Study product	RESTYLANE® KYSSE
Design	A randomized, controlled, evaluator-blinded, multicenter study
Indication	Lip fullness augmentation
Main conclusions	<ul style="list-style-type: none"> • Restylane® KYSSE was noninferior in lip fullness augmentation at week 8 • Well tolerated and effective throughout the 48-week study

Weiss R, et al. *Dermatol Surg.* 2021;00:527-532.

Efficacy: Quantitative Assessment - Restylane® KYSSE

GAIN

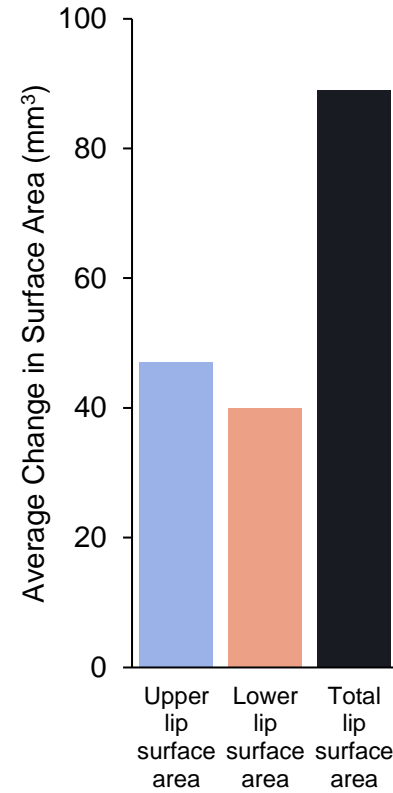
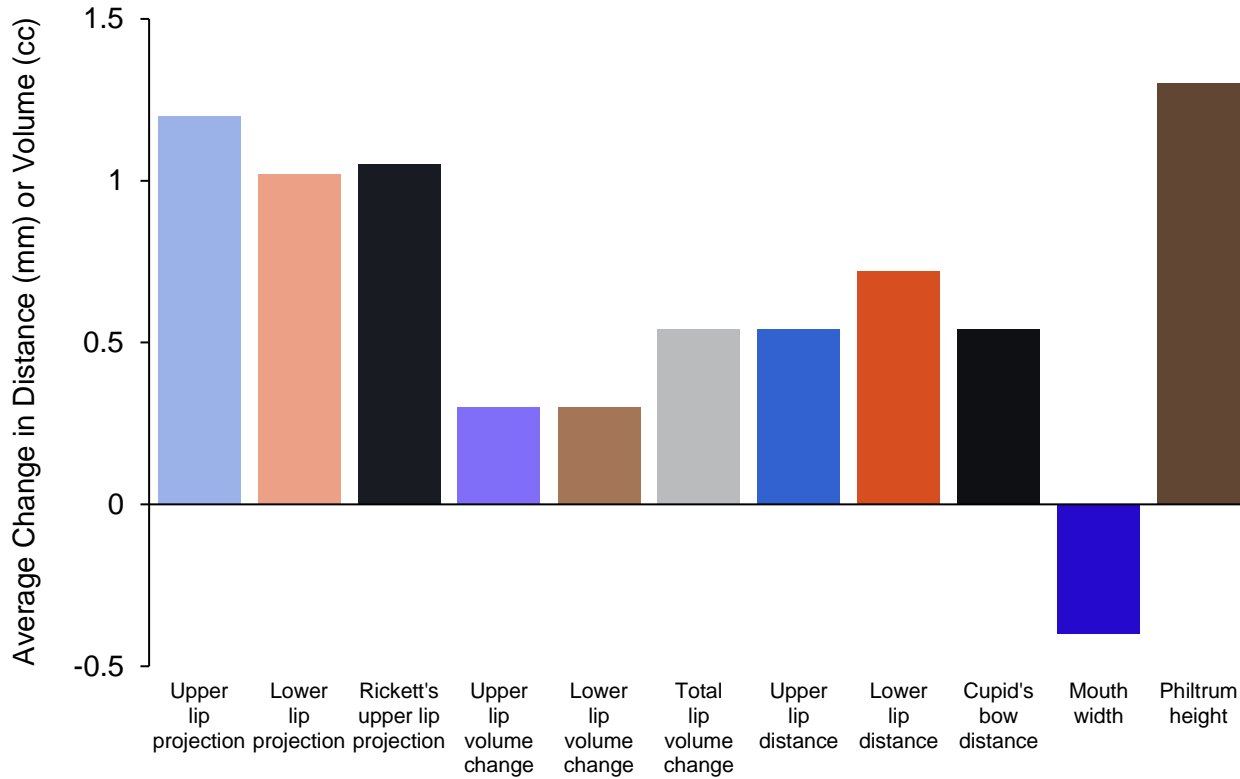


- This graph shows improvement in lip texture and lip colour, that is, redness following the treatment at week 8
- It shows a decrease in the mean values of upper lip and lower lip roughness and wrinkles and an increase in the mean values for upper and lower lip color

Study product	RESTYLANE® KYSSE
Design	8-week open-label, phase IV multicenter study 2D and 3D photographic assessments
Indications	Lip texture, color (redness), lip fullness, and lip and perioral surface stretch (dynamic strain)
Main conclusions	<ul style="list-style-type: none"> • A significant improvement in lip texture, lip color and fullness • A significant increase in dynamic strain

Efficacy: Quantitative Assessment - Restylane® KYSSE

GAIN



- The graph here shows the average change in lip enhancement and surface area at week 8
- The total lip volume and surface area increased significantly following treatment with Restylane® KYSSE

Study product	RESTYLANE® KYSSE
Design	8-week open-label, phase IV multicenter study 2D and 3D photographic assessments
Indications	Lip texture, color (redness), lip fullness, and lip and perioral surface stretch (dynamic strain)
Main conclusions	<ul style="list-style-type: none"> • A significant improvement in lip texture, lip color, and fullness • A significant increase in dynamic strain

GALDERMA
EST. 1981



AMI Technologies

Guidance for HCP and medical staff

About AMI Technologies

Our vision NEW FUTURE

- היום, כשאומרים טכנולוגיות רפואיות – אומרים אמי טכנולוגיות. כבר למעלה משלושה עשורים (ליתר דיוק החל מ-1986), מובילה החברה את התחום בישראל כנציגה בלעדית של יצרניות הטכנולוגיות הרפואיות המובילות בעולם (אירופה וארה"ב).
אמי טכנולוגיות חרטה על דגלה להטביע חותם על עולם הרפואה בישראל, באמצעות מומחיותה בבחירת והטמעת טכנולוגיות חדשניות ומתקדמות לבתי החולים, מרפאות וחדרי טיפולים. הטכנולוגיות החדשות המקודמות בארץ על ידי אמי טכנולוגיות מאפשרות לצוותים הרפואיים להעניק טיפול מתקדם יותר להבטחת שיפור איכות החיים של המטופלים.
- המוניטין ממנו נהנית החברה כיום נבנה בשנים של צבירת ידע וניסיון, שותפות לדרך עם יצרנים בינלאומיים מומחים, מקצועיות חסרת פשרות של אנשי המקצוע וחתימה למצוינות בכל שלבי העבודה.
כל אלה מגיעים עם מעטפת שירות אישית וצמודה, הקפדה יוצאת דופן על עמידה בלוחות זמנים ויכולת ייחודית להעניק ערך מוסף משמעותי מקצועי ושירותי ללקוחותיה.
חדשנות, מקצועיות, שירות, עבודת צוות ויושרה, מהווים את הערכים המייצגים את פעילות החברה ובאים לביטוי בממשק מול כל אחד מעובדיה, החל ממערך קשרי הלקוחות ועד לליווי הצמוד בתפעול והטמעת הטכנולוגיות מול כל לקוח ולקוח.



Galderma at a glance

With a unique heritage in dermatology as well as decades of cutting-edge innovation, Galderma is the leading company solely dedicated to advancing dermatology for every skin story.

We are strategically positioned in attractive, consumer-driven segments of the dermatology market, characterized by high growth fundamentals. Through trusted partnerships with healthcare professionals, we ensure to meet individual consumer and patient needs with superior outcomes.

KEY FACTS ABOUT GALDERMA

3.760 B USD

2022 net sales

620+

clinical trials funded across 30+ countries since 2020

4

manufacturing sites

131

major health authority approvals since 2020

Global presence

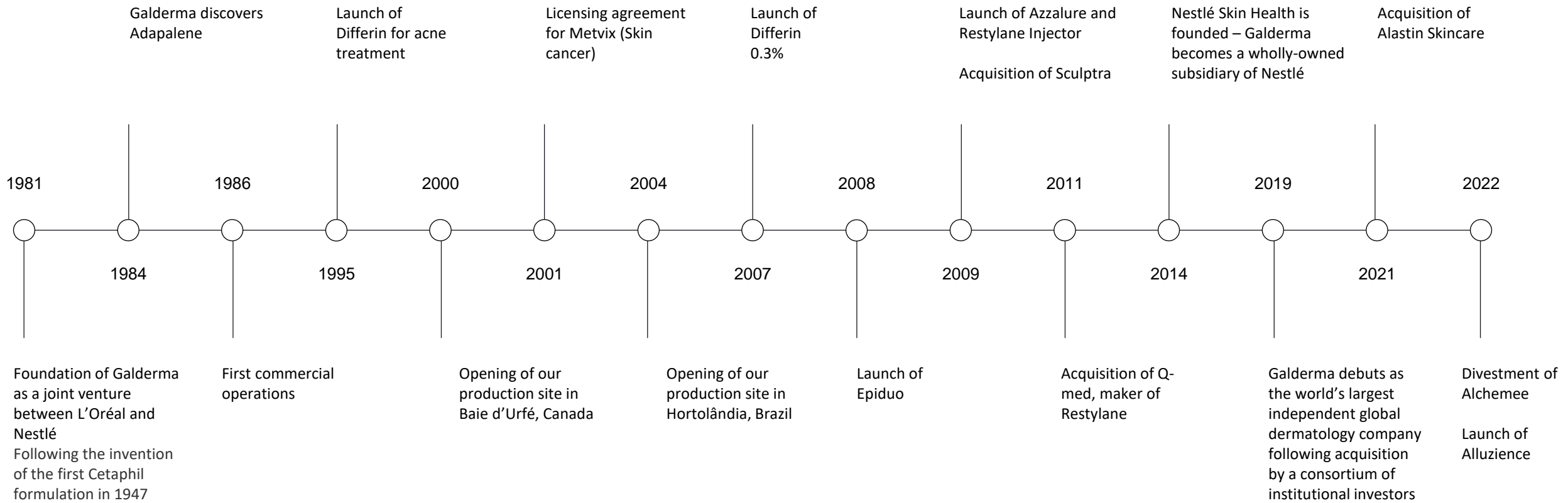
we operate from 50 sites in 40 countries, with our headquarters in Switzerland

100,000+

aesthetics healthcare professionals trained via our Global Aesthetic Injector Network (GAIN) program in 2022

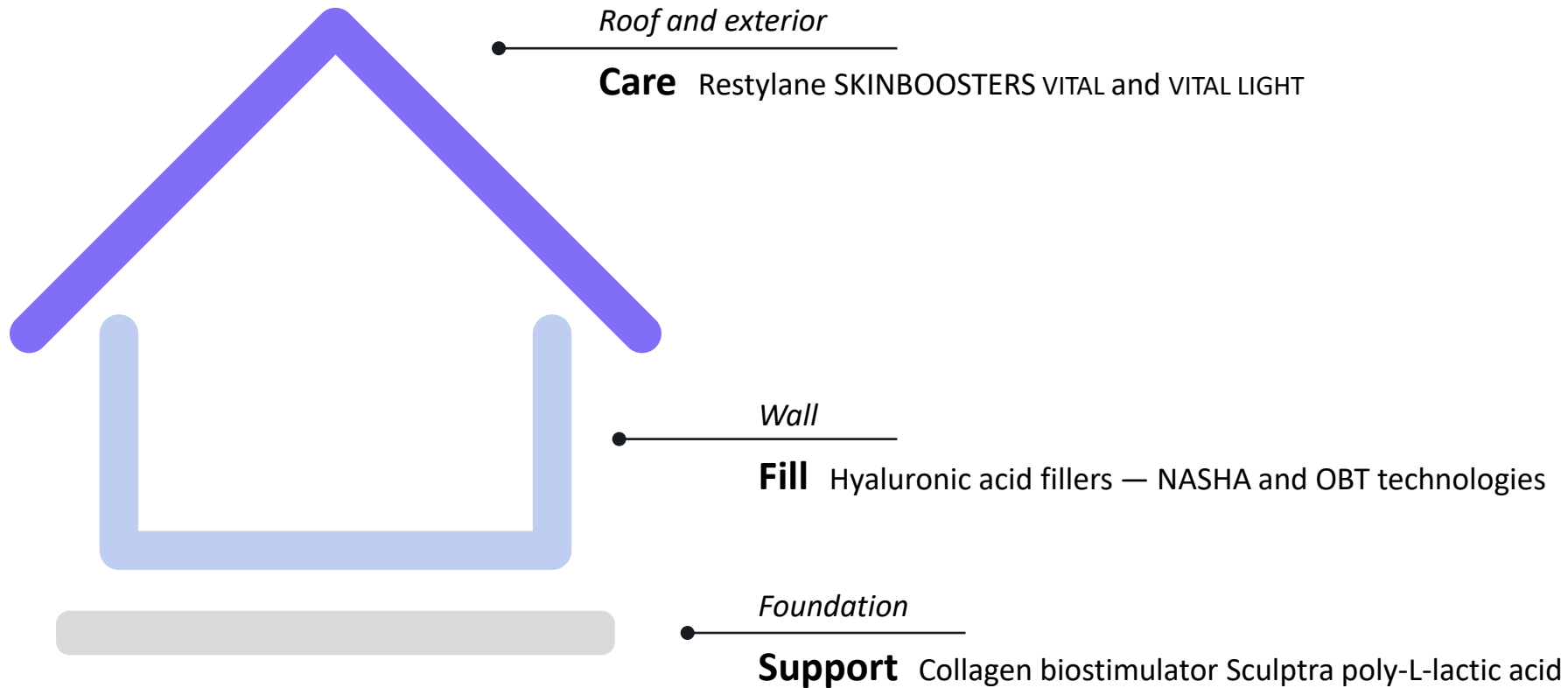
A Timeline of our history

GAIN

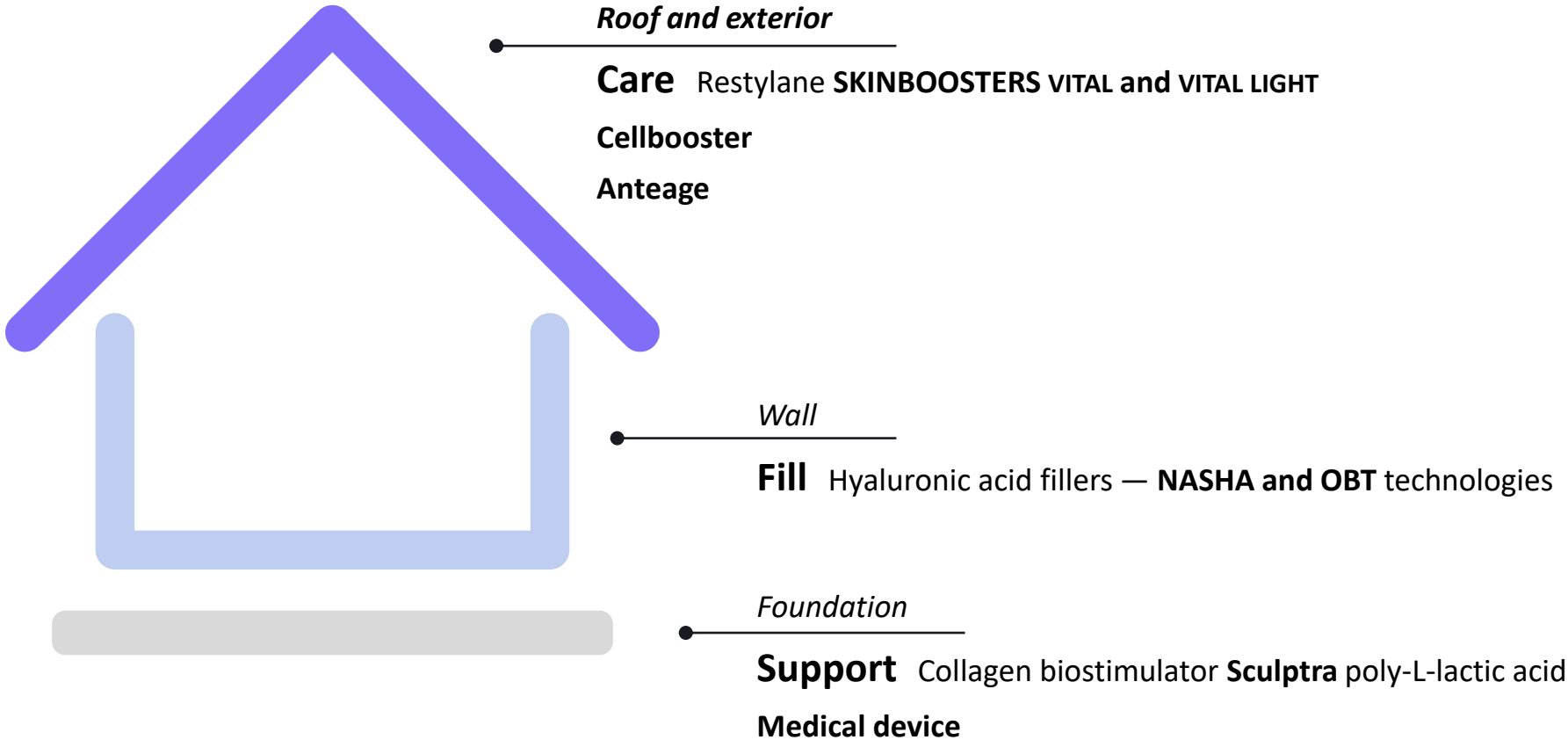


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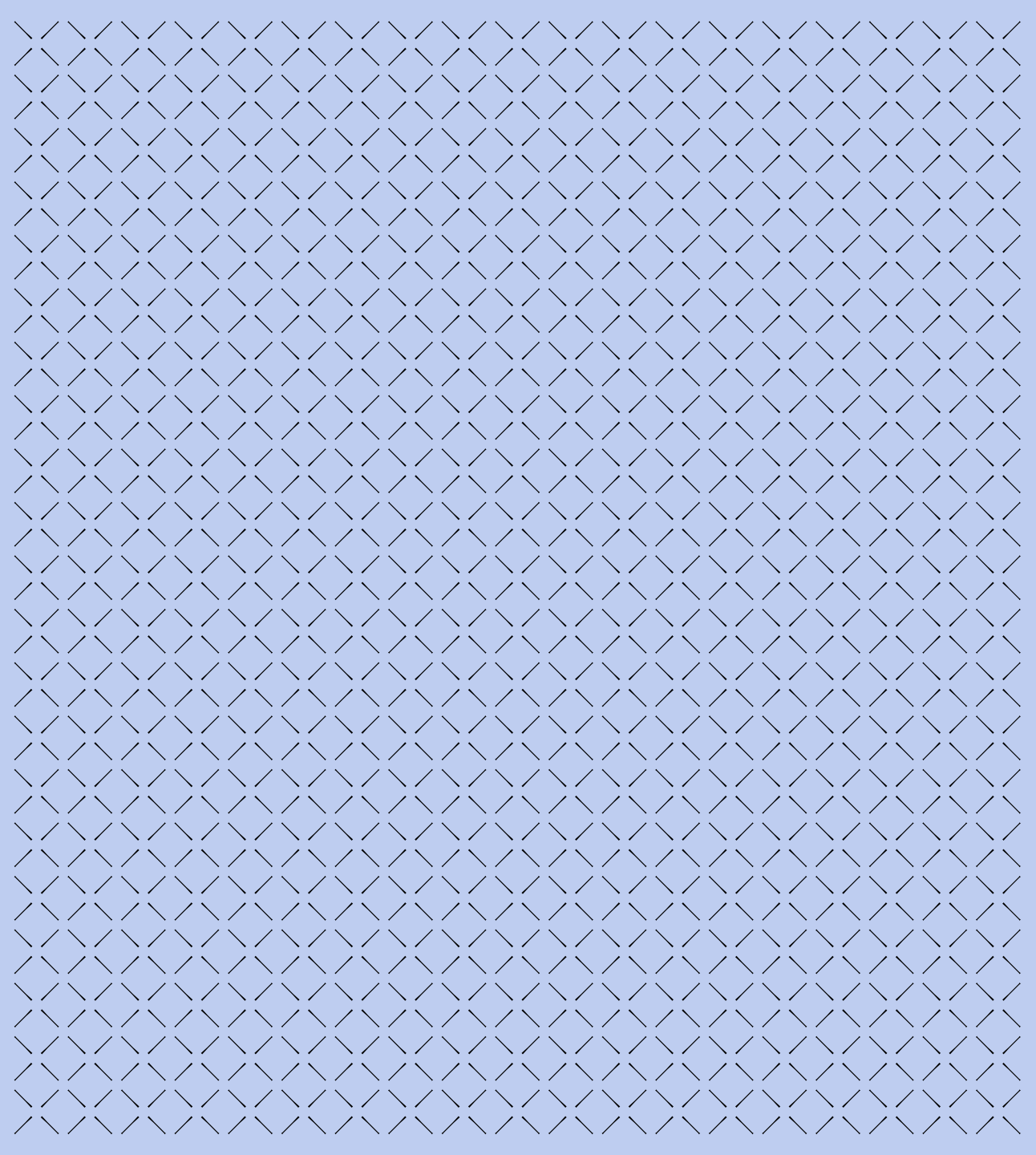
The Galderma's full-face approach portfolio



AMI Technologies full-face approach portfolio



Pathophysiology of Aging





BONE STRUCTURE

VOLUME LOSS
(fat pads)

**TISSUE
DISPLACEMENT**
(ligaments)

MUSCLE ACTIVITY

SKIN QUALITY

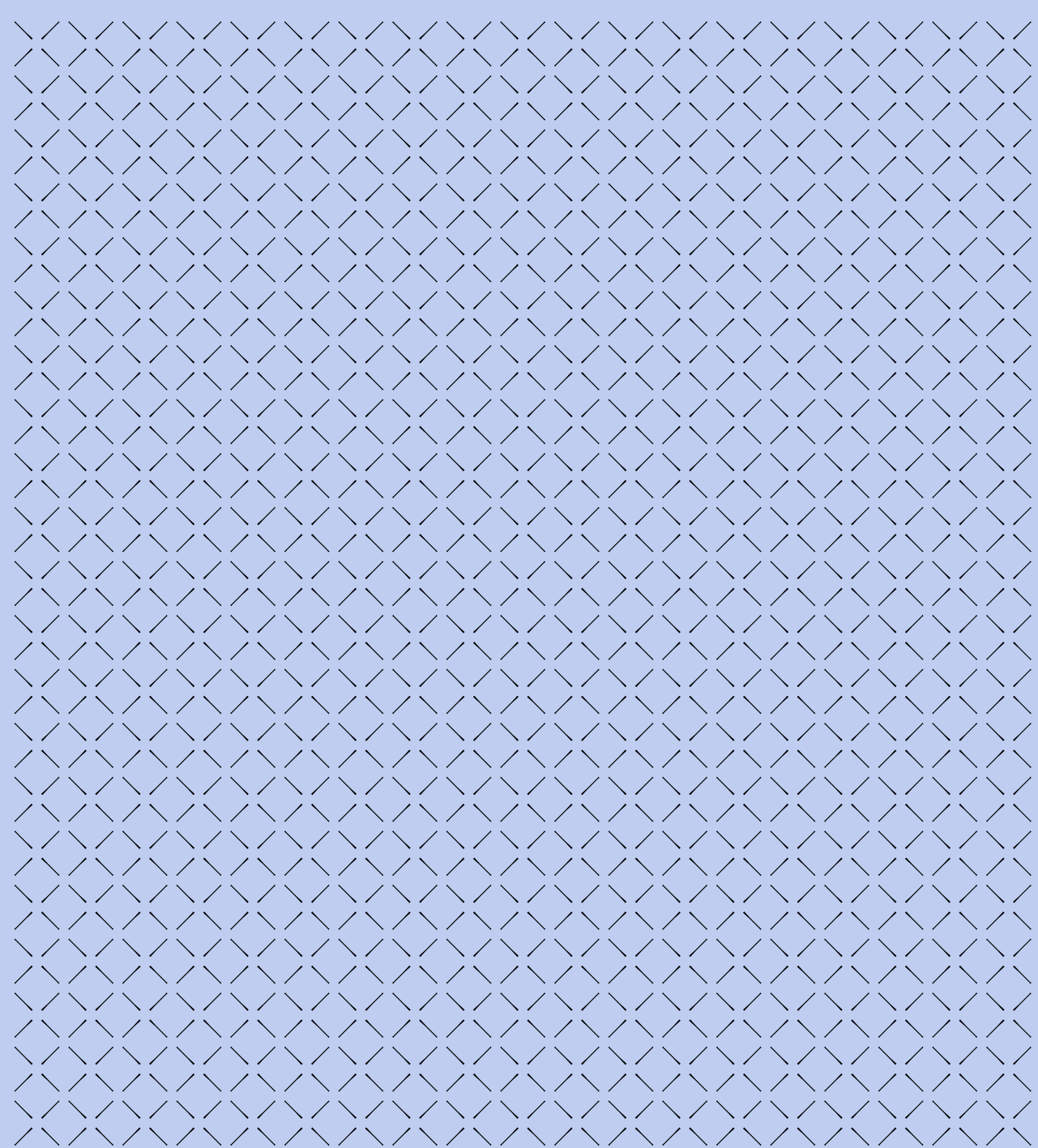


GAIN

Facial Aging Involves Structural Changes

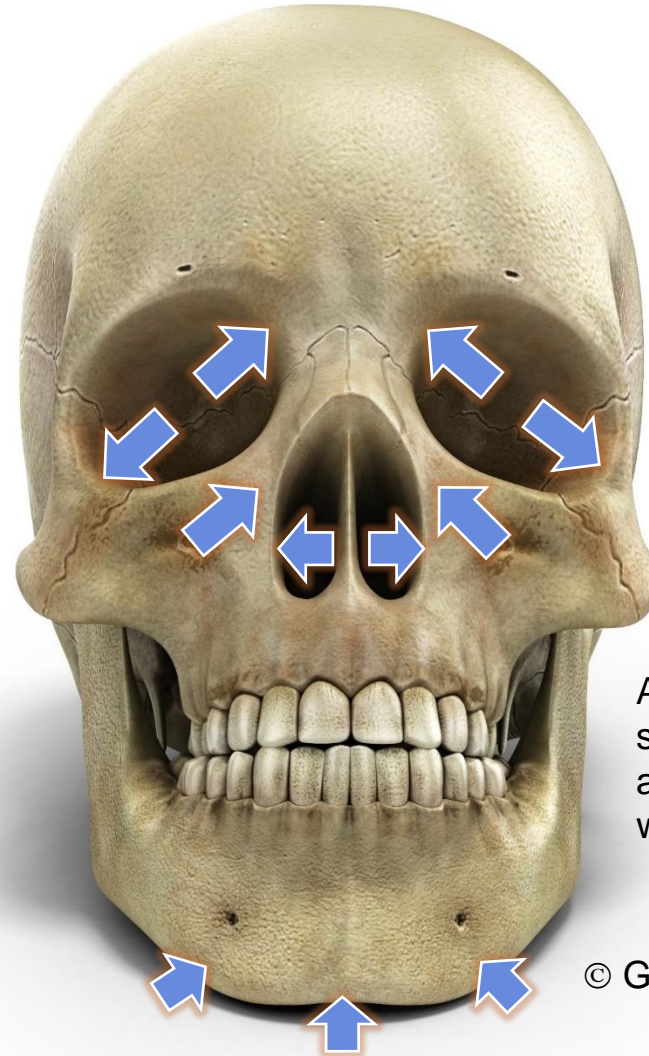
To surfaces and
sub-surfaces

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Facial Skeleton Is Susceptible to Resorption

- Changes occur mainly in the periorbital and mid cheek and specifically include the superomedial and inferolateral aspects of the orbit, the medial suborbital and pyriform areas of the maxilla and the prejowl area of the mandible.



Arrows indicate the areas of the facial skeleton susceptible to resorption with aging. The size of the arrow correlates with the amount of resorption.

© Galderma

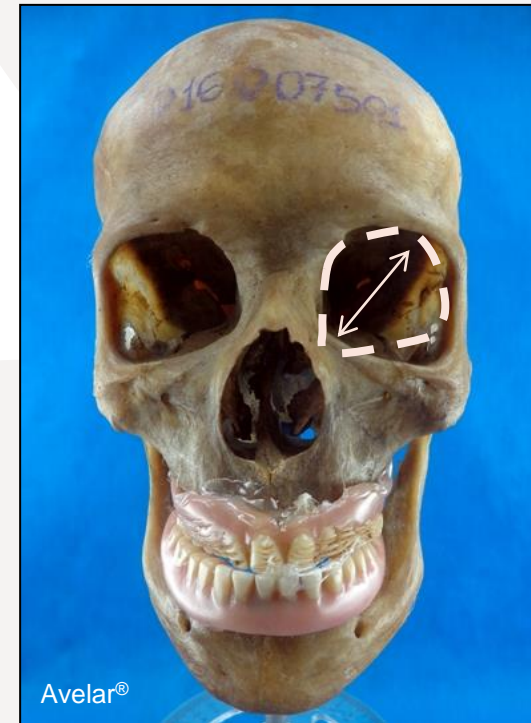
Orbit aging



Male, 18 years



Male, 41 years

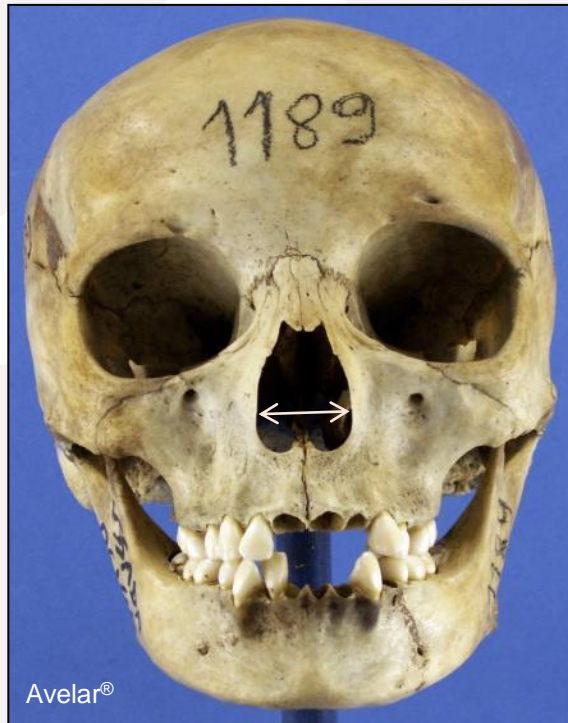


Male, 63 years

Avelar LET et al. PRS Global Open 2017;5(4):e1297

Bone structure – Piriform Aperture

Piriform aperture aging



Male, 18 years



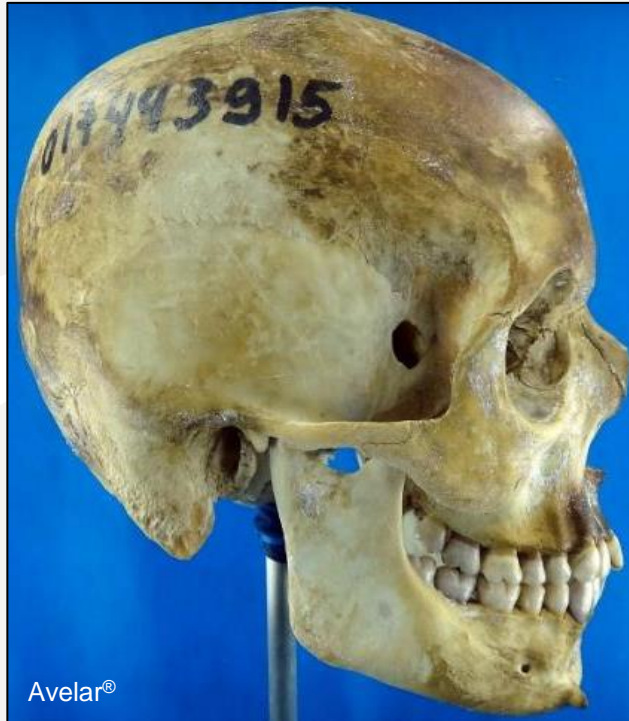
Male, 41 years



Male, 63 years

Avelar LET et al. PRS Global Open 2017;5(4):e1297

Aging of the 3 thirds



Male, 18 years



Male, 41 years



Male, 63 years

Bone structure – Angle of mandible



Up to 20 years old



Between 20 and 50 years



Over 50 years

Avelar LET et al. PRS Global Open 2017;5(4):e1297

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EST. 1981

SUPERFICIAL AND DEEP FACIAL
FAT PADS

The aging process

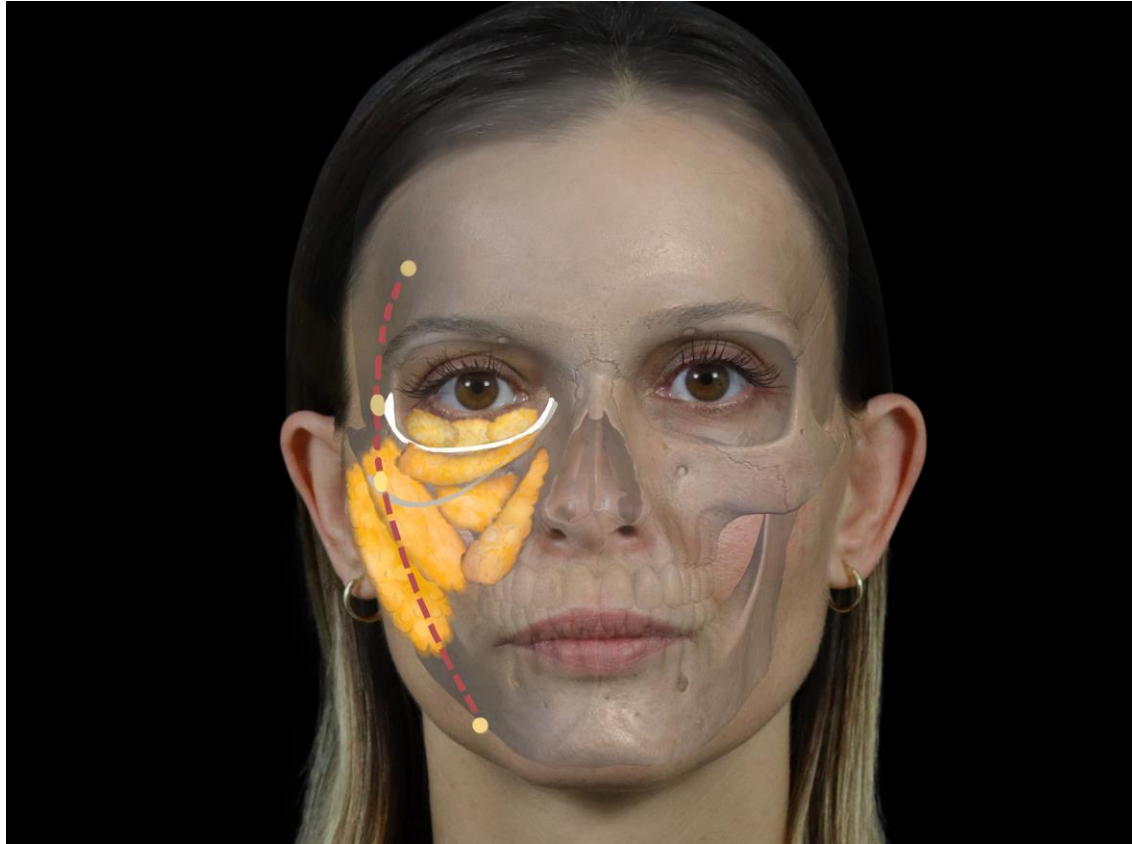


What the fat under your face looks like at age 30 (left) and 60 (right)

Courtesy of Galderma

Facial Aging

GAIN

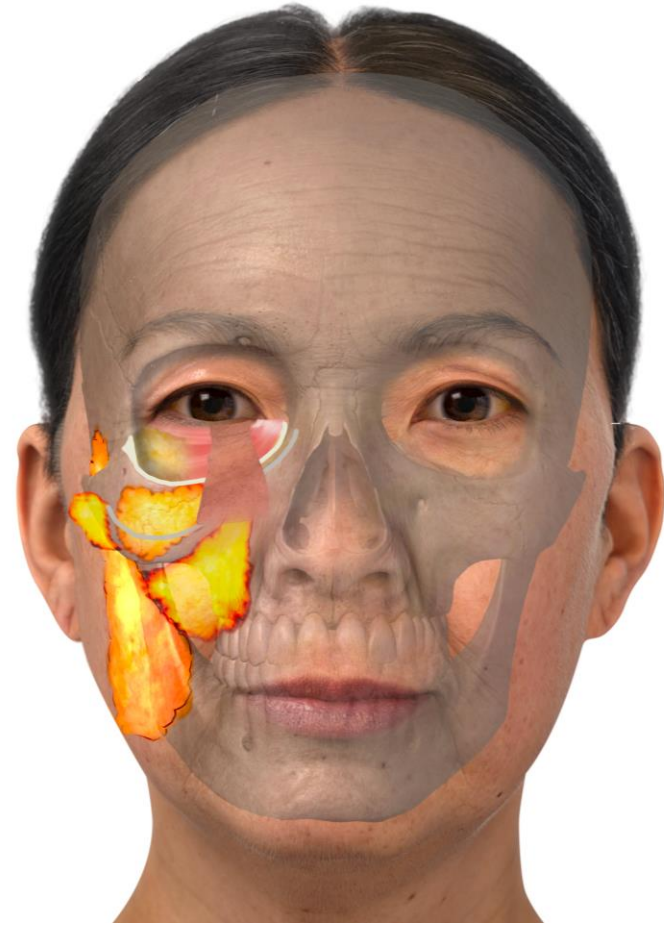
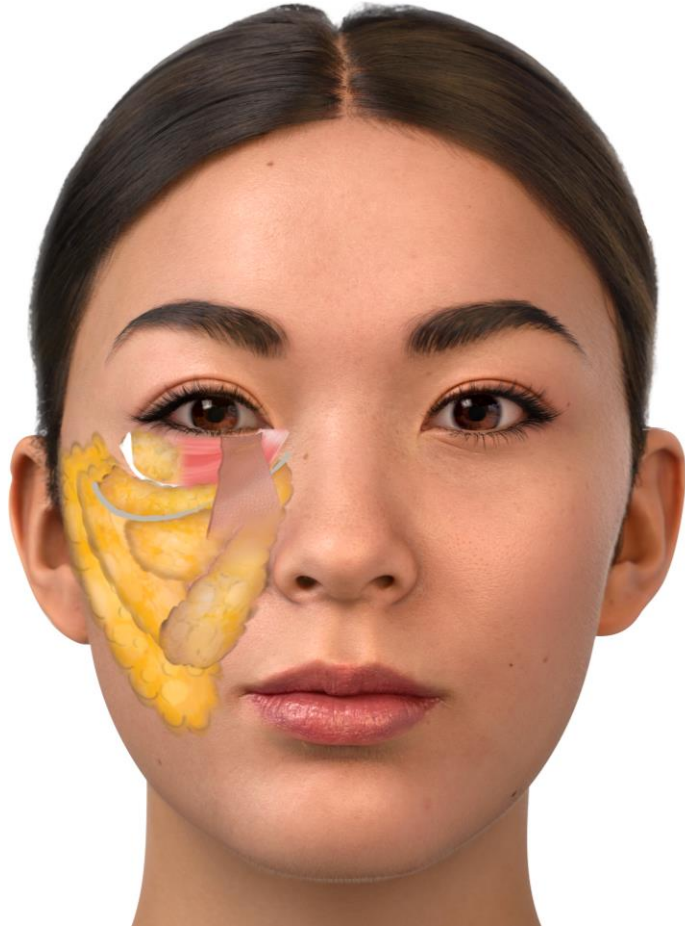


NLF, nasolabial fold.

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Facial Aging

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NLF, nasolabial fold.

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Volume Loss

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The face naturally loses volume and fat with age, resulting in a sunken, tired appearance

- Some people require a correction of panfacial volume loss from aging
- Others may need correction to give the appearance of higher cheekbones or a stronger chin, or to enhance a specific area

Age-Related Changes in Facial Shape Are Caused by Loss of Structural Support

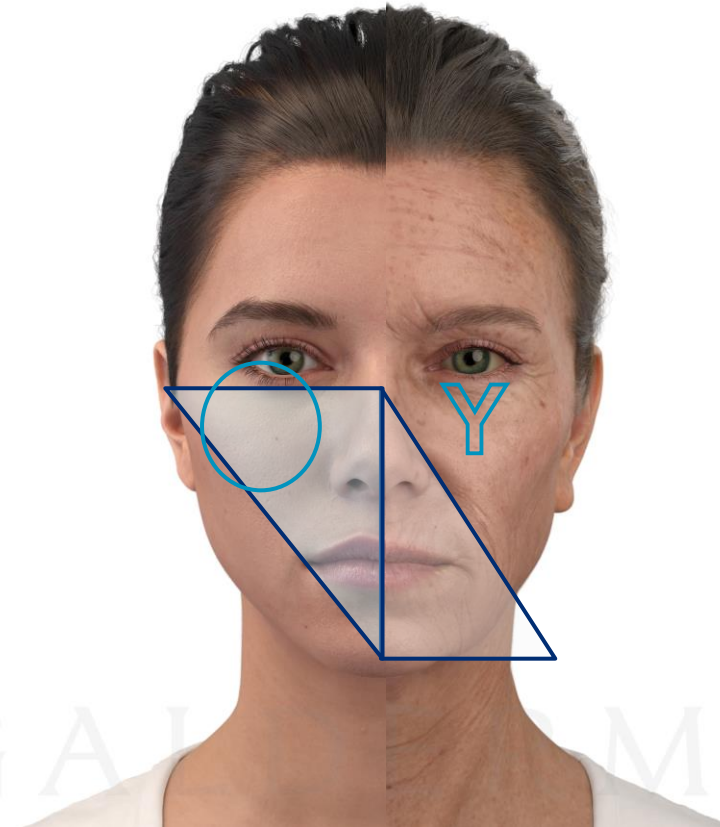
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Triangle
of youth

Inverted
triangle

Facial aging is marked by:

- Degradation of the skeleton and soft tissues¹
- Descent of cheek fat²
- Depletion of cheek fullness²



This results in
volume loss
and sagging^{1,2}

1. Cohen AJ. The mid face facelift. Available from: <http://emedicine.medscape.com/article/1818907-overview>. Accessed April 2019;

2. Coleman SR, et al. *Aesthet Surg. J* 2006;26(1S):S4-S9.



The aging process causes fundamental changes in the skin, soft tissue, and skeletal support structures of the human face. Dermal changes are due to intrinsic and extrinsic factors:

- Intrinsic factors refer to genetically determined hormonal and biochemical processes that cause irreversible degeneration of skin tissue
- Extrinsic factors refer to environmental influences, particularly UV radiation, that damage the skin and compromise skin integrity

Skin Aging

GAIN

As aging occurs

- The dermis thins owing to collagen loss¹
- Moisture retention is reduced owing to HA loss²
- Elasticity is reduced owing to loss of elastin³



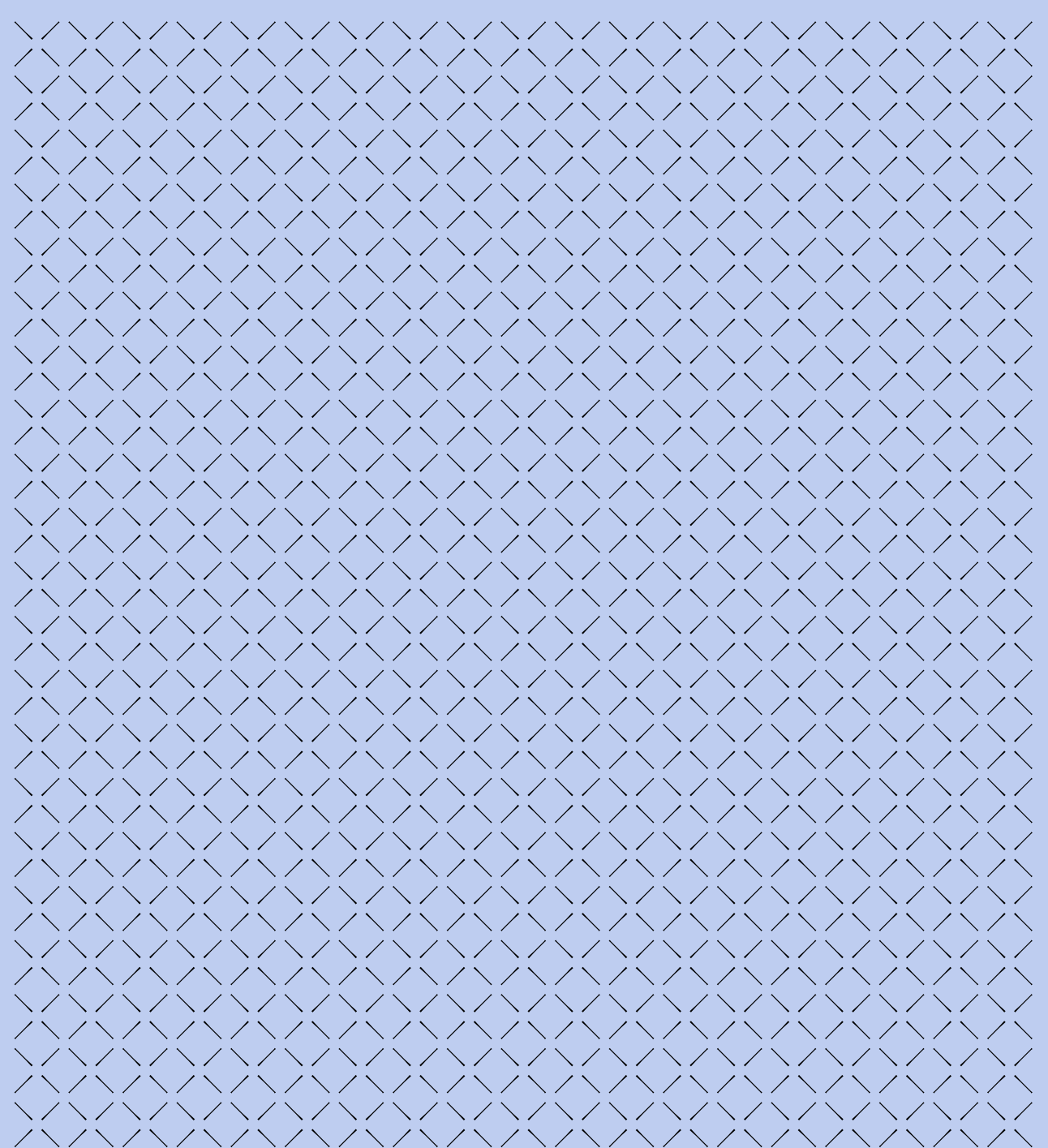
Firm skin that responds to movement and regains a smooth appearance at rest is essential for a youthful appearance

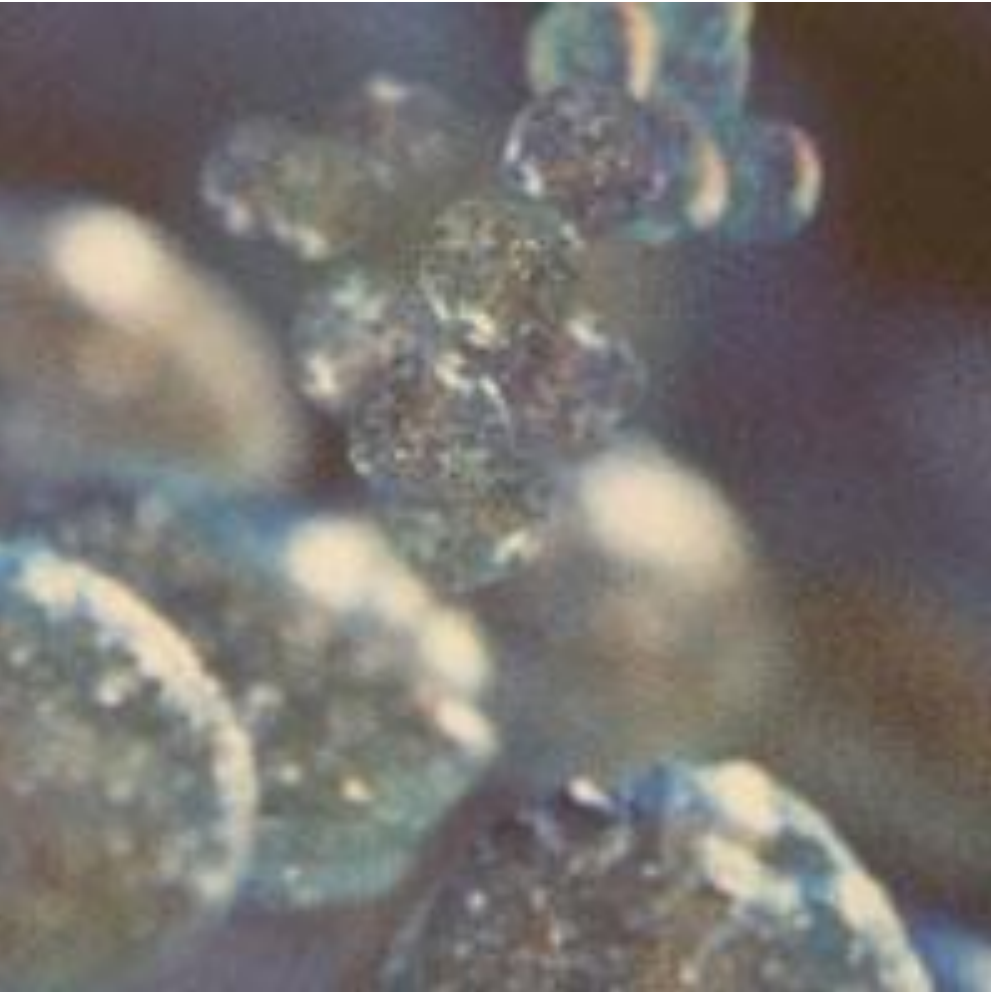
HA, hyaluronic acid.

1. Vlegaar D and Fitzgerald R. *J Drugs Dermatol.* 2008;7:209; 2. Papakonstantinou E, et al. *Dermato-Endocrinology* 2012;4(3):253-258; 3. Farage MA, et al. *Adv Wound Care.* 2007;2(1):5-10.

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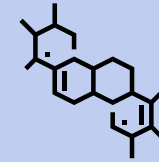
Introduction to Hyaluronic Acid Gels





Physiological Functions

- Binds water
- Influences cell motility
- Protects against free radicals
- Promotes wound healing



Physicochemical Properties

- Ubiquitous in all vertebrate species (nonimmunogenic)
- Major component of extracellular matrix
- Found in soft connective tissues, vitreous jelly, synovial fluid

HA, hyaluronic acid.
Fakhari A and Berklund C. *Acta Biomater.* 2013;9(7):7081-7092.

Biomedical Applications of HA

GAIN



Identified and isolated in 1934^{1,2}



Extensively used in medical applications including²

- As a chondroprotector in osteoarthritic joints
- To protect the corneal endothelium during cataract surgery



Originally derived from animal sources (eg, umbilical cords, rooster combs)^{1,2}



Aesthetic use as a dermal filler began in the mid-1990s²

- Animal sources include bovine, porcine, or human collagen
- Synthetic forms include poly-L-lactic acid, calcium hydroxylapatite, polymethyl methacrylate, and polyacrylamide gel



Because of its short half-life—approximately 1–2 days—native HA requires stabilization to be used as a filler

HA, hyaluronic acid.

1. Fakhari A and Berkland C. *Acta Biomater.* 2013;9(7):7081-7092; 2. Gupta RC, et al. *Front Vet Sci.* 2019;6:192.

Production of HA Gels for Aesthetic Use

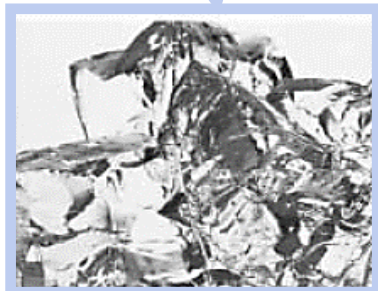
GAIN

Stabilization of HA From Nonanimal Sources



Viscous HA solution

+BDDE



*Cross-linked HA gel
(lasts many months
in vivo⁴)*

- HA of nonanimal origin is produced via bacterial fermentation
- Cross-linking HA with BDDE creates a network of HA chains that form a gel^{1,2}
 - Protects the gel from degradation and increases longevity in vivo³
 - Contributes to gel strength and increases resistance to deformation³
 - The specific cross-linking process is usually proprietary information and varies between different manufacturer of HA gel
- Once bound, BDDE is deactivated and the potential for toxicity is lost
- The extent of cross-linking is one factor that affects the firmness/softness of a gel^{2,3}

The detectable amount of residual BDDE in Restylane products is in accordance with US and EU regulatory standards

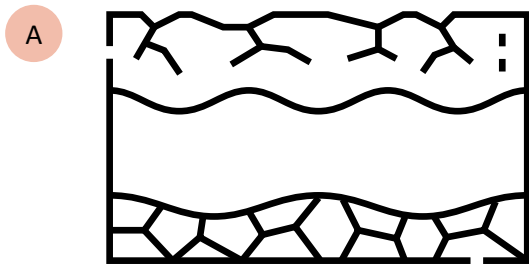
BDDE, 1,4-butanediol diglycidyl ether; HA, hyaluronic acid.

1. Micheels P, et al. *J Drugs Dermatol*. 2016;15(5):600-606; 2. Fakhari A and Berkland C. *Acta Biomater*. 2013;9(7):7081-7092; 3. Kablik J, et al. *Dermatol Surg*. 2009;35:302-312; 4. Monheit GD, et al. *Dermatol Ther*. 2006;19(3):141-150.

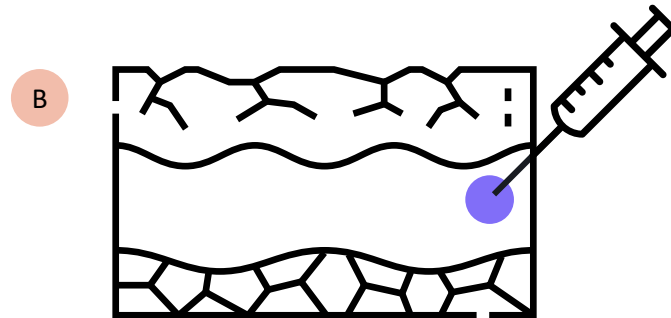
Aesthetic Use of Dermal Fillers

GAIN

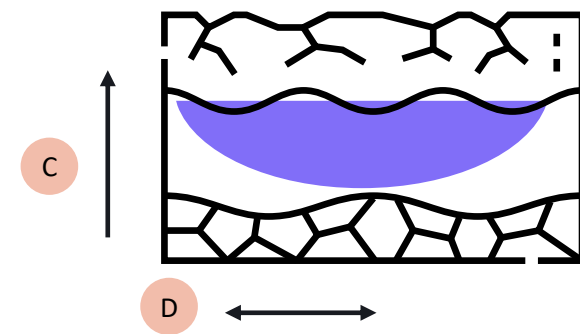
Restoring Lift and Volume



Aesthetic enhancement and restoration are **achieved through lifting of targeted tissues**



The degree of lift is **determined by the gel's strength/firmness**



Firm gels stay where they are injected and **provide pronounced lift** and correction of wrinkles and folds

Soft gels **spread after injection** and are more flexible upon deformation

Rohrich RJ, et al. *Plast Reconstr Surg Glob Open*. 2019;7:e2172.

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Gel Features

Implications for Dynamic Performance

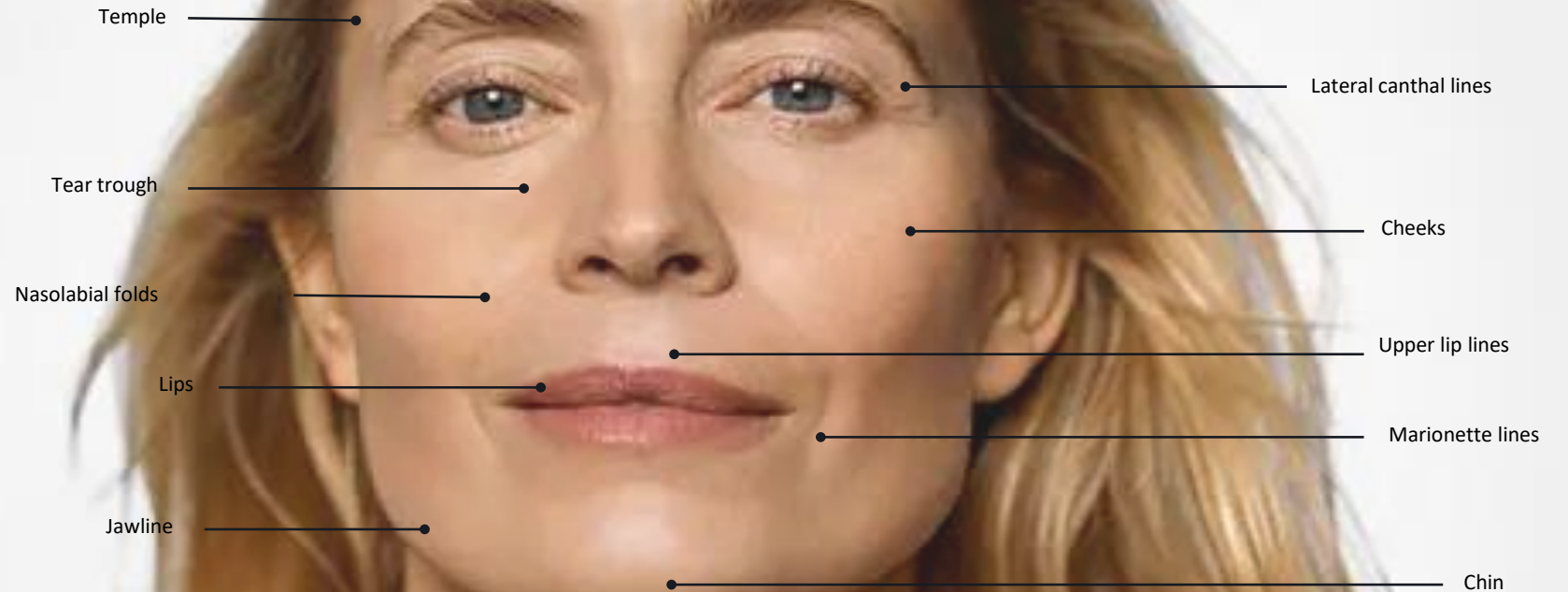
The right filler for any given aesthetic indication must provide sufficient **firmness** to lift tissues and correct volume loss

The chosen filler must also have sufficient **flexibility** to respond to the full range of movement and natural expressions

The necessary balance of firmness and flexibility will vary depending on the patient and the area to be treated

Different uses require fillers with different properties

GAIN



Gel Structure and Performance

Testing Gels

The viscoelastic properties of gel fillers are typically assessed with a **rheometer**, which subjects samples to various degrees of shear stress

Rheologic testing describes whether the gel behaves as rubber ball (elastic) or as syrup (viscous) or a combination thereof

GAIN

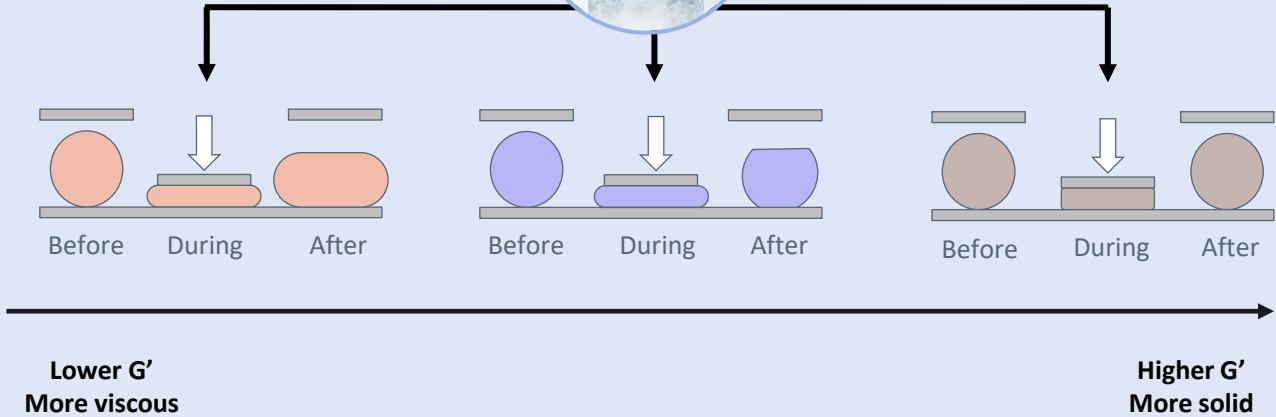


Key Rheologic Measures

G' and G''

- **G'** (elastic or storage modulus) represents the energy stored and recovered during stress¹⁻³
- **Higher G'** indicates greater resistance to deformation¹⁻⁴

- **G''** (viscous or loss modulus) represents the energy lost during stress¹⁻³
- **Higher G''** typically indicates a lower ability to recover after deformation¹⁻³
 - When G' exceeds G'', the filler is behaving more like a solid
 - When G'' is greater than G', more viscous behavior is prevailing⁴



G', storage modulus; G'', loss modulus.
 1. Lorenc ZP, et al. *J Drugs Dermatol*. 2017;16(9):876-882; 2. Pierre S, et al. *Dermatol Surg*. 2015;41(suppl 1):S120-S126; 3. Öhrlund Å. *J Cosmet Dermatol Sci Appl*. 2018;8:47-54; 4. Duffy J. *Ask the Expert: Using Rheology to Design Better Products—Yield Stress and How to Measure It*. July 24, 2012. <https://www.americanlaboratory.com/914-Application-Notes/117719-Ask-the-Expert-Using-Rheology-to-Design-Better-Products-Yield-Stress-and-How-to-Measure-It/>. Accessed May 28, 2021.

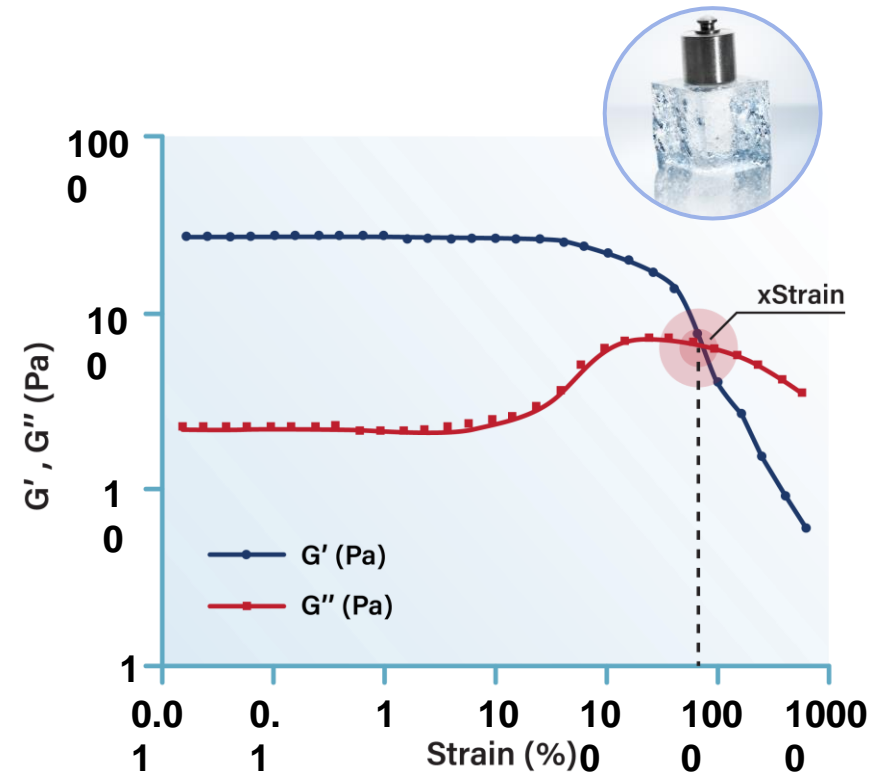
Assessing Gel Flexibility

GAIN

xStrain

- **xStrain** is an index of flexibility based on the intersection of G' and G'' ¹⁻⁴
 - A **simple, exact, and reproducible** method of identifying the point at which a stretched gel cannot return to its original shape²
 - An **established and widely accepted** measure based on standard and well-validated rheologic parameters¹⁻³
 - **Supported by peer-reviewed publications**¹⁻⁴
- Unlike G' , xStrain is measured under dynamic conditions²

When combined with G' , xStrain provides a comprehensive picture of the relative firmness and flexibility of HA fillers²



G' , storage modulus; G'' , loss modulus; HA, hyaluronic acid.

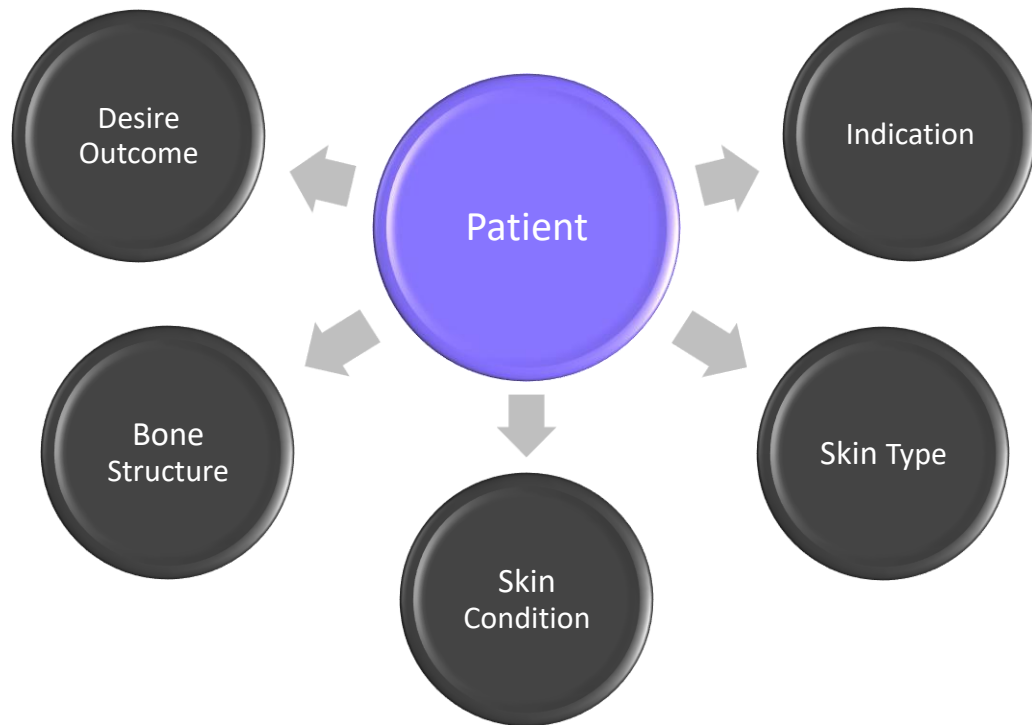
1. Akinbiyi T, et al. *Plast Reconstr Surg Glob Open*. 2020;8(10): e2763; 2. Öhrlund Å. *J Cosmet Dermatol Sci Appl*. 2018;8:47-54; 3. Stocks DM, et al. *Plast Reconstr Surg*. 124(4S):86; 4. Micheels P, et al. *J Drugs Dermatol*. 2018;17(9):948-954.

They turn to you for your experience and expertise

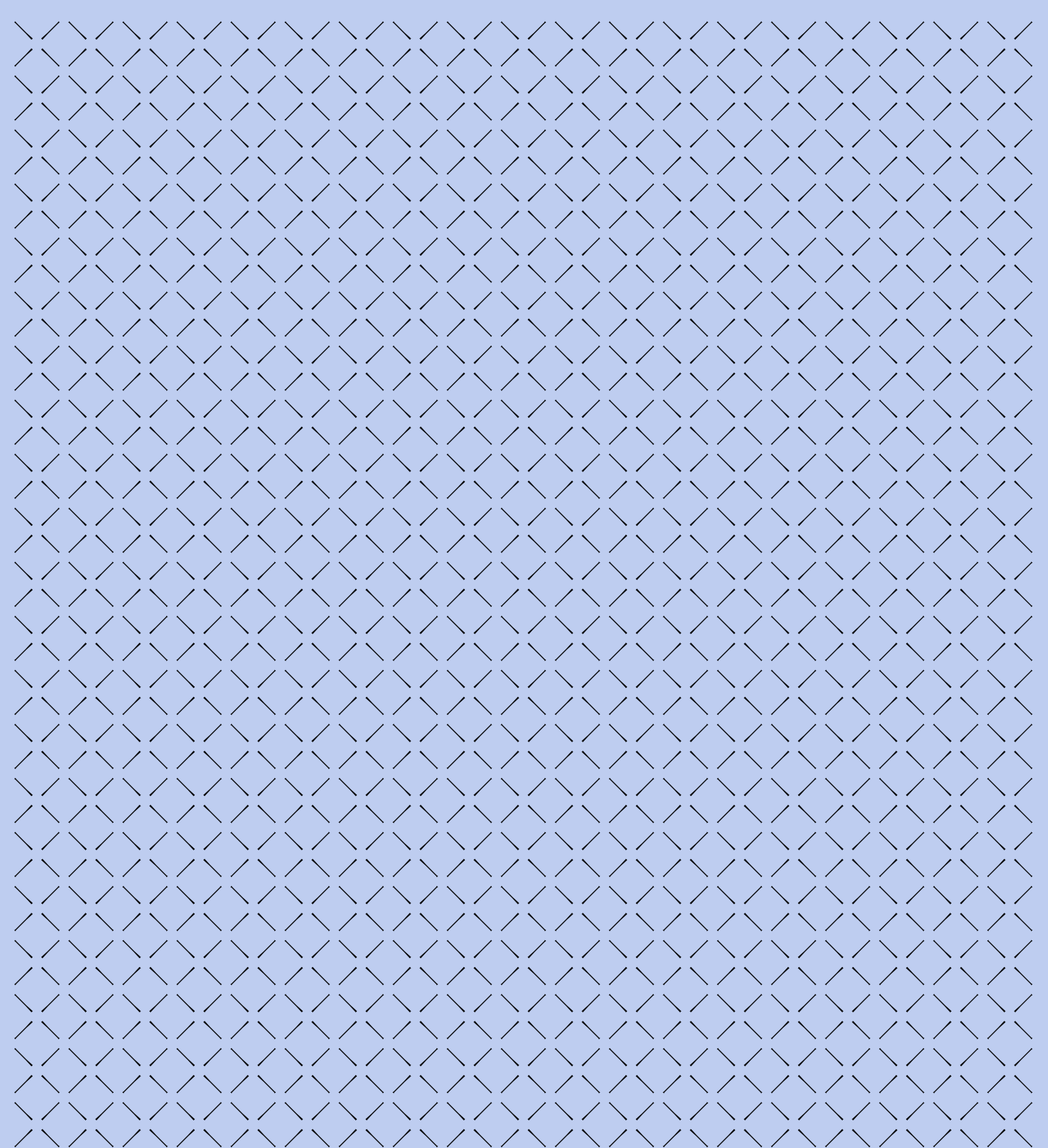
GAIN

The needs are unique

No two faces are alike- each of your patients needs an individualized treatment approach:



How I choose my
Restylane?



How I choose my Restylane?

GAIN

Every patient is unique, with different needs and wishes.

In order to have the best results & outcomes for each one of them...

Galderma developed the world's broadest portfolio of filler

GALDERMA

Rheological properties

GAIN

Why do we need to know and understand about rheological properties of our fillers?

- Flexibility
- Level of cross-linking
- Gel texture
- Gel particle size
- Lifting capacity- G' , G'' , Resistance to deformation
- Product integration
- Viscosity / Elasticity
- Firmness
- Concentration
- Cohesiveness



The Path to the best results

GAIN



A complete understanding about the rheological properties of our different HA fillers

Predictable outcomes and the **ability to choose right** from Restylane's wide portfolio

Create the best result according to your patient's needs, and for every indication

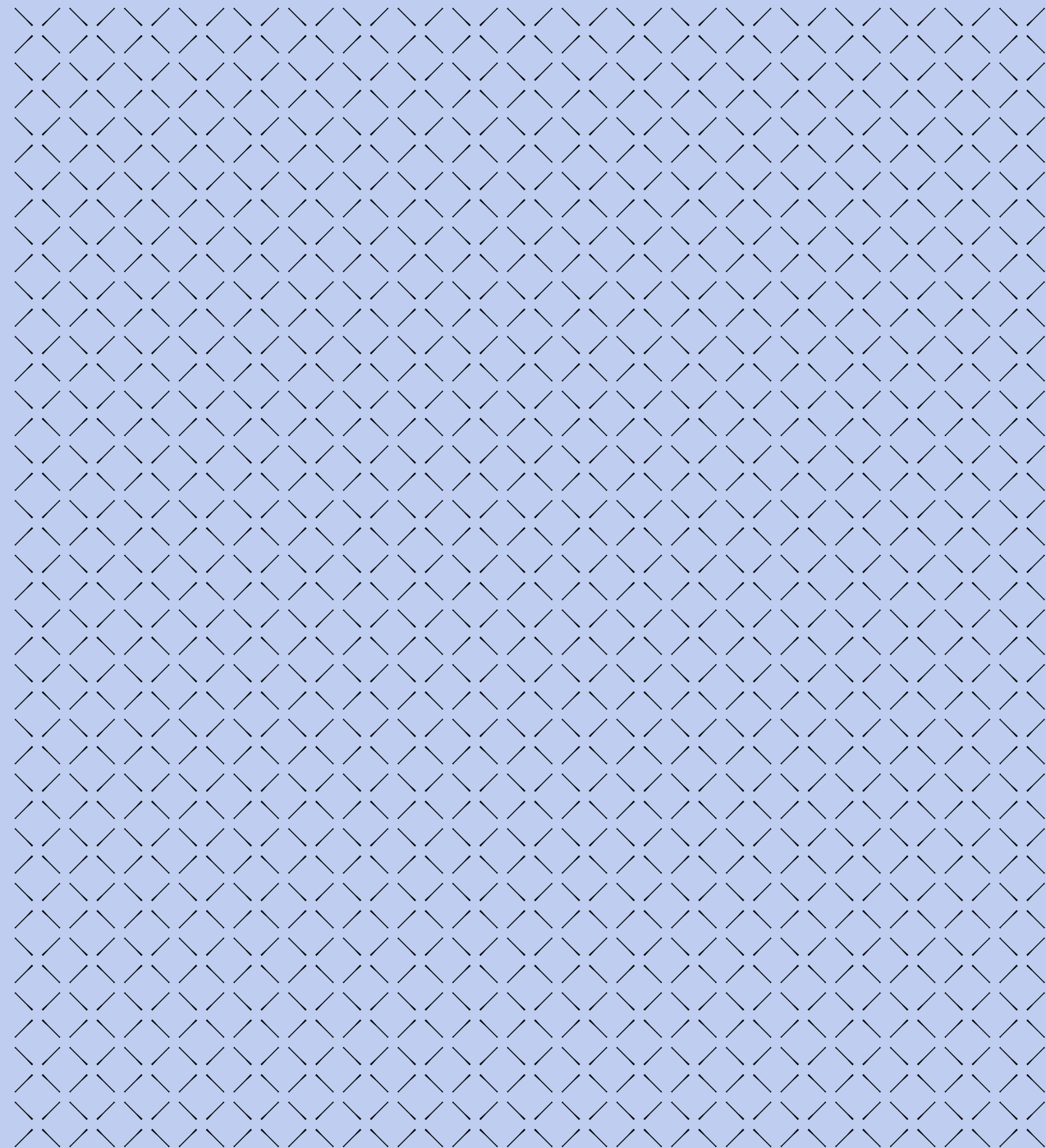
A woman with blonde, wavy hair is smiling broadly, showing her teeth. She is wearing a white, short-sleeved blouse with a ruffled collar. The background is a plain, light gray color.

GAIN

Worth Every Expression

GALDERMA

Galderma's Technologies



Galderma Aesthetics Collection

GAIN



RELAX

Relax the muscles involved in the formation of dynamic wrinkles

Azzalure
Botulinum toxin type A



REFINE

Refine the look for a healthy more youthful appearance by providing shape and contours through lift, by filling lines and wrinkles or by adding volume



REFRESH

Refresh the look for radiant and hydrated skin

Restylane
SKINBOOSTERS™

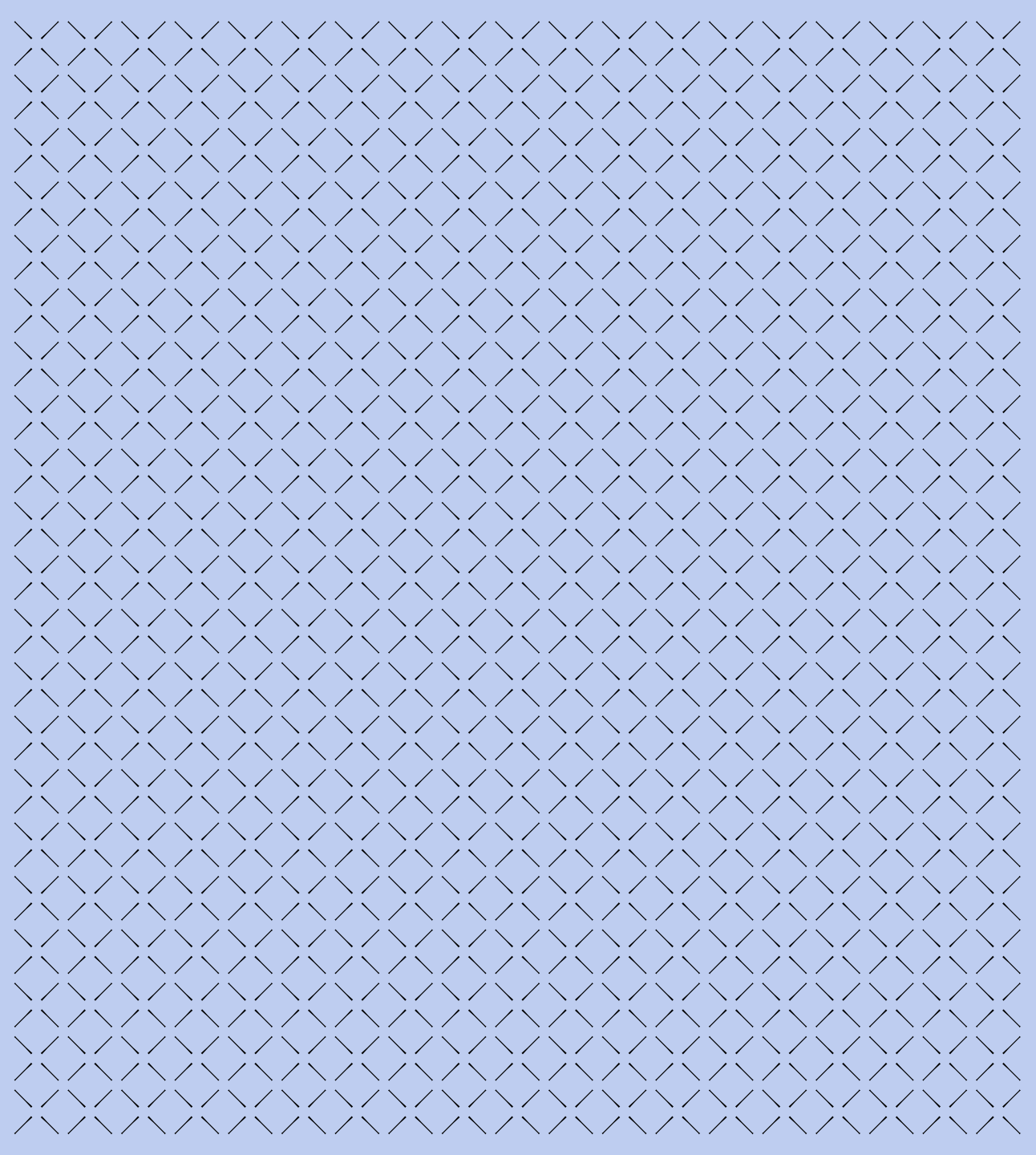


RENEW

Restore a youthful foundation (face or body) by stimulating the skin's natural collagen production

Sculptra

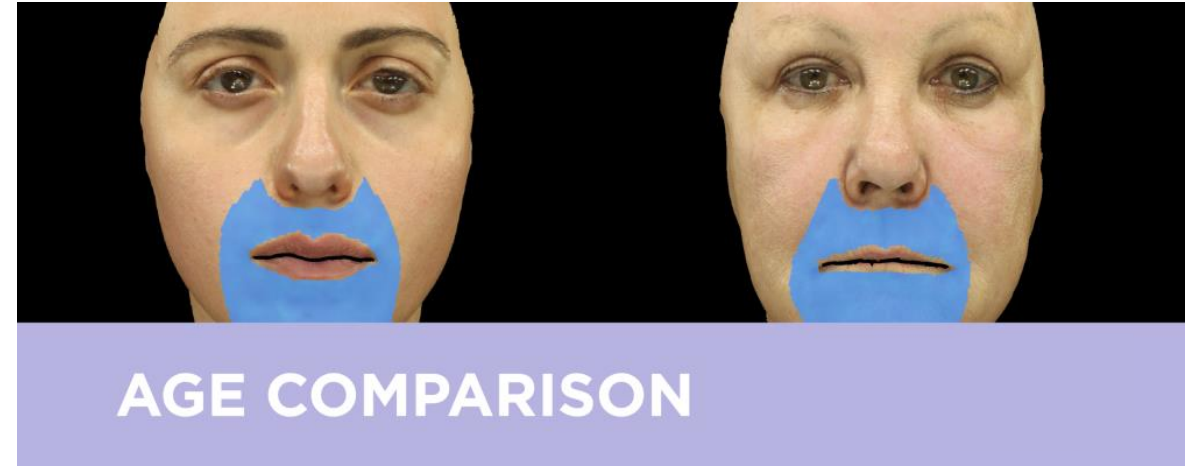
Restylane Technologies



Galderma trials innovative technology to measure dynamic expressions

GAIN

Measuring the degree of stretch and compression in facial expression using strain-mapping technology^{2*}



83%

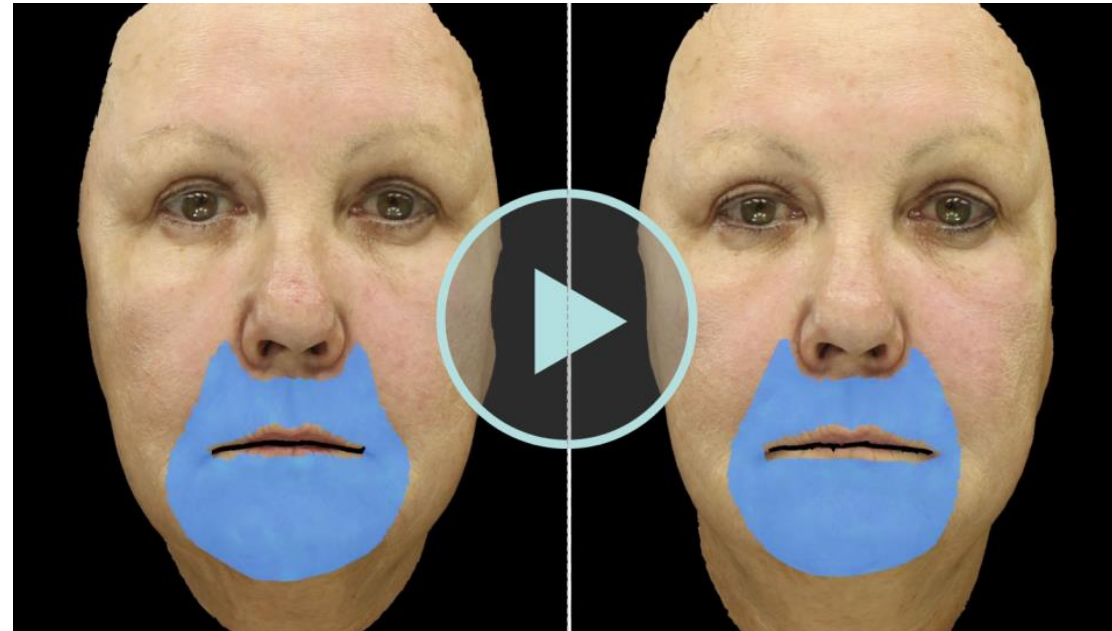
Overall, facial expression in motion was judged by treating investigator to show **enhanced attractiveness** and **look younger** and at least **maintained naturalness** in **25/30 subjects (83.3%).²**

*Pooled study of *Restylane Refyne* and *Restylane Defyne* subjects. Statistical significance was found only in certain facial areas.

GALDERMA

Representative before and after: Closed smile

GAIN



Treated older subject at baseline (Aged 58)

Treated older subject 42 days post-treatment (Aged 58)*

Treatment with *Restylane* Refyne and *Restylane* Defyne reduced the degree of dynamic stretch and compression in (such as marionette lines) in older subjects, ages 41 to 65 (N=30).^{2†}

Greatest stretch

Lowest stretch



* 4.4 mL of *Restylane* Defyne in nasolabial folds and marionette lines.

†Pooled study of *Restylane* Refyne and *Restylane* Defyne subjects. Statistical significance was found only in certain facial areas.

Representative age comparison: Closed smile

GAIN



Untreated younger subject (Aged 35)

Treated older subject 42 days
post-treatment (Aged 58)*

Older subjects, age 41 to 65 (N=30), treated with *Restylane* Refyne and *Restylane* Defyne showed a reduction in the degree of strain compared to baseline for facial areas prone to volumetric effects of facial aging (such as marionette lines). Results resembled younger, untreated subjects, ages 25 to 35 (N=20).^{2†}

Greatest stretch

Lowest stretch



* *Restylane* Defyne: 2.5 mL NLF + 1.9 mL in marionette lines. (initial + touch up)

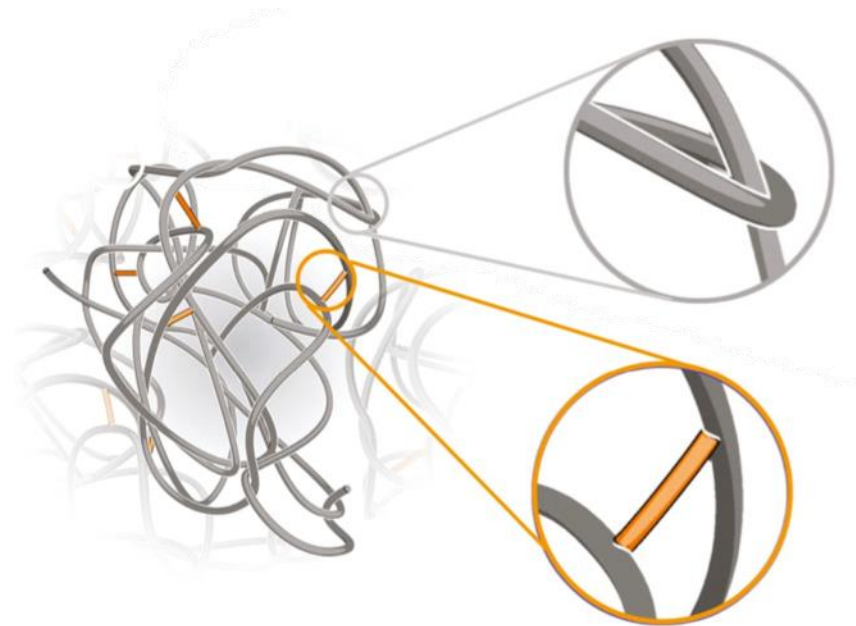
†Pooled study of *Restylane* Refyne and *Restylane* Defyne subjects. Statistical significance was found only in certain facial areas.

Restylane®

Restylane NASHA™

Non-animal Stabilized HA™ Technology

- **First** in the Field
- The **uniqueness** of NASHA™:
 - The stabilization process preserves the natural molecular structure and maintains natural cross-links
 - Homogenously and specifically sized gel particles for predictable precision
 - Firm gels – more pronounce lifting capacity
- **Concentration of 20 mg/ml stabilized hyaluronic acid**



The NASHA™ Technology

Cross-linking

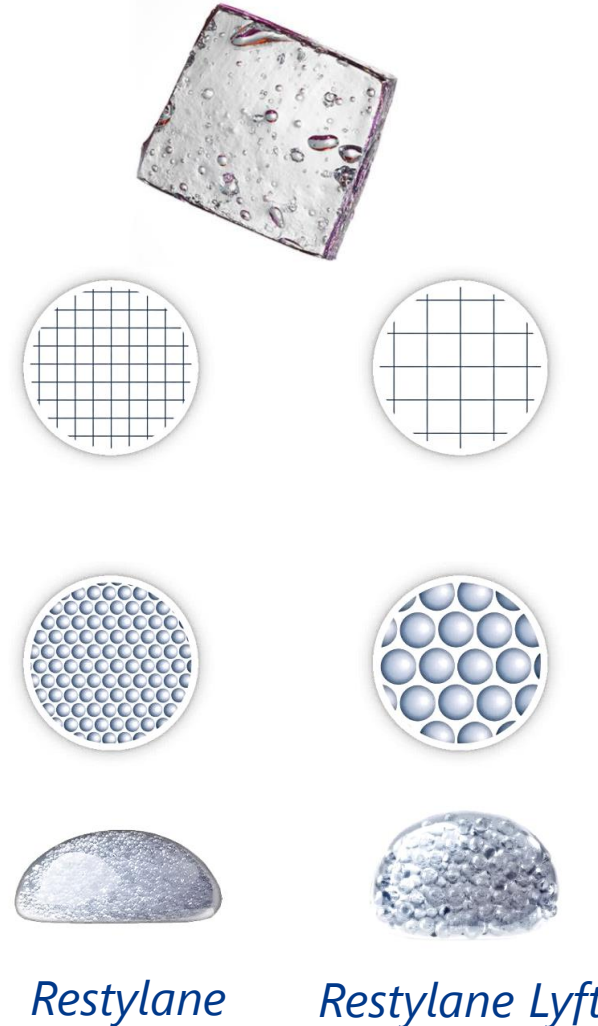
One degree of cross-linking using the unique stabilization process

Controlled particle sizing

Two degrees of gel particle sizing

Different gel textures

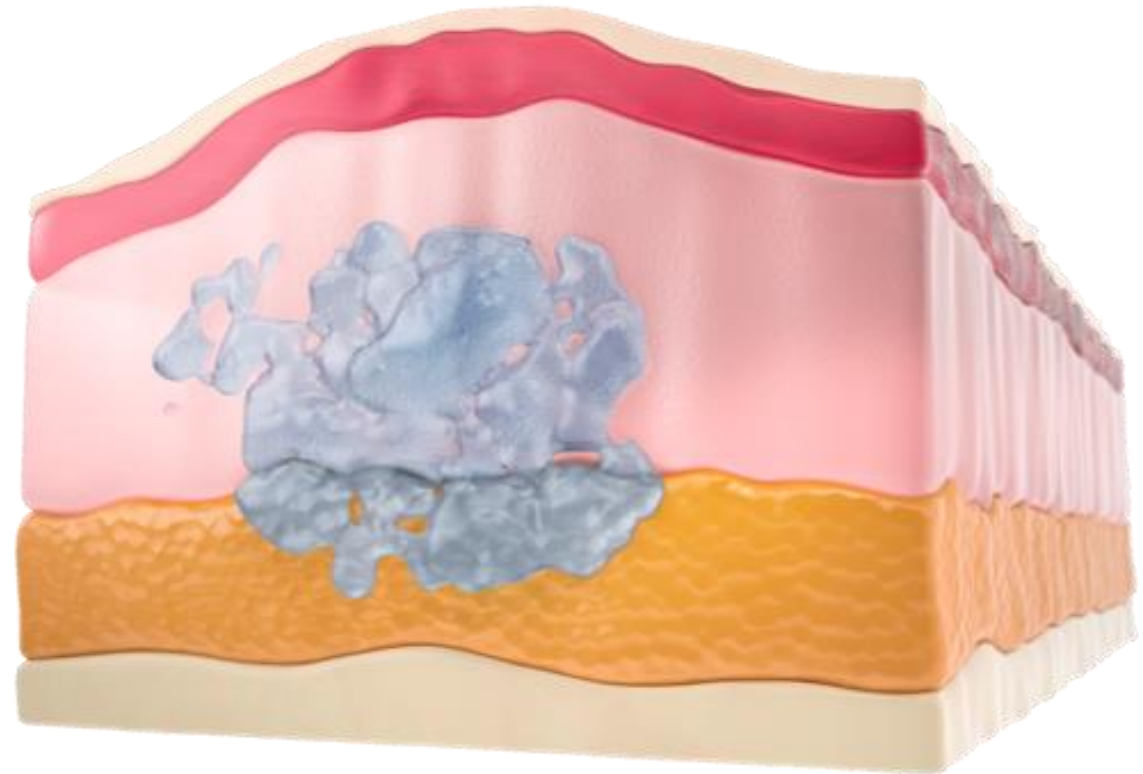
Controlled particle sizing result in distinct gel textures for different lifting capacities



NASHA Gels – Lifting and Projection

GAIN

When injected into the dermal layer, the properties of NASHA gel technology enable **lifting** and **projection** of the epidermal layer for patients with thicker tissue coverage¹



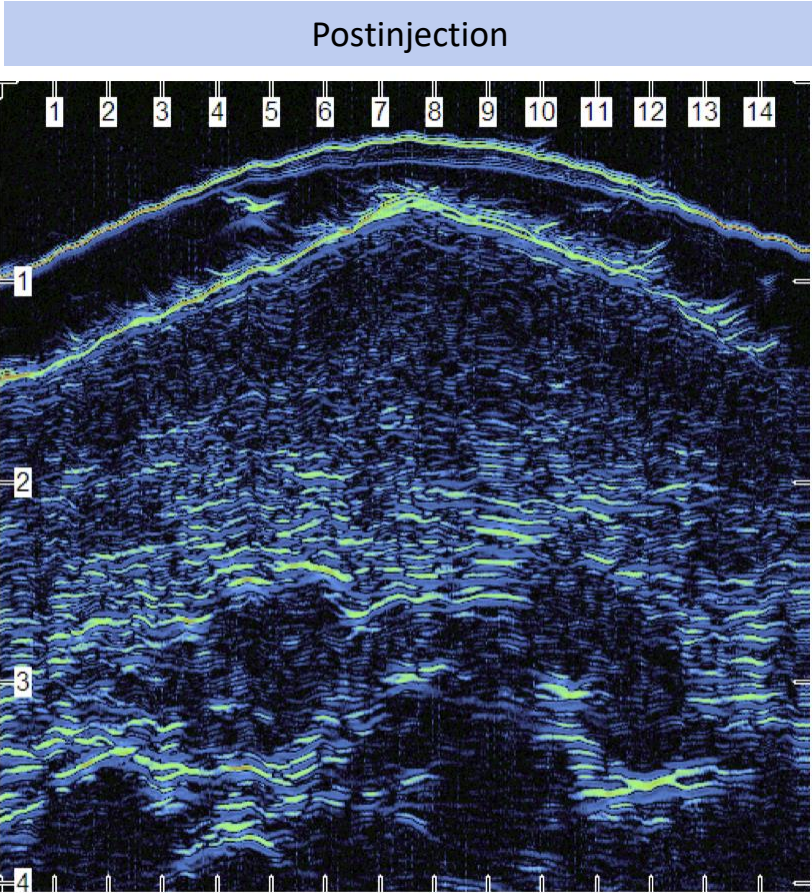
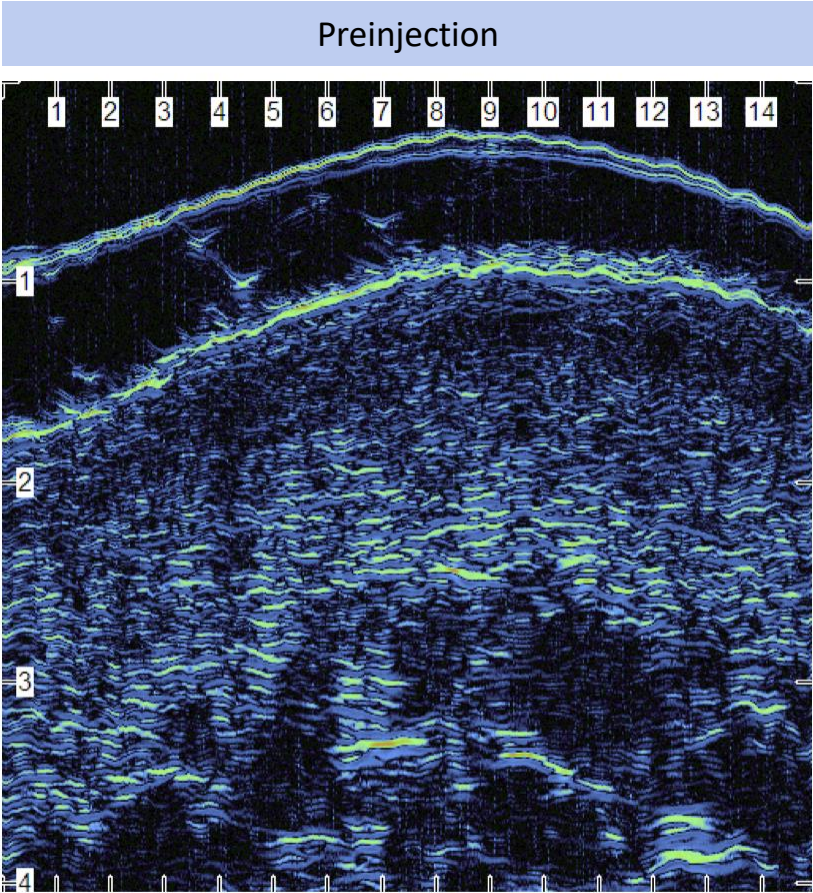
NASHA, nonanimal stabilized hyaluronic acid.

1. Lundgren B, et al. *J Drugs Dermatol* .2018;17(9):982–986.

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NASHA Technology¹

GAIN



1. Nikolis A, et al. *Aesthet Surg J Open Forum*. 2020;2(1):ojaa005. doi: 10.1093/asjof/ojaa005.

NASHA – Lifting and Precision

Pronounced **lifting** capacity for projection and definition

- Enhancing cheeks and filling wrinkles and folds
- Nose, chin, jawline, and tear trough, where **precision** is needed

Precision

Tear trough

Restylane Restylane
EYELIGHT

Nose

Restylane
LYFT

Lifting

Cheek, midface, nasolabial folds

Restylane Restylane
LYFT

Chin, jawline

Restylane Restylane
LYFT

GAIN

NASHA, nonanimal stabilized hyaluronic acid.

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EST. 1981

Restylane Lyft

21 NOVEMBER 2023

Restylane Lyft Core Claims

Optimal lift without volumizing

Designed to deliver projection and structure for a pronounced effect

Designed to stay in place

Unique and trusted NASHA™ technology for precise placement

Favorable safety profile based on unrivalled experience

Supported by extensive clinical evidence

Reliable and long-lasting results

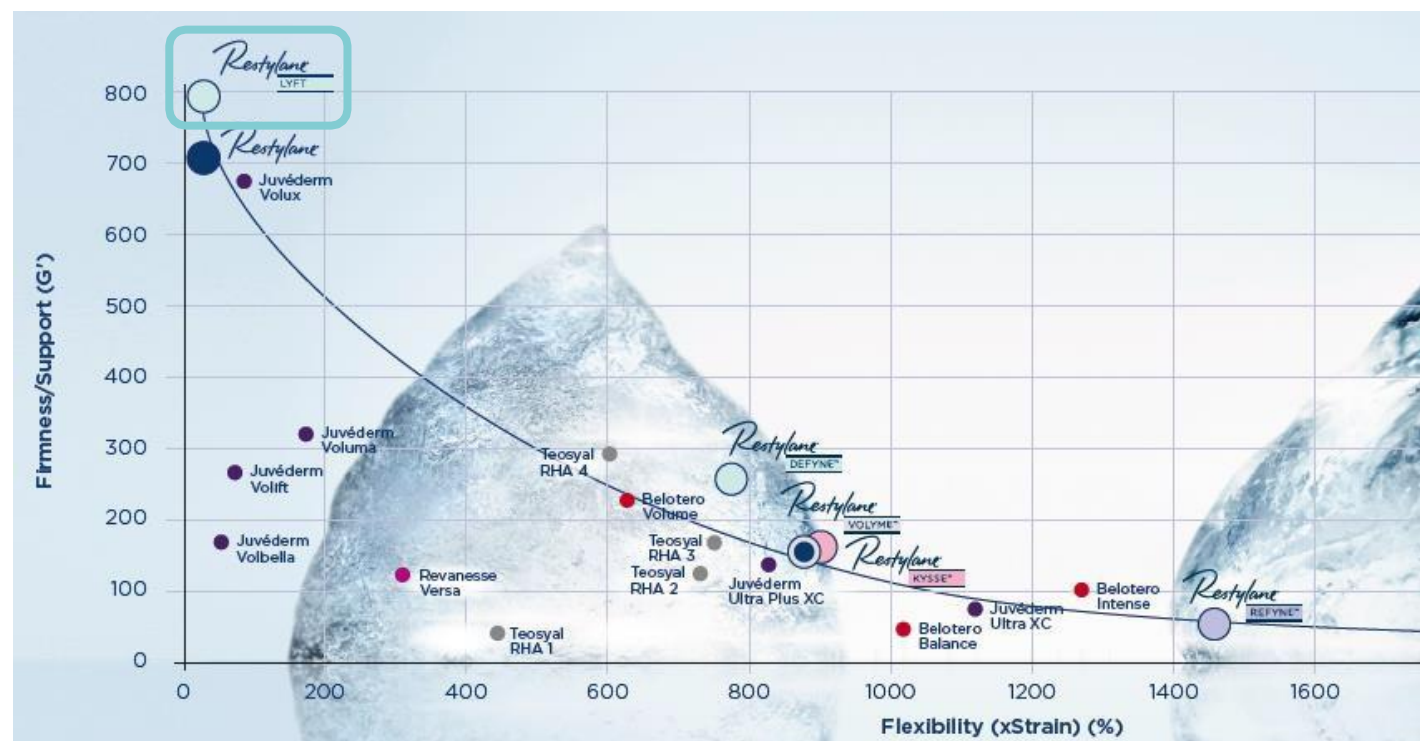
*Results that last up to 24 months with one retreatment
Long-term treatment satisfaction, leaving patients filled with confidence*

Optimal lift without volumizing

Designed to deliver projection and structure for a pronounced effect¹⁻⁵

Supporting information:

The firm (higher G') gel texture and controlled particle size of Restylane Lyft is designed to resist the dynamic forces that occur during facial muscle movement for optimal lift and projection without volumizing^{1,2}



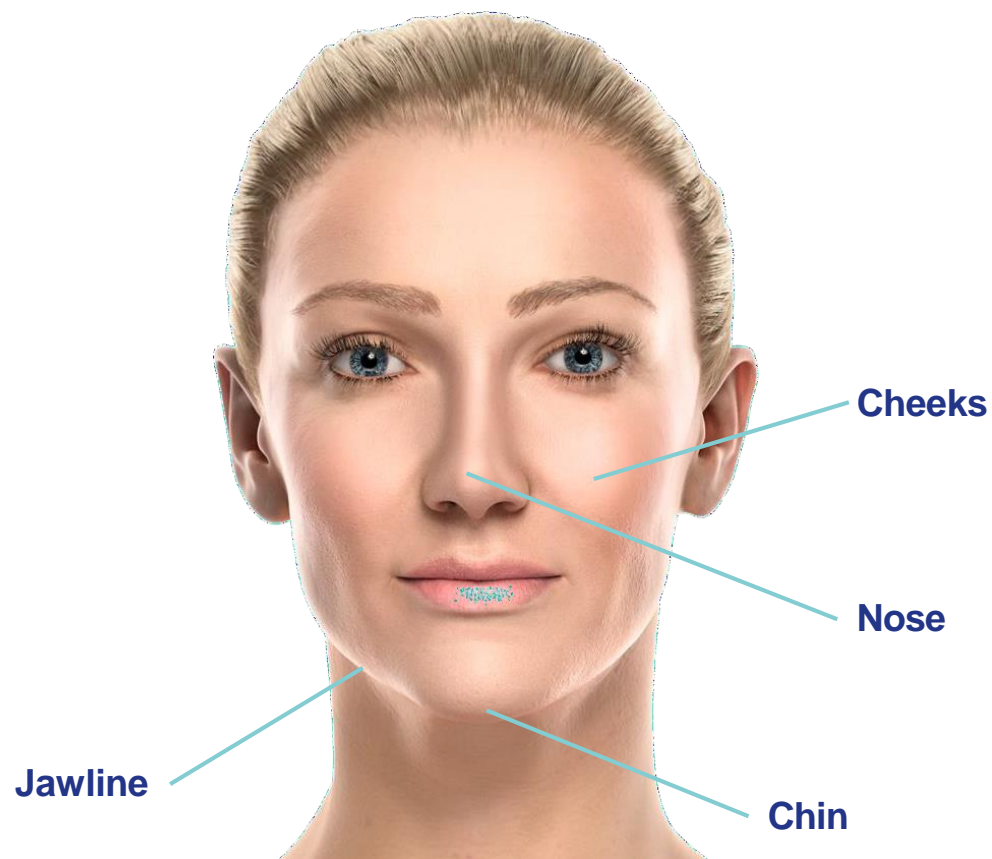
1. Data on file (MA-43049); 2. Kablik J *et al.* *Dermatol Surg* 2009;35(Suppl 1):302–312; 3. Lundgren B *et al.* *J Drugs Dermatol* 2018;17(9):982–986; 4. Andriopoulos B *et al.* Poster presented at AMWC 2019; 5. Edwartz C *et al.* Poster presented at AMWC 2020.

Optimal lift without volumizing

Designed to deliver projection and structure for a pronounced effect¹⁻⁵

Supporting information:

Restylane Lyft is ideally suited for lifting and projection to create ultimate structure in areas where precision is needed²⁻⁵

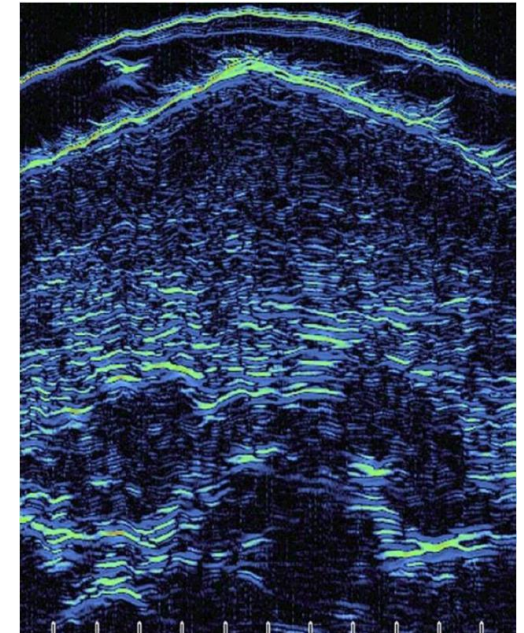
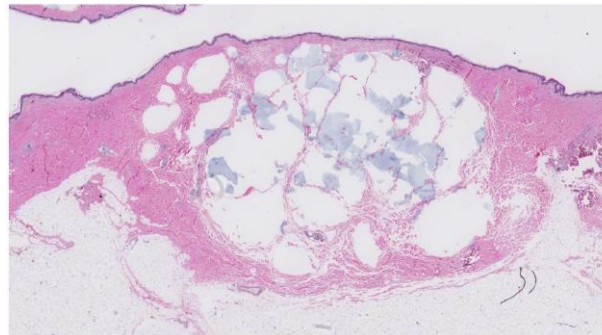
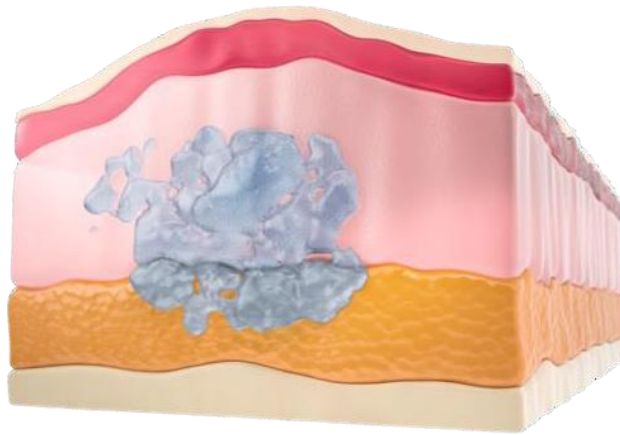


Designed to stay in place

Unique and trusted NASHA technology for precise placement^{1,2}

Supporting information:

The trusted NASHA technology of Restylane Lyft delivers precise results, allowing for targeted placement at the site of injection with low distribution and integration into the surrounding tissues^{1,2}



NASHA, non-animal stabilized hyaluronic acid.

1. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 2. Nikolis A *et al. Aesthetic Surgery Journal* 2020;2(1):ojaa005.

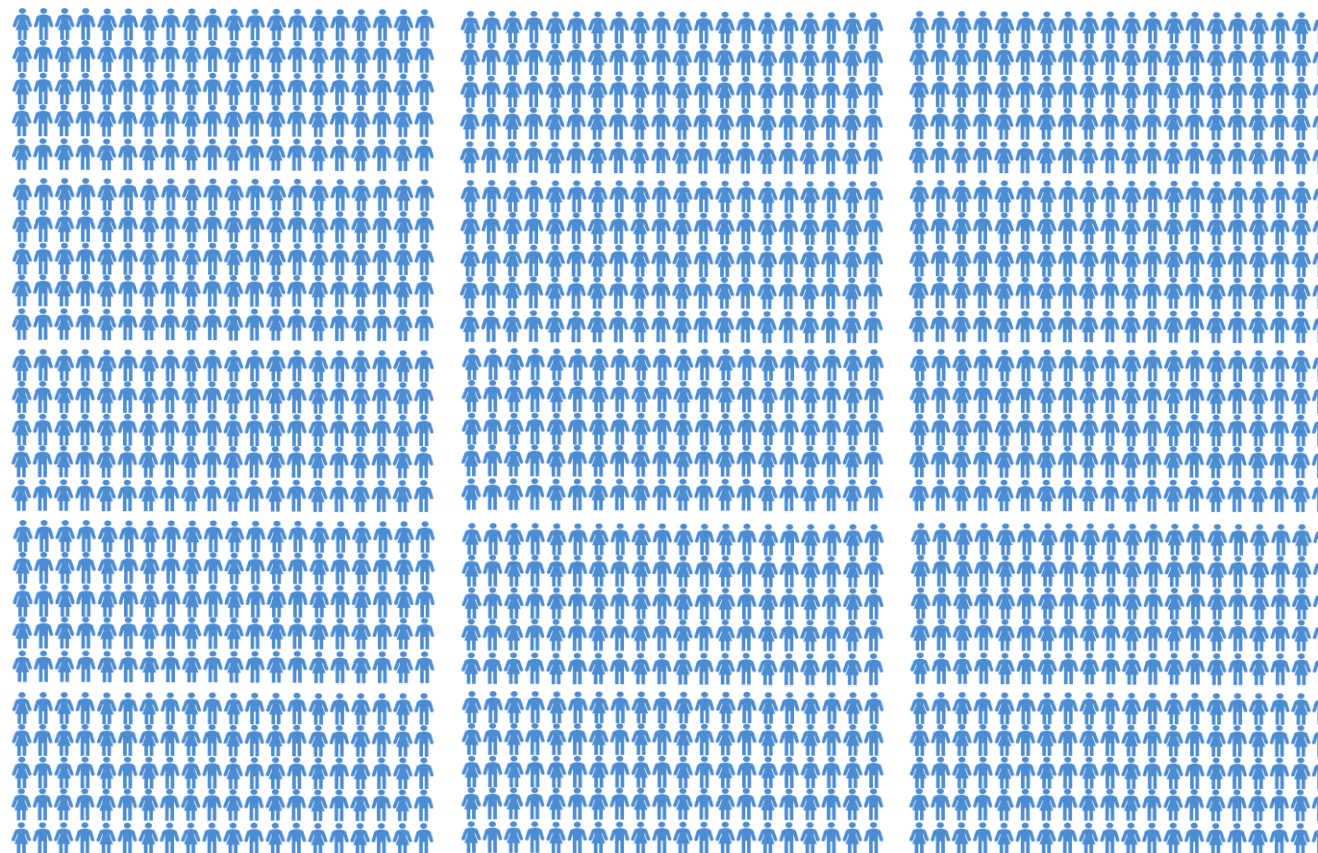
GALDERMA

**Favorable safety profile
based on unrivalled
experience**

*Supported by extensive
clinical evidence¹*

Supporting information:

Restylane Lyft has a well-established safety profile demonstrated in more than 20 clinical studies encompassing over 1,500 patients¹



1. Data on file (MA-43602).

Reliable and long-lasting results

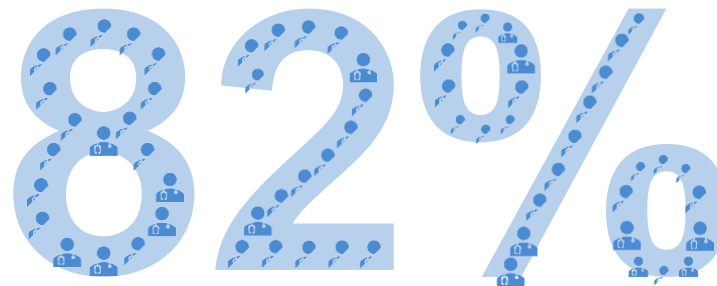
Results that last up to 24 months with one retreatment¹

Supporting information:

Restylane Lyft provides results that last up to 24 months with one retreatment, as evaluated by both patients and physicians¹



of the 100 female subjects reported improvement in the Global Aesthetic Improvement Scale (GAIS) at 24 months with two full-face treatments¹



of physicians described improvement in the global facial aesthetic at the same time point¹

GAIS, Global Aesthetic Improvement Scale.

1. Andriopoulos B *et al.* Poster presented at AMWC 2019.

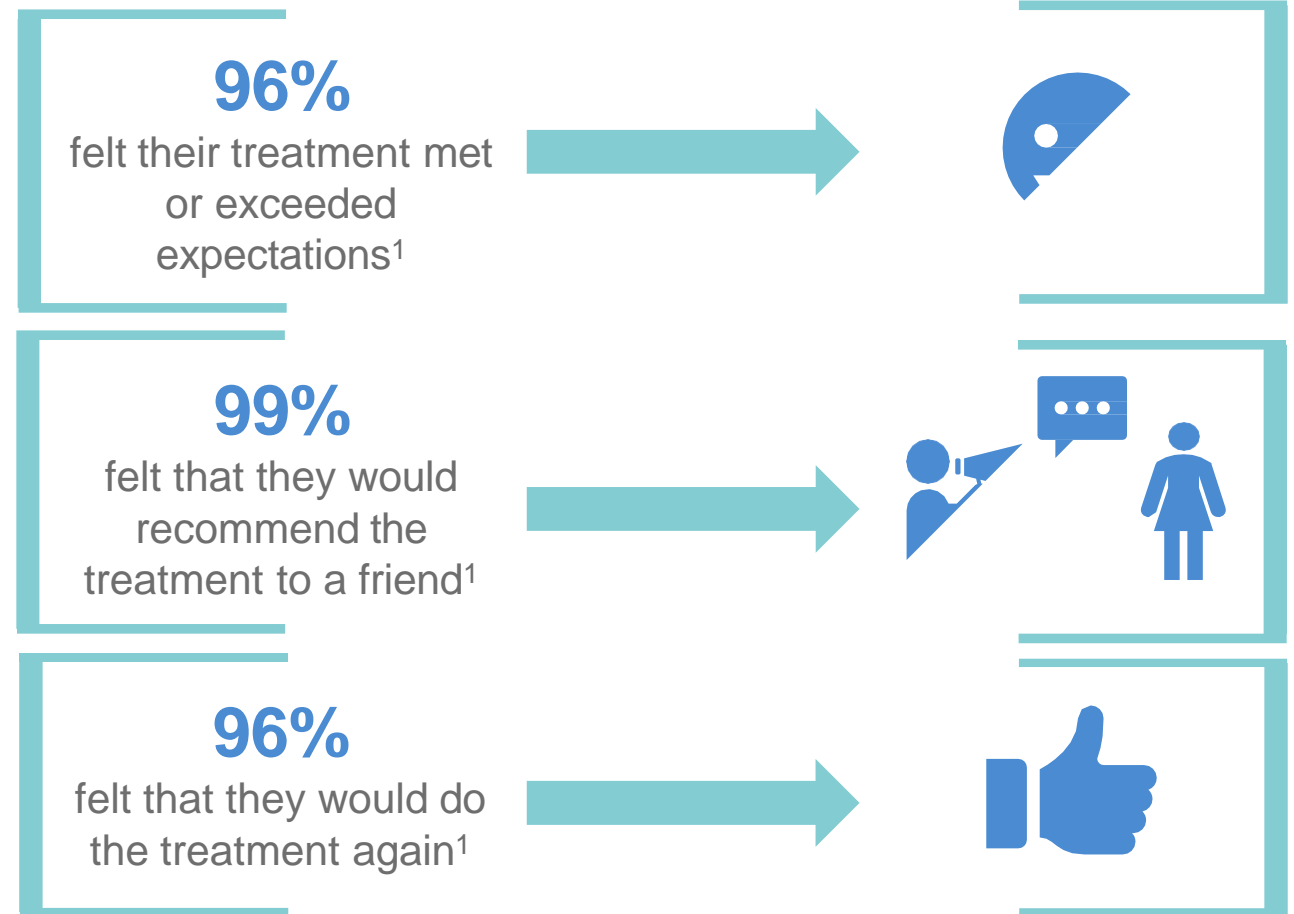
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Reliable and long-lasting results

Long-term treatment satisfaction, leaving patients filled with confidence¹

Supporting information:

Treatment satisfaction for Restylane Lyft was high and sustained across the 2-year study period¹



1. Andriopoulos B *et al.* Poster presented at AMWC 2019.

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EST. 1981

Restylane Eyelight

21 NOVEMBER 2023

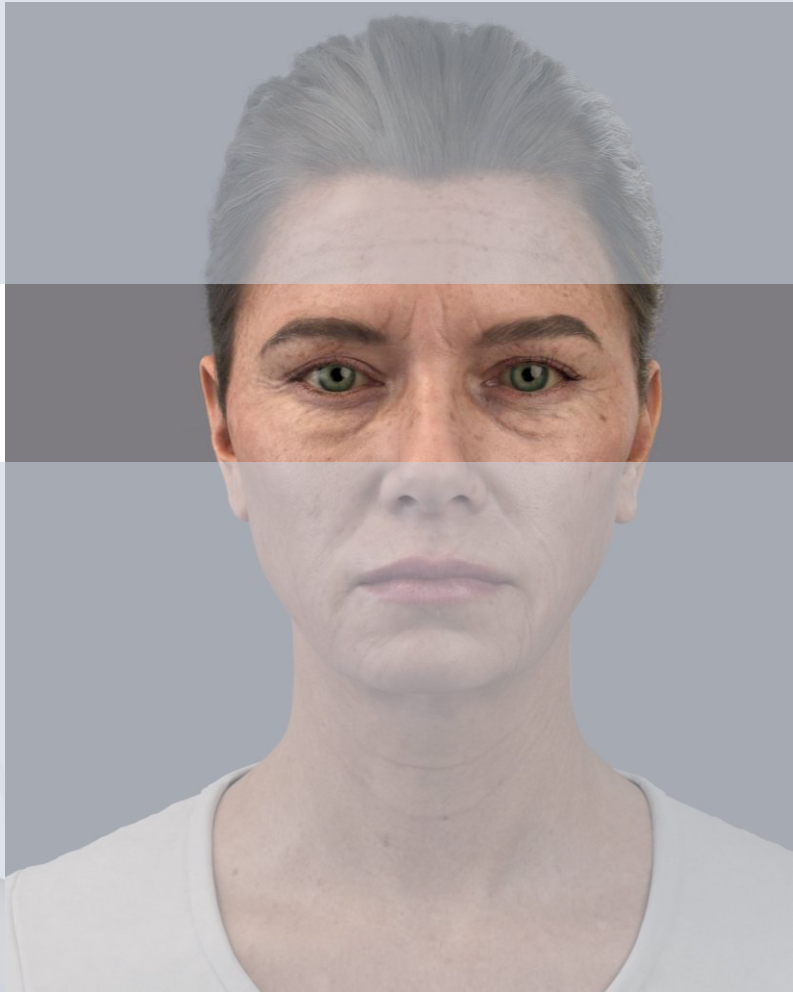
Under eye problems is a very common issue:

- 70% people feel they look more tired and older than they are due to under eye issues – Regardless of gender!
- 2 in 3 feel that looking tired and exhausted is most bothersome consequence of under eyes issues
- With early 40's being the age when most referred to when it became evident
- Almost 28% have already considered having treatment for their under eye issues

Emotional expressions and signs of ageing in the periorbital area



Angry look

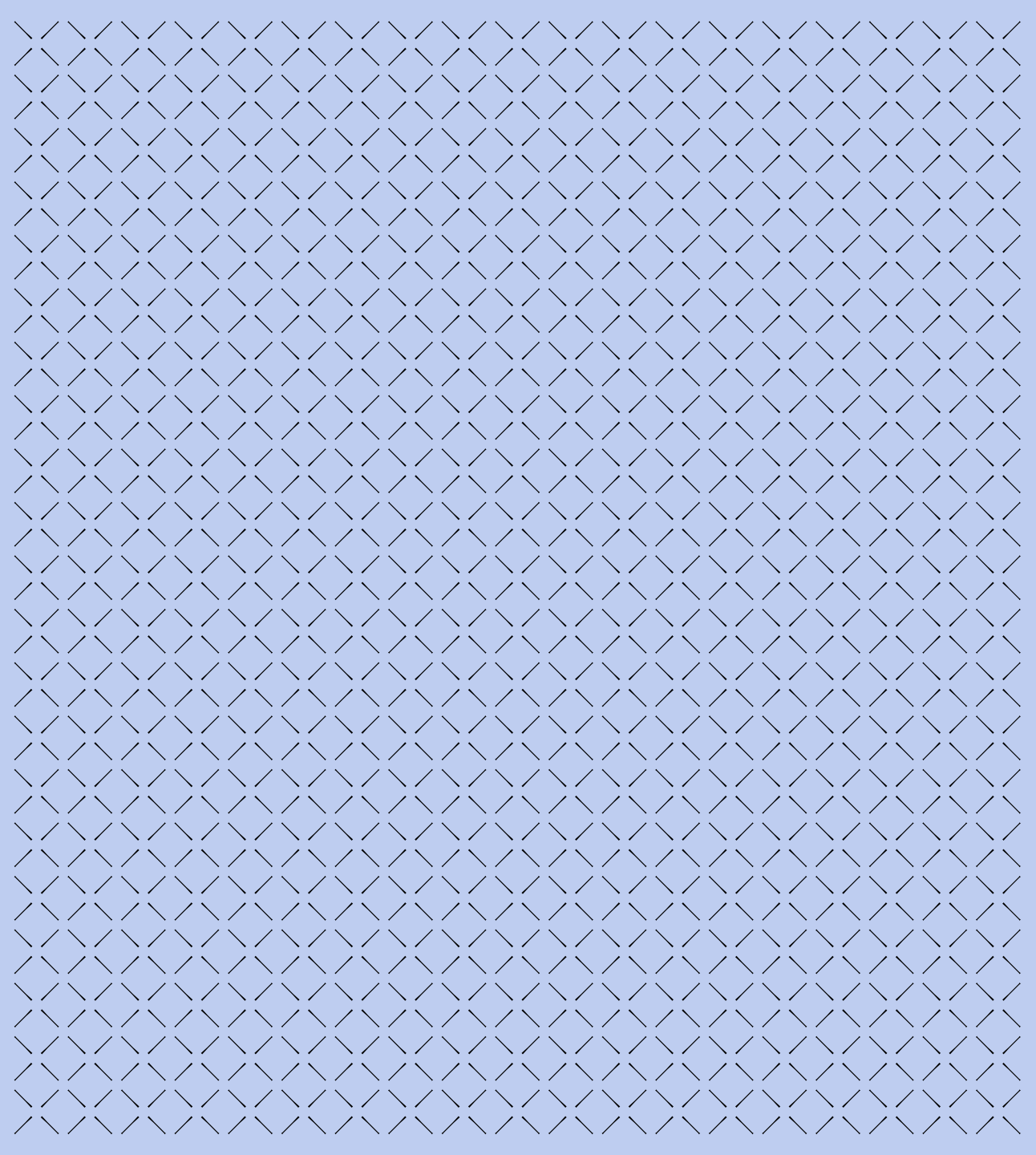


Tired look



Signs of ageing

Anatomy of the Tear Trough

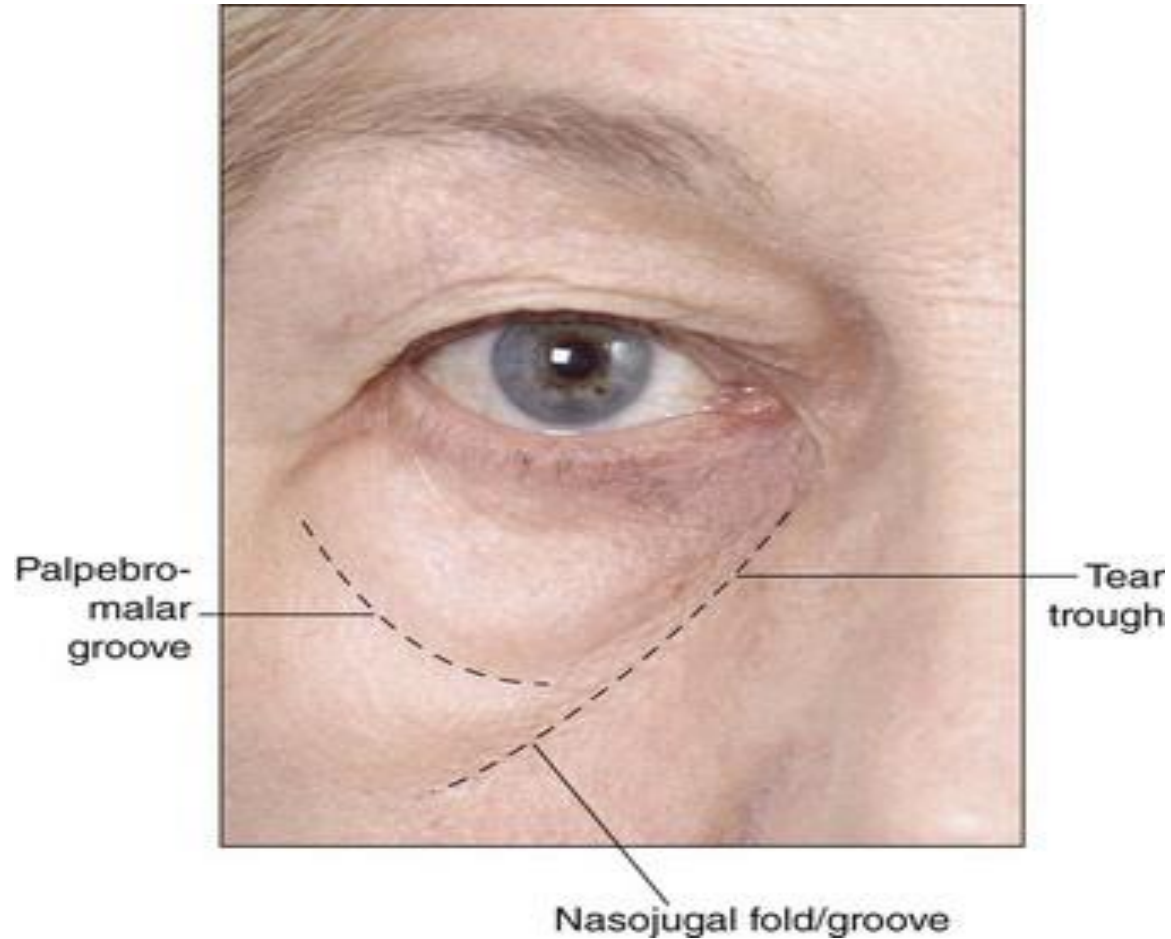


Ageing process



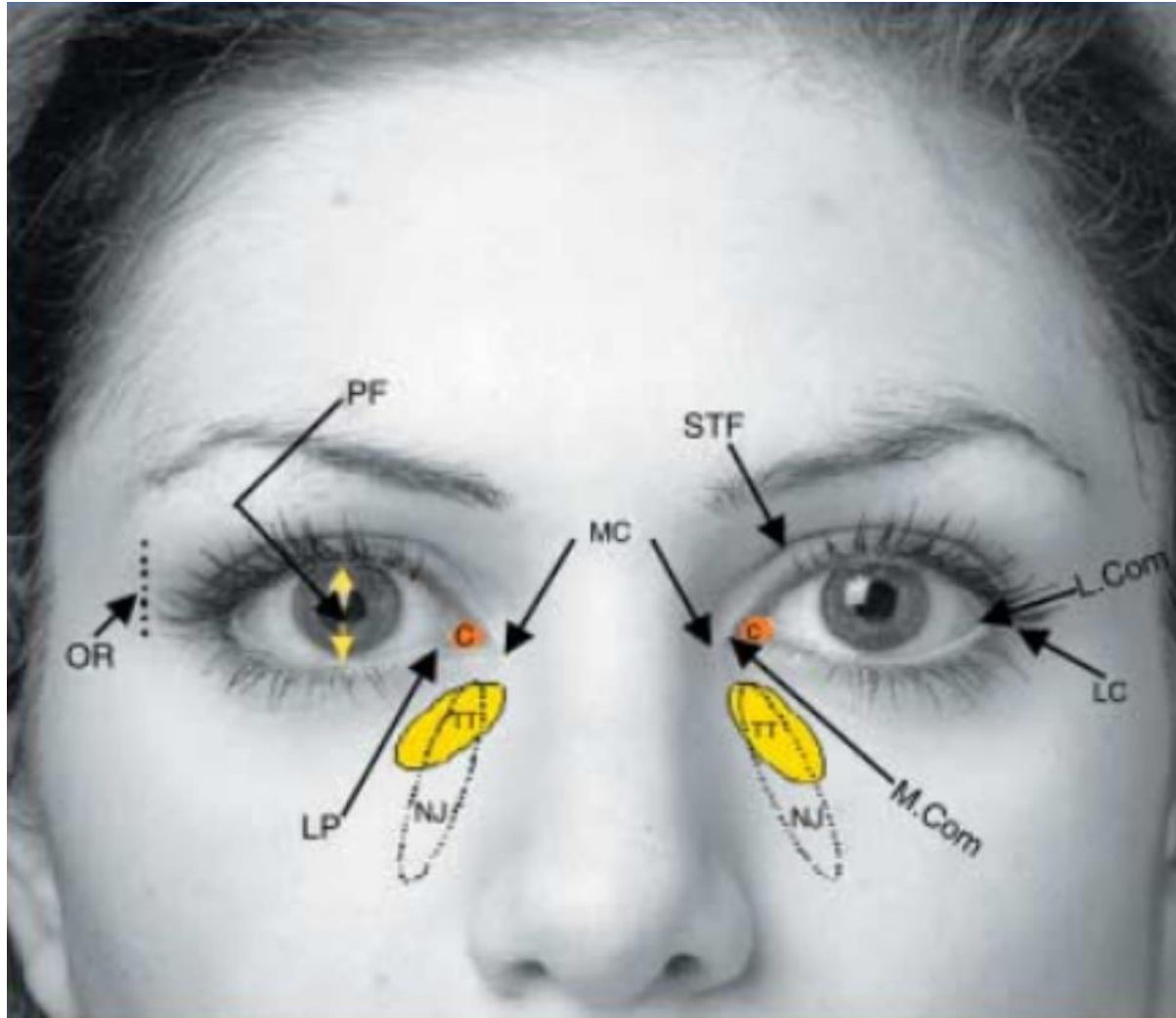
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Aesthetic description



The **tear trough** should be defined as the depression of the medial lower eyelid just lateral to the anterior lacrimal crest and limited in its inferior aspect by the inferior orbital rim.

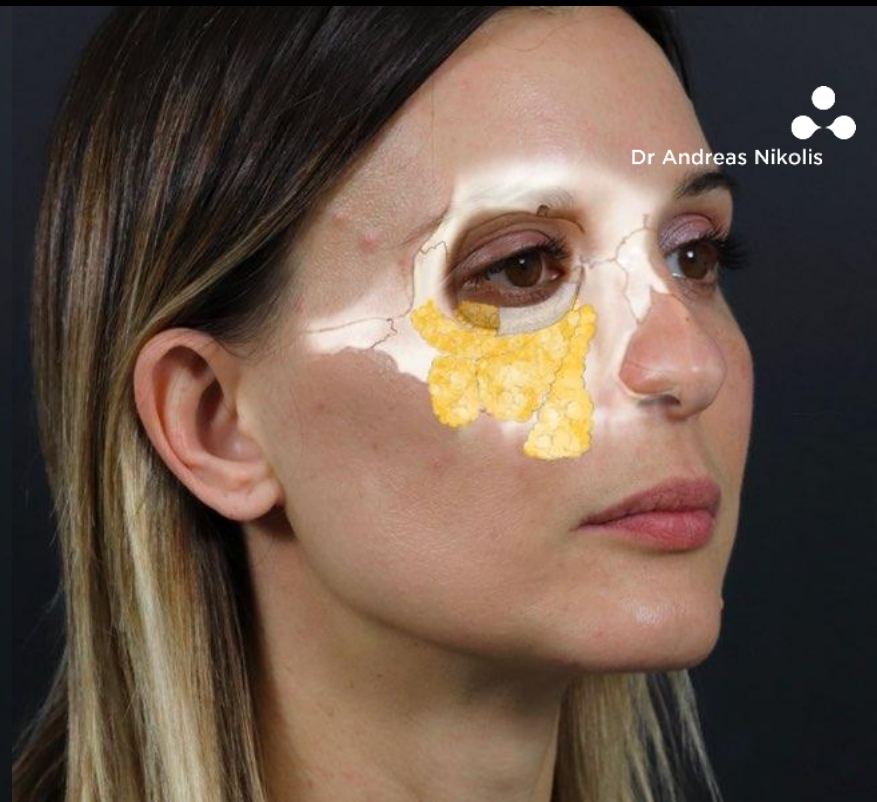
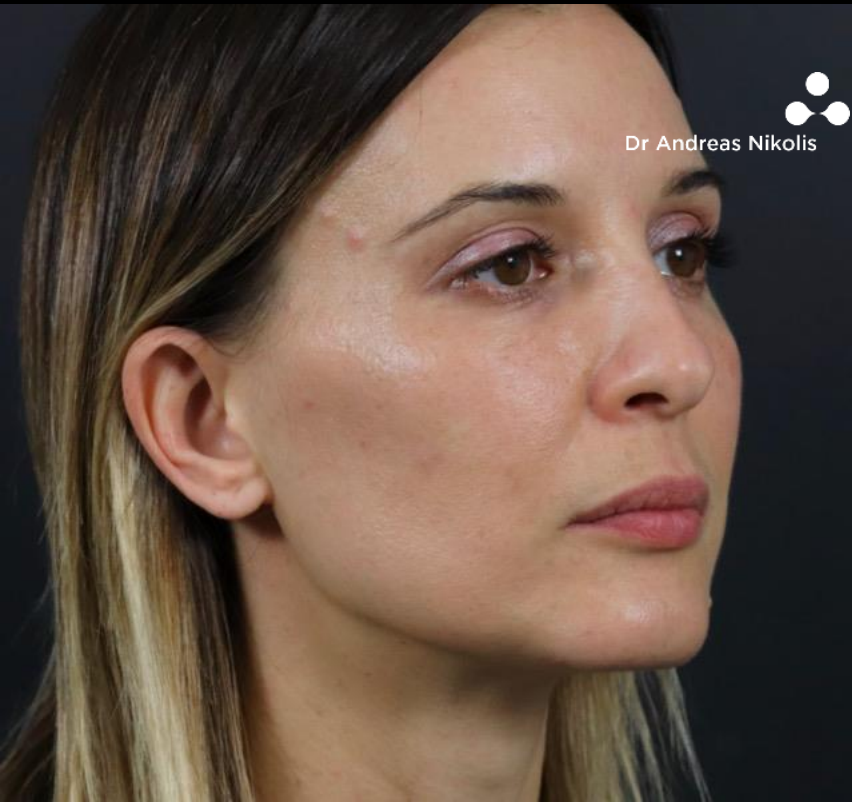
Topographic anatomy



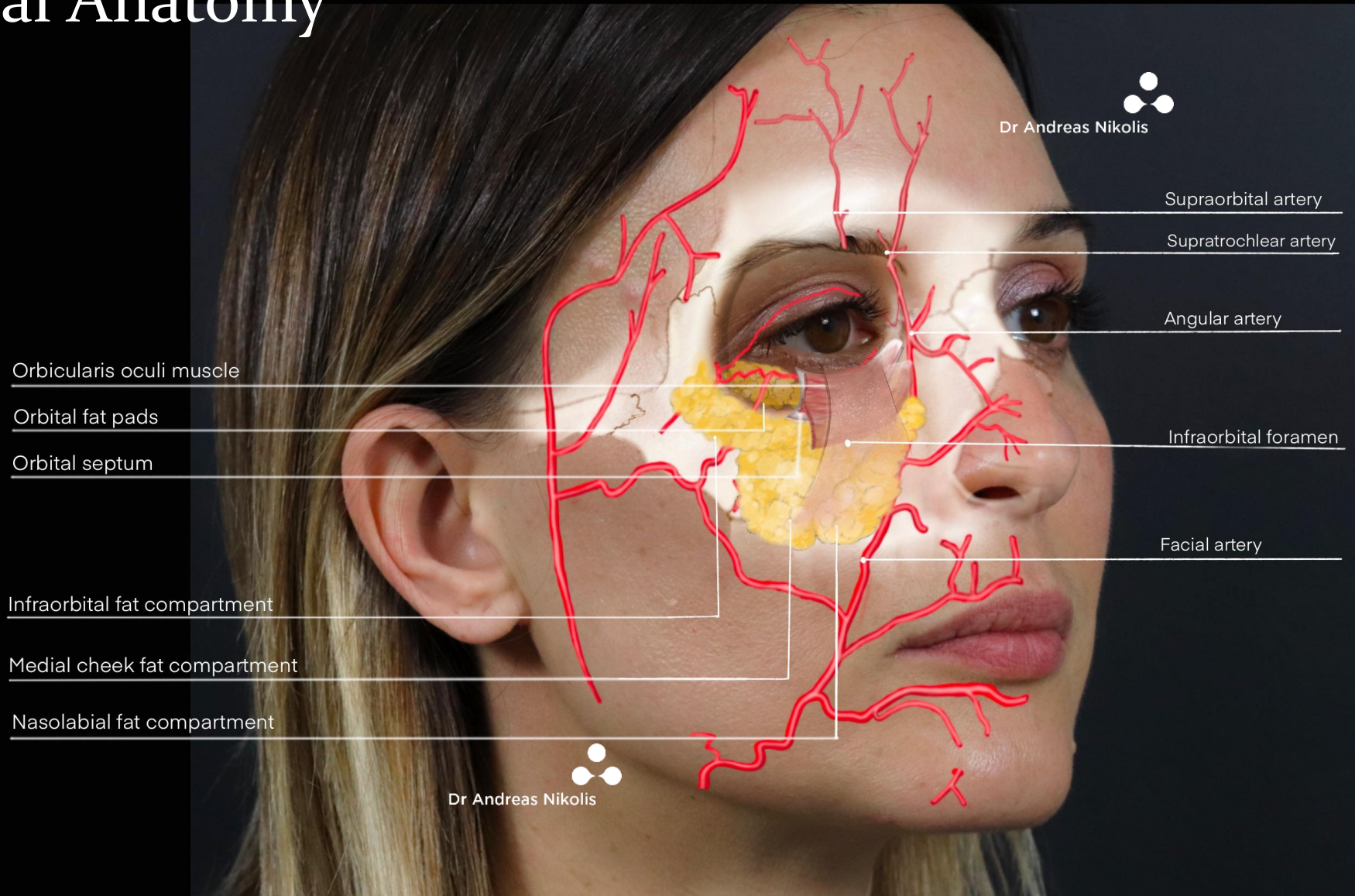
Anatomical definition of the tear trough.

- TT – Tear trough
- NJ – Nasojugal Groove
- C – Caruncle
- MC – Medial Canthus
- LC – Lateral Canthus
- L. Com – Lateral Commissure
- M. Com – Medial Commissure
- STF – Supra Tarsal Fold
- LP – Lacrimal Puncta
- OR – Orbital Rim

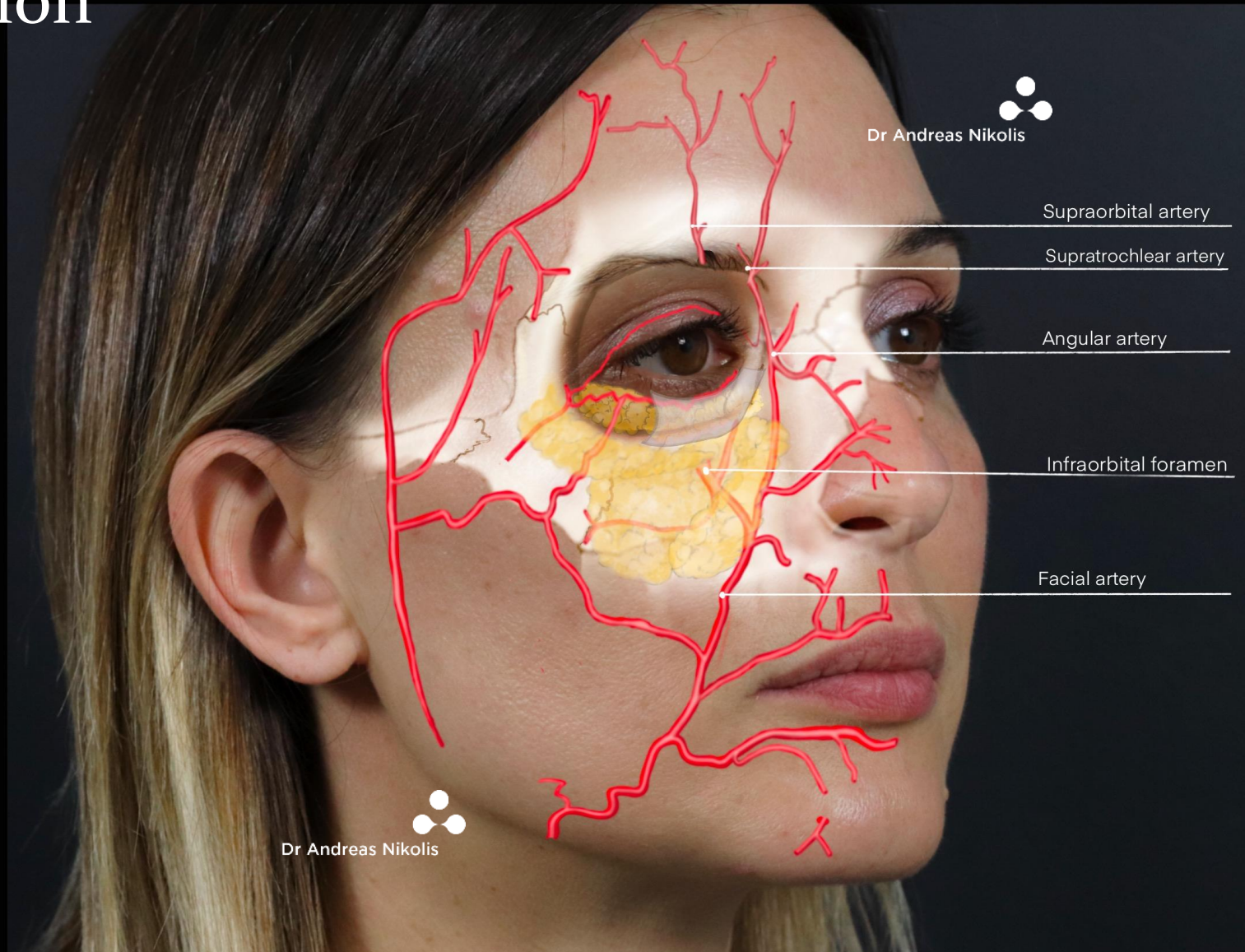
Fat pads



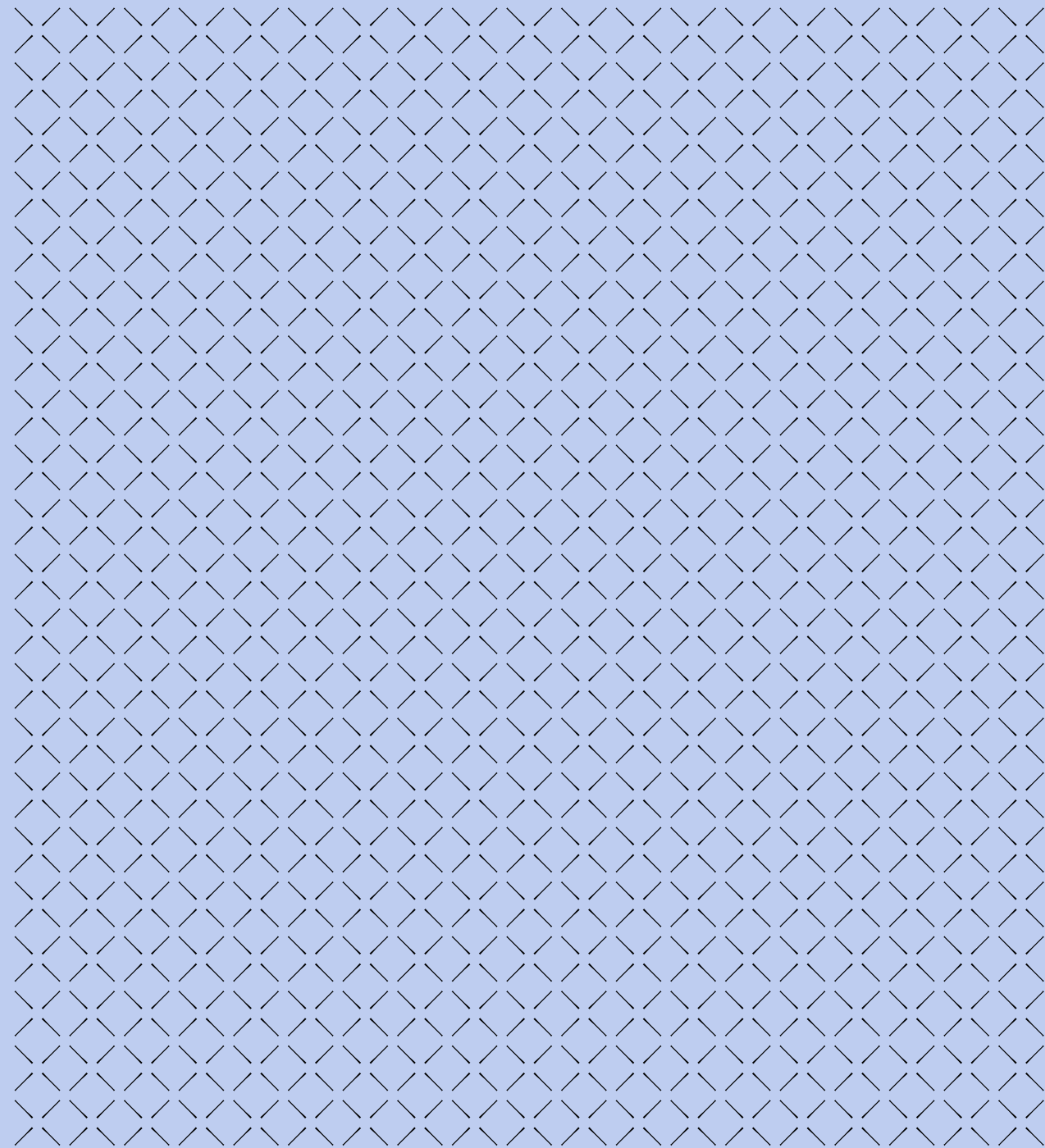
Structural Anatomy



Arterial irrigation



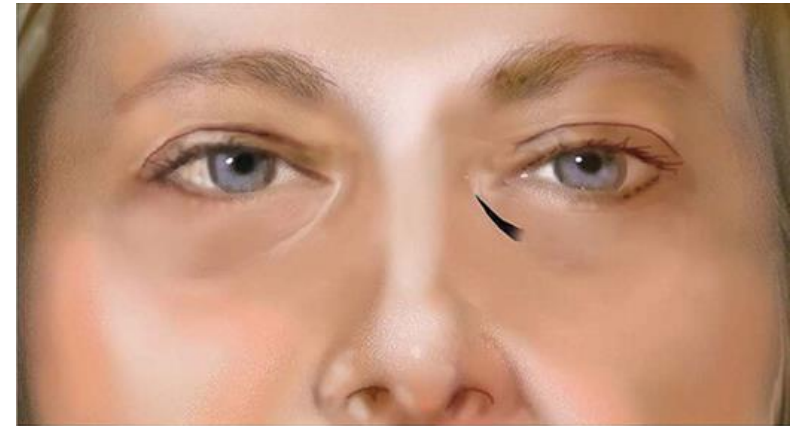
Assessment



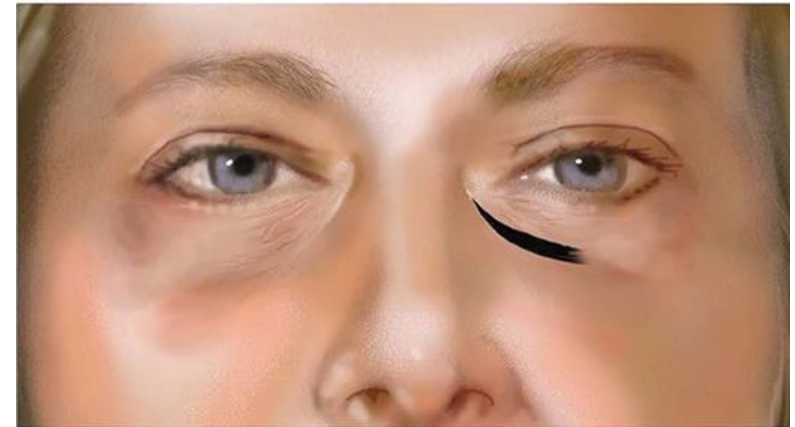
Clasification

In 2010, Hirmand proposed a classification system of the tear trough deformity based on clinical evaluation

- Class I patients have volume loss limited medially to the tear trough. These patients can also have mild flattening extending to the central cheek.
- Class II patients exhibit volume loss in the lateral orbital area in addition to the medial orbit, and they may have moderate volume deficiency in the medial cheek and flattening of the central upper cheek.
- Class III patients present with a full depression circumferentially along the orbital rim, medial to lateral.



Class I

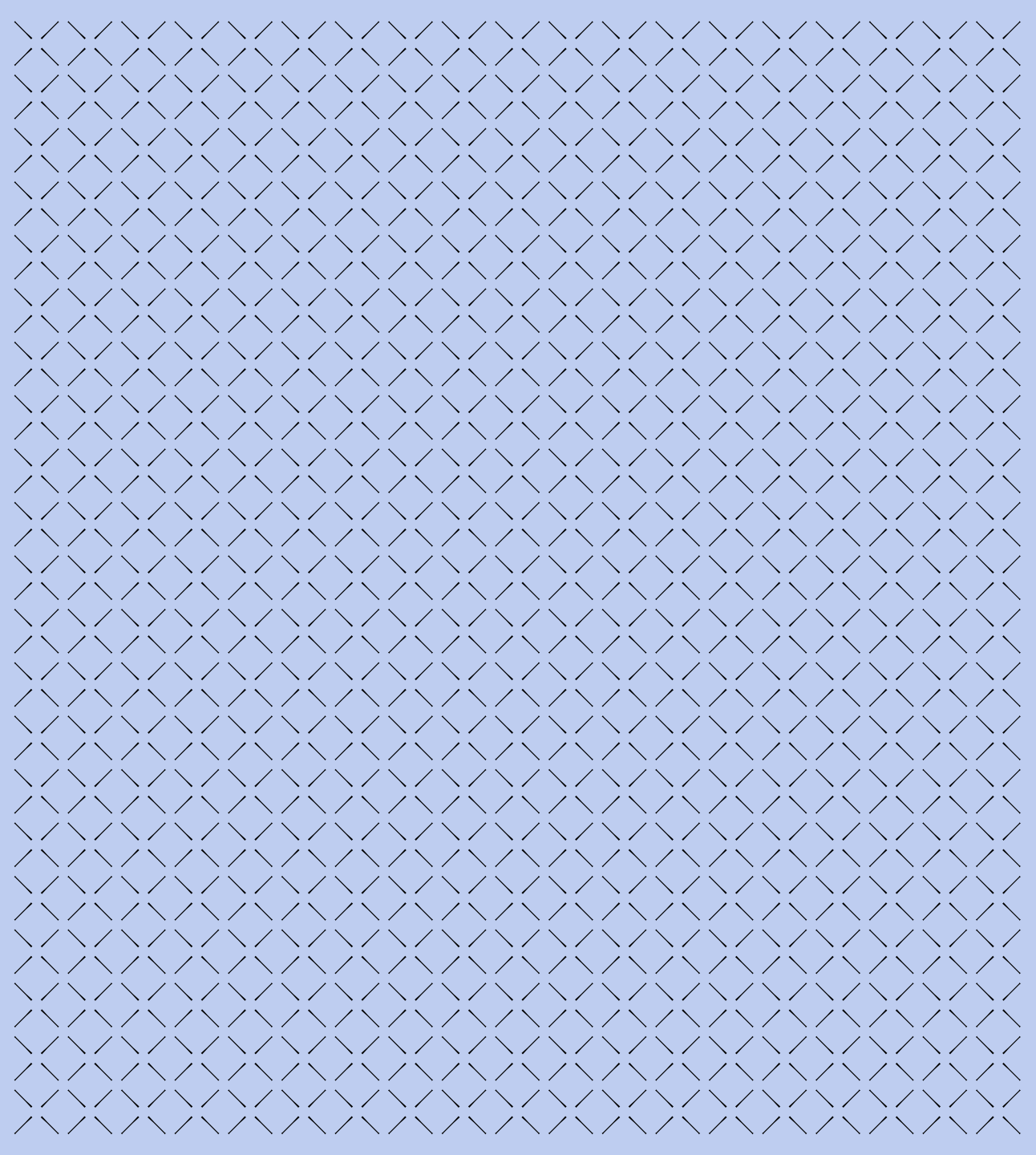


Class II



Class III

The science behind Restylane Eyelight



Restylane has two unique and complementary technologies

NASHA™ designed for Lifting & Precision

Higher G': Firmer gels where precision is needed



OBT™ designed for Contouring & Expression

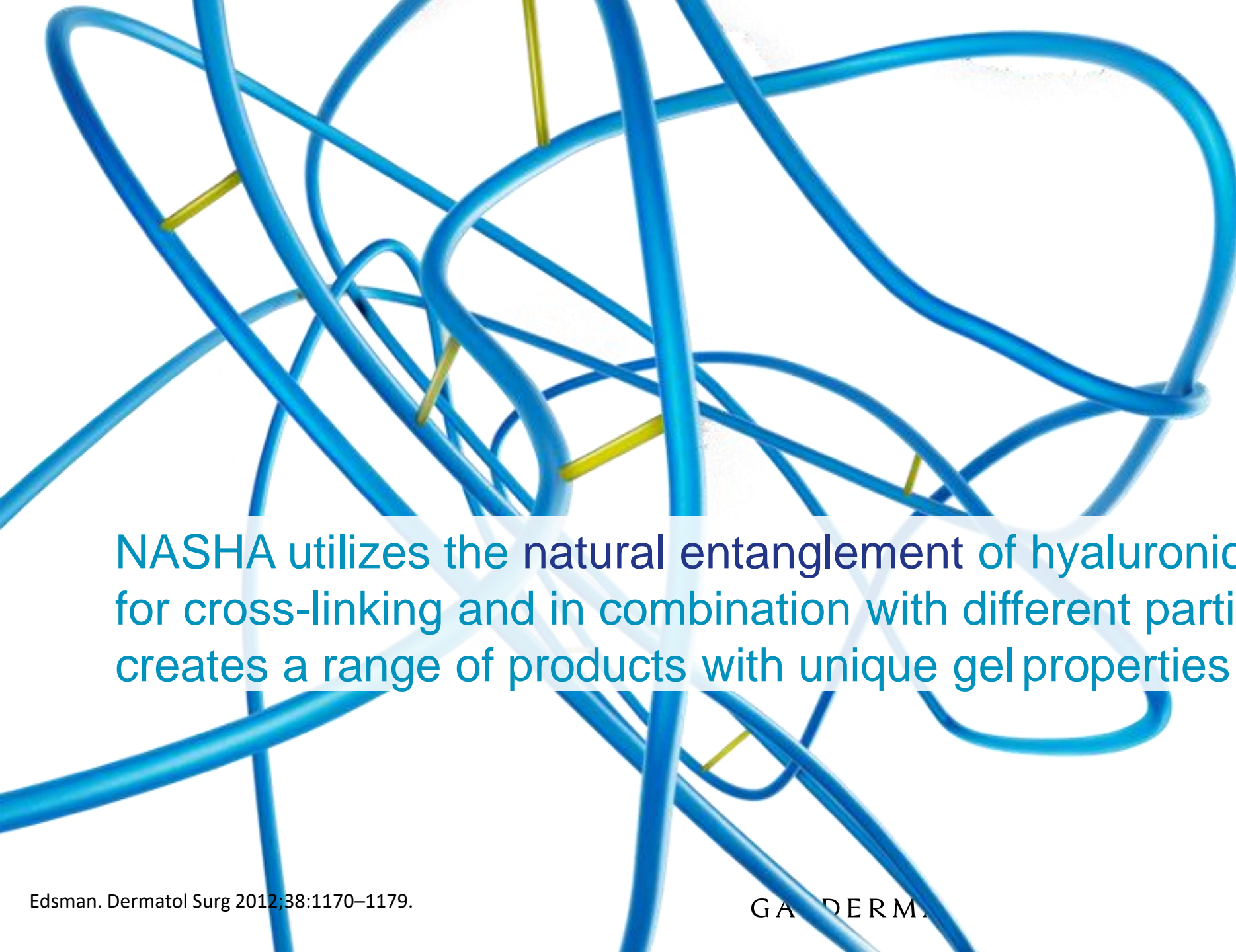
Lower G': Softer and flexible gels for contouring and volumization of the mid-face



Edsman. Dermatol Surg 2012;38:1170–1179.

Philipp-Dormston. Dermatol Surg. 2018;44(6):826-832.

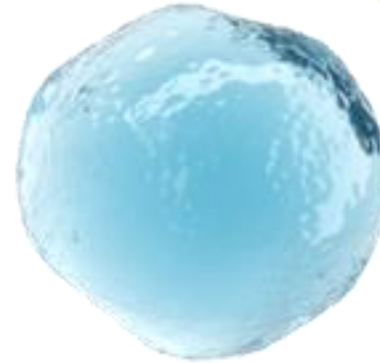
Öhrlund. J Cosmet Dermatol Sci Applic 2018;8(2):47–54;



NASHA utilizes the natural entanglement of hyaluronic acid strands for cross-linking and in combination with different particle sizes, creates a range of products with unique gel properties

NASHA technology provides:

- **LIFTING & PRECISION**
- Natural entanglement for minimal modification
- Firm gels
- **Targeted** product integration
- More **definition**
- Where **precision** is needed



LET'S DEHYDRATE **NASHA** vs OTHERS

Restylane
Lyft

Restylane
Eyelight

Softer fillers



Dr Andreas Nikolis

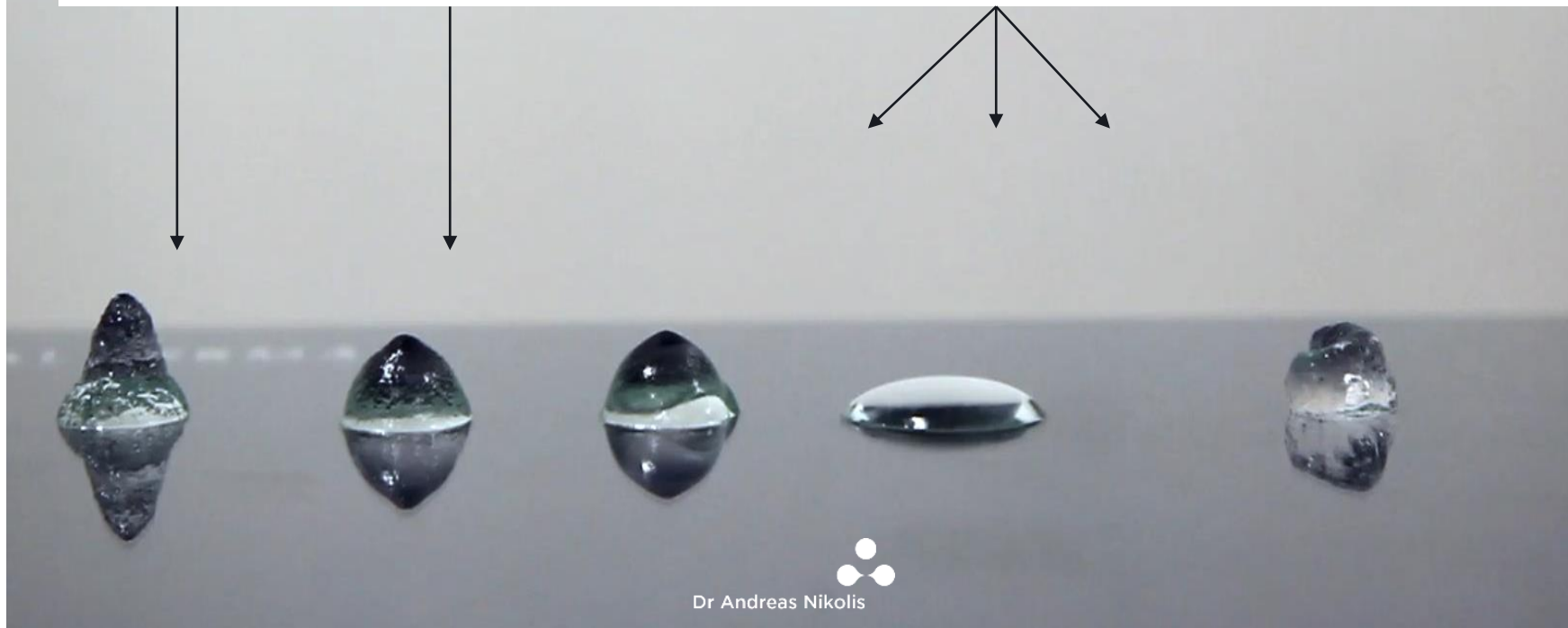
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LET'S ~~REHYDRATE~~ **HA** vs OTHERS

Restylane
Lyft




Restylane
Eyelight

Softer fillers



GALDERMA

Treatment plans for periorbital region

TIRED LOOK	GRUMPY LOOK	AGING
<p>"It is a defect that I've always had and that I'd like not to have"</p>	<p>"People ask me if I am OK all the time..."</p>	<p>"When looking in the mirror, my tired eyes do not correspond to me feeling good"</p>
		
OBSERVATION		
<p>Mild to severe periorbital hollows</p>	<p>Mild to severe periorbital hollows Presence of crow's feet and glabellar lines</p>	<p>Mild to severe periorbital hollows Presence of crow's feet and glabellar lines Lack of volume in the midface and temples</p>
TREATMENT PLAN		
<p>● TT indication²²</p> <p><i>Restylane</i> INTEGRAL</p>	<p>● TT indication²²</p> <p><i>Restylane</i> INTEGRAL</p> <p>● crows feet & deep glabellar lines^{24,25}</p> <p>Azzalure[®]</p>	<p>● TT indication²²</p> <p><i>Restylane</i> INTEGRAL</p> <p>● crows feet & deep glabellar lines^{24,25}</p> <p>Azzalure[®]</p> <p>● temple & mid face^{26,27}</p> <p><i>Restylane</i> VOLUME</p>

GALDERMA

Restylane OBT™

Optimal Balance Technology™ (OBT)

- A range of softer gels with different degrees of cross-linking and controlled particle sizing
- Distributed product integration in the tissue
- Concentration of 20 mg/ml stabilized hyaluronic acid



The OBT™ Technology

GAIN

Cross-linking

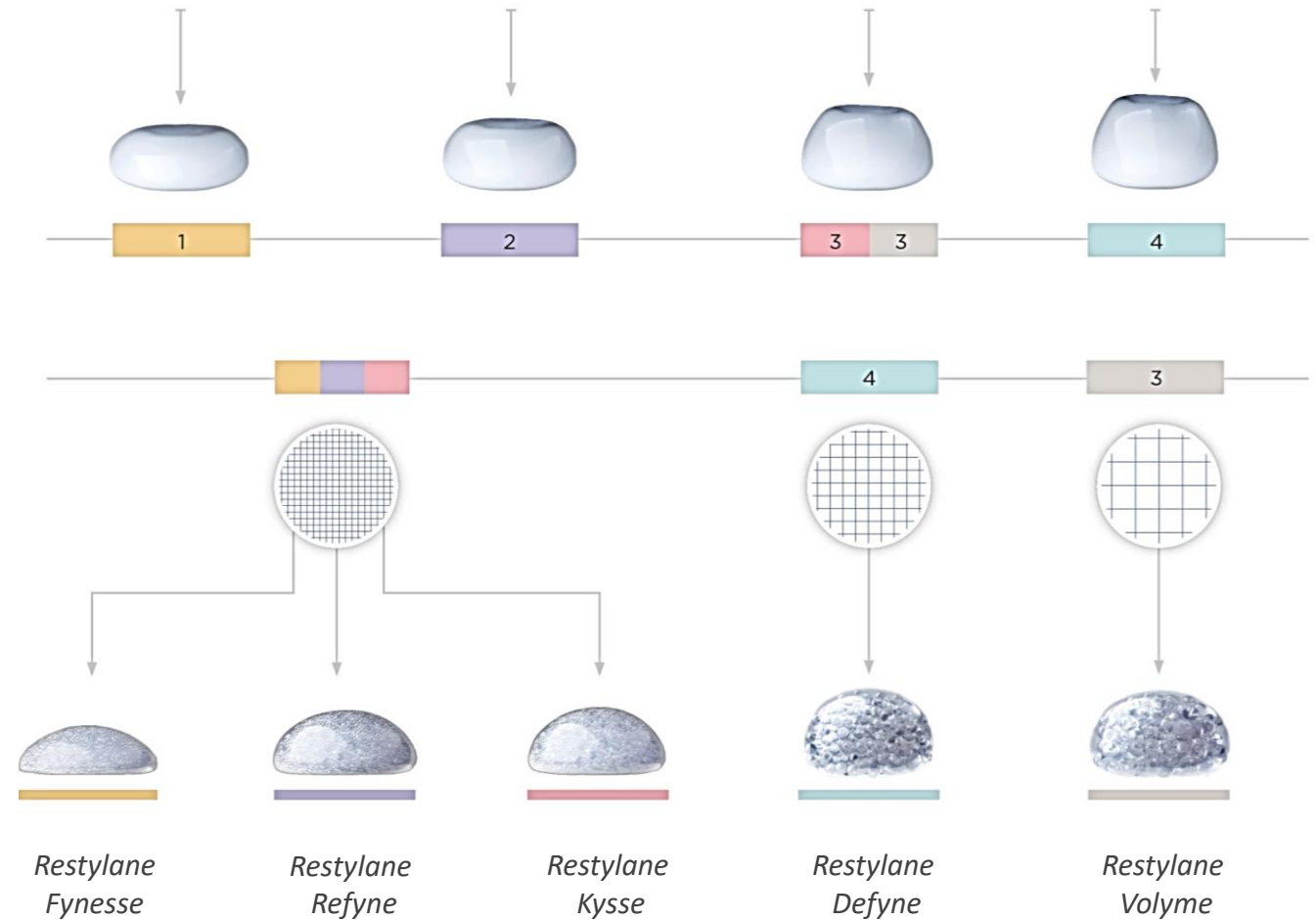
Four degrees of cross-linking for different levels of resistance, from very soft to firm

Controlled particle sizing

Three degrees of gel particle sizing

Different gel textures

Different cross-linking and controlled particle sizing result in distinct gel textures for different lifting capacities



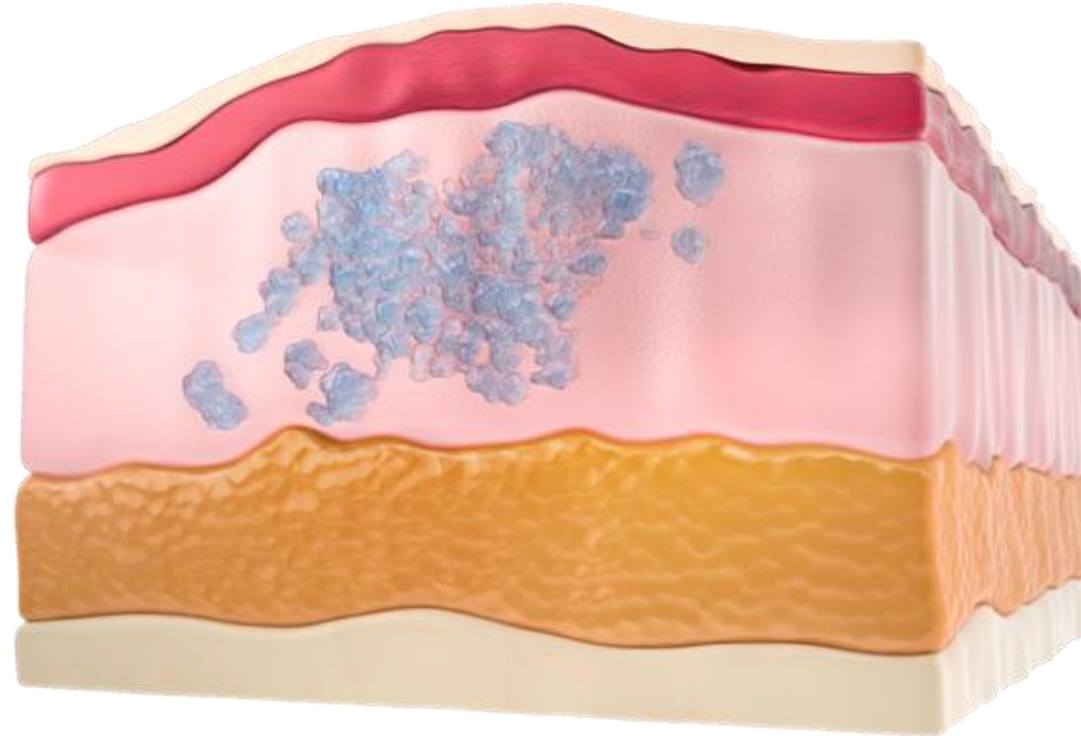
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OBT Gels – Dynamic Movement & Natural Expression

GAIN

When injected into the dermal layer, the properties of OBT allow the gel to move with the **dynamic movements** of the face^{1,2}

This allows for **real expression**, especially for patients with thinner tissue coverage^{1,2}



OBT, Optimal Balance Technology.

1. Philipp-Dormston WG, et al. *Dermatol Surg.* 2018;44(6):826–832; 2. Solish N, et al. *J Cosmet Dermatol.* 2019;18(3):738–746.

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OBT – Contouring and Preserving Natural Expressions

GAIN

OBT technology can be used to:

- Create **contouring** and **add volume** in the midface
- Facilitate **natural expression**

Ideal for **dynamic treatment areas**

Natural Expression



Contour and Volume

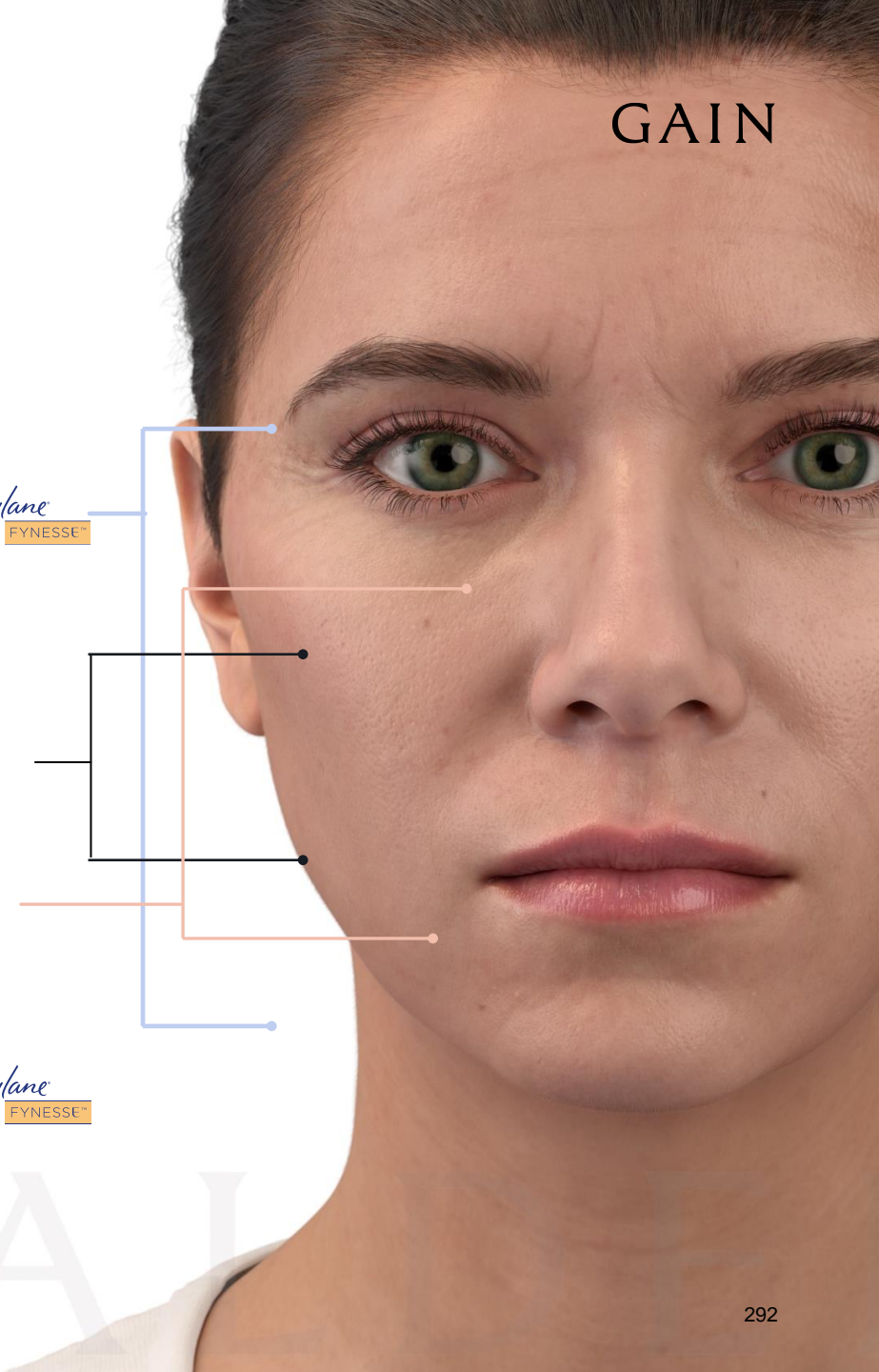


Dynamic treatment areas

Lips, nasolabial folds, and marionette lines

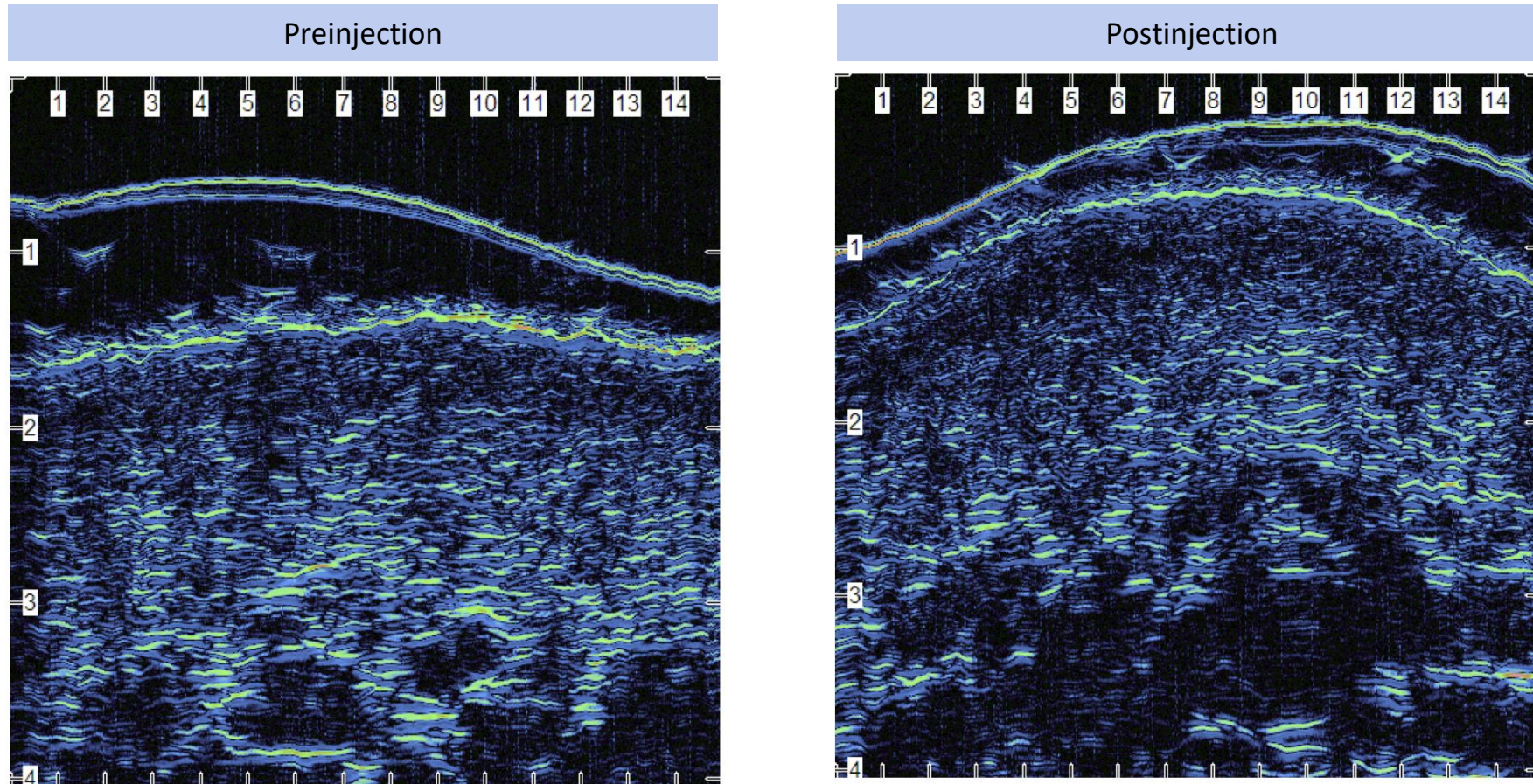


GALDERMA



OBT Technology¹

GAIN



1. Nikolis A, et al. *Aesthet Surg J Open Forum*. 2020;2(1):ojaa005. doi: 10.1093/asjof/ojaa005.

Restylane®

VOLYME™

RESTYLANE® VOLYME™ ADDS
NATURAL-LOOKING VOLUME

August 2020



 GALDERMA

Restylane Volyme Core Claims

Enhances natural volume and fullness

Patients reported a ≥ 1 -grade improvement on the Volume Loss Scale

Specific gel formulation to deliver natural-looking volume

*Large gel particle size designed to correct facial volume loss
Tissue integration for creating natural results*

Favorable safety profile based on unrivalled experience

Well-tolerated with a safety profile built on clinical data

Delivers lasting results and high patient satisfaction

*Volumizing effects maintained for up to 18 months
Long-term results that leave 95% of patients satisfied*

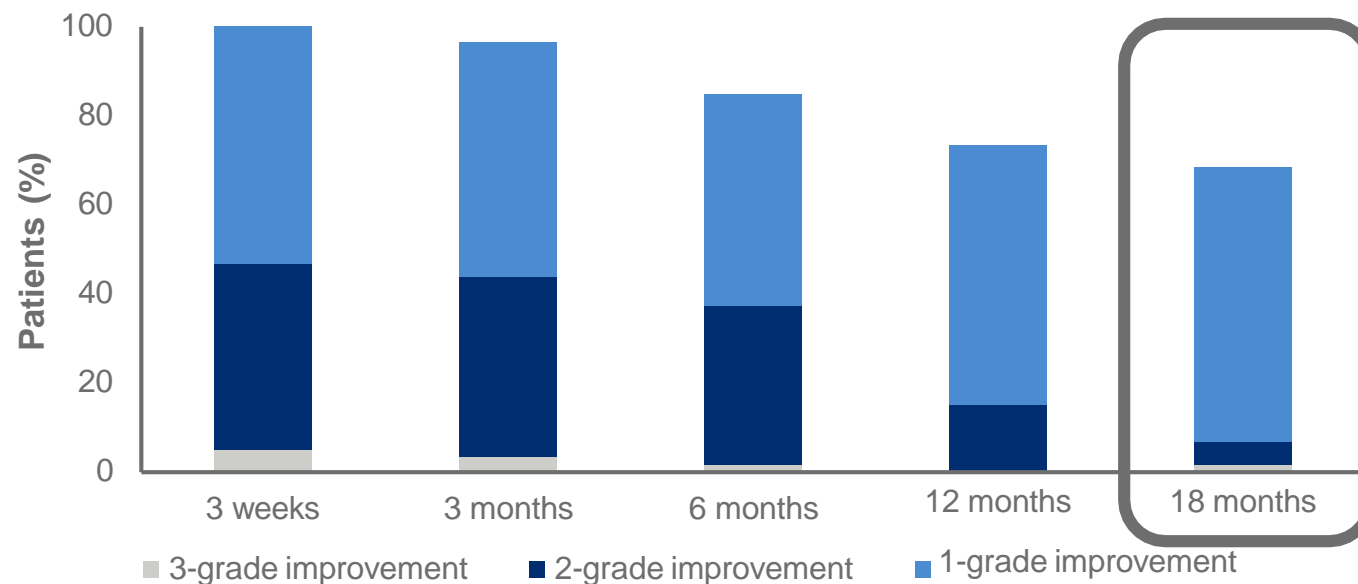
Enhances natural volume and fullness

Patients reported a ≥ 1 -grade improvement on the Volume Loss Scale¹

Supporting information:*

Three weeks after treatment, **100% of patients** had a ≥ 1 -grade improvement in the full-face Volume Loss Scale (VLS)¹

- **68% of patients** had a ≥ 1 -grade improvement in VLS observed for the full face, 18 months after treatment¹



VLS, Volume Loss Scale.

*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

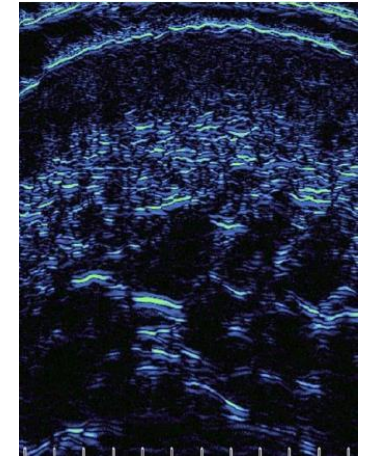
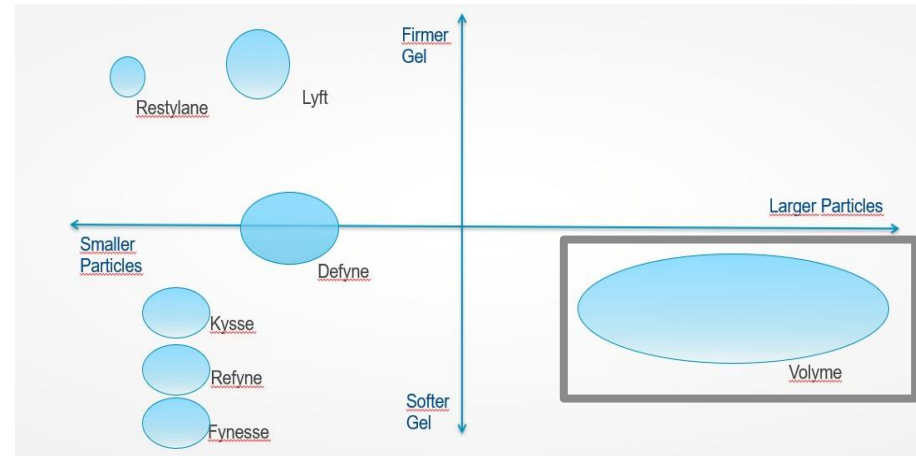
GALDERMA

Specific gel
formulation to deliver
natural-looking volume

Large gel particle size
designed to correct facial
volume loss¹⁻⁴

Supporting information:

Restylane Volyme has the **largest gel particle size** of all the products in the Restylane dermal filler range¹



Ultrasound image from the cheek
4 weeks after treatment with
Restylane Volyme²

As a result, Restylane Volyme has a **strong volumizing effect** for a fuller and more youthful appearance²⁻⁴

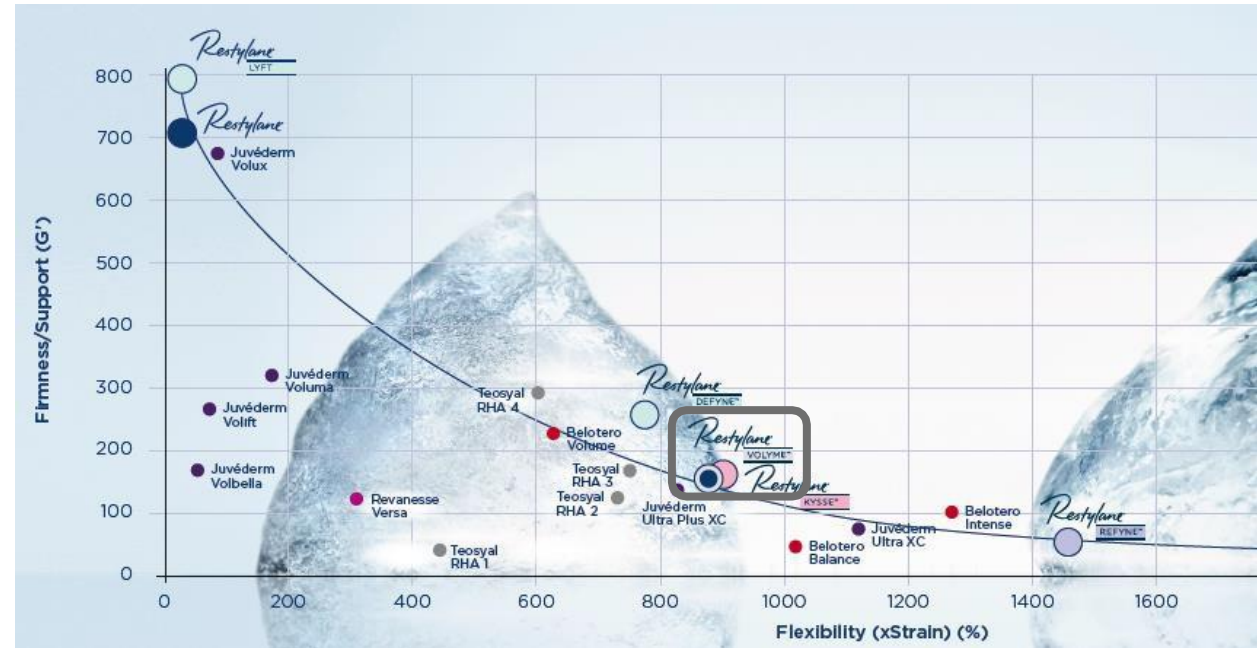
1. Segura S *et al.* *J Drugs Dermatol* 2012;11(1 Suppl):S5-S8; 2. Nikolis A *et al.* *Aesthet Surg J Open Forum* 2020;2(1):ojaa005;
3. Talarico S *et al.* *Dermatol Surg* 2015;41(12):361-1369; 4. Kestemont P *et al.* *J Drugs Dermatol* 2012;11(1 Suppl):S9-S16.

Specific gel
formulation to deliver
natural-looking volume

Tissue integration for creating
natural results¹⁻⁵

Supporting information:

Restylane Volyme is a **soft and flexible** OBT™ gel (high xStrain) that distributes naturally within the tissue after injection^{1,2}



As a result, Restylane Volyme is ideally suited for treating areas with thin tissue coverage and is intended for **adding natural-looking volume and creating fullness**³⁻⁵

OBT, Optimal Balance Technology.

1. Data on file (MA-43049); 2. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 3. Nikolis A *et al. Aesthet Surg J Open Forum* 2020;2(1):ojaa005; 4. Kestemont P *et al. J Drugs Dermatol* 2012;11(1 Suppl):S9–S10; 5. Galderma *et al. Dermatol Surg* 2015;41(12):361–369.

**Favorable safety profile
based on unrivalled
experience**

*Well-tolerated with a safety
profile built on clinical data¹*

Supporting information:

Restylane Volyme has been investigated in two interventional open-label studies* and in one prospective multicenter, cross-sectional, real-practice survey¹



*In one interventional open-label study, Restylane Volyme was used in combination with other products.

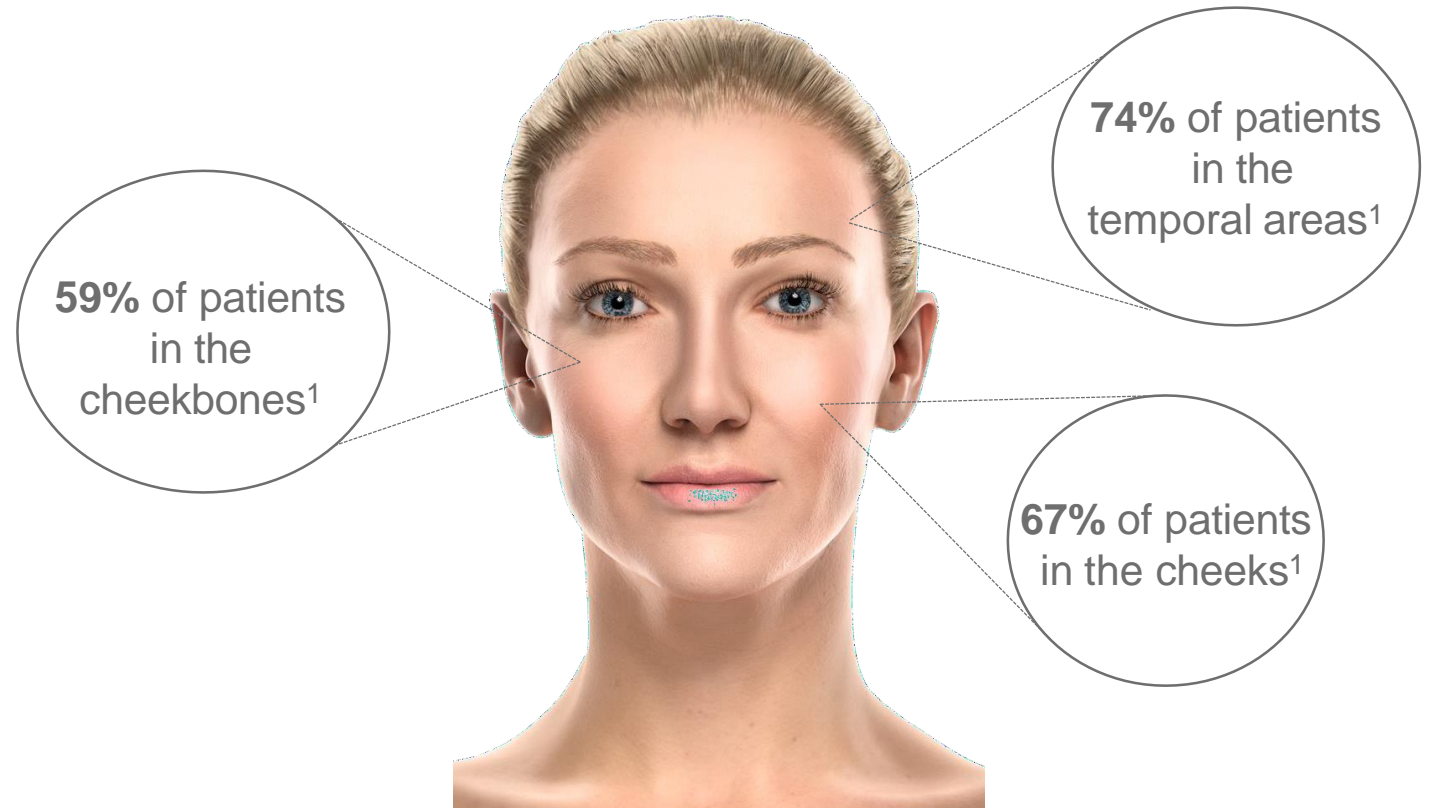
1. Data on file (MA-22124).

Delivers lasting results and high patient satisfaction

*Volumizing effects maintained for
up to 18 months¹*

Supporting information:*

A ≥1-grade improvement on the VLS was maintained at 18 months post-treatment with Restylane Volyme for...



VLS, Volume Loss Scale.

*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

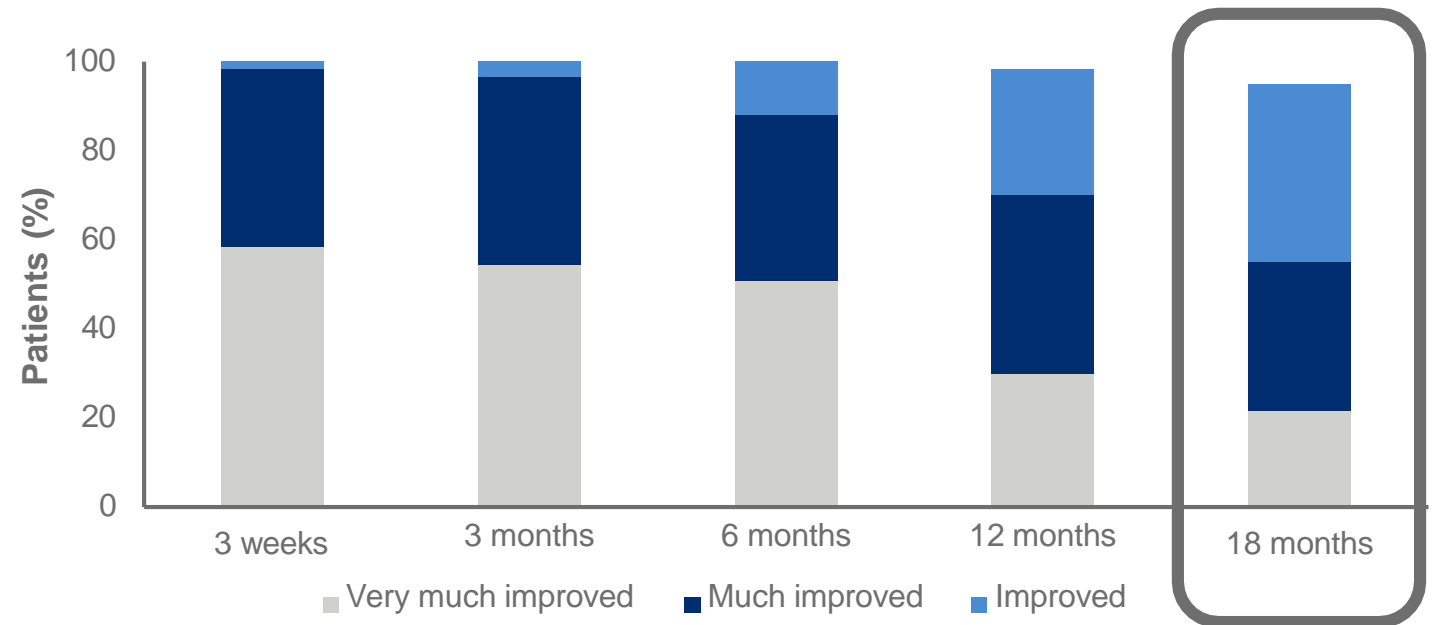
GALDERMA

Delivers lasting results
and high patient
satisfaction

*Volumizing effects maintained for
up to 18 months¹*

Supporting information:*

At 18 months, **95% of patients** had improvements on the Global Aesthetic Improvement Scale (GAIS) for the full face, as assessed by investigators¹



GAIS, Global Aesthetic Improvement Scale.

*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

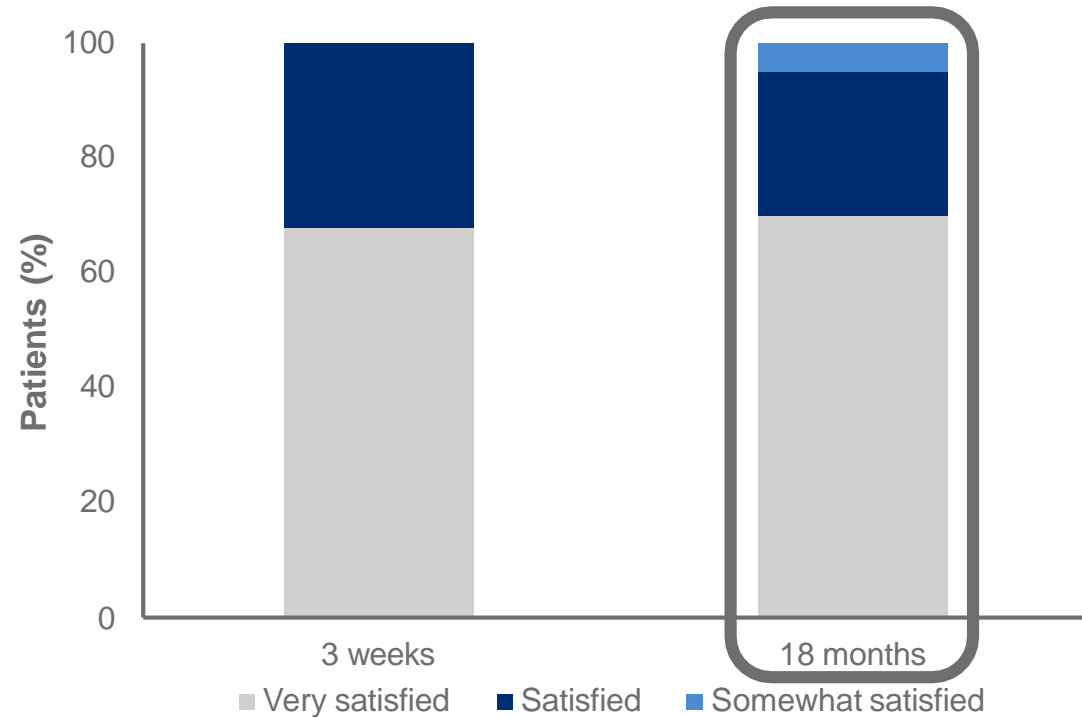
GALDERMA

Delivers lasting results and high patient satisfaction

*Long-term results that leave 95%
of patients satisfied¹*

Supporting information:*

95% of patients were satisfied with their full-face aesthetic outcome 18 months after treatment with Restylane Volyme¹



*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

Delivers lasting results and high patient satisfaction

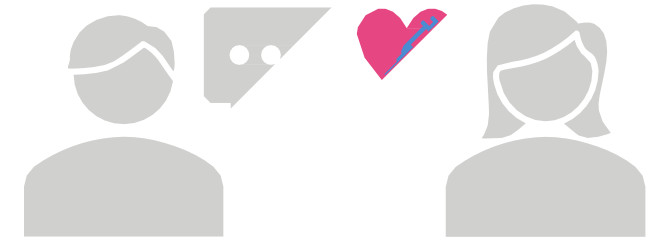
*Long-term results that leave 95%
of patients satisfied¹*

Supporting information:*

18 months after treatment with Restylane Volyme...

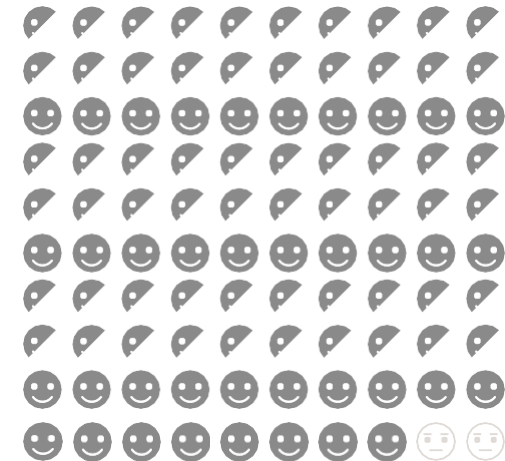
100%

would **recommend** the
treatment to family and
friends and would
receive the
treatment again¹



98%

were either **satisfied or
very satisfied** with the
durability of the results¹



*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

Delivers lasting results
and high patient
satisfaction

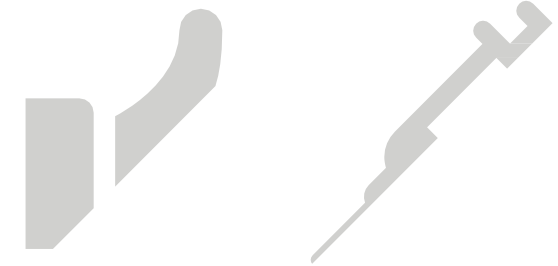
*Long-term results that leave 95%
of patients satisfied¹*

Supporting information:*

18 months after treatment with Restylane Volyme...

95%

were either **satisfied or very satisfied** with the comfort of injections¹



78%

reported the treatment had given them **more self-esteem and confidence**¹



*Optional touch-up injection at 3 weeks. Patients received full-facial volume restoration by treatment of 2 to 6 indications including the chin, temporal areas, jawline, cheek, cheekbones, and nasolabial folds.

1. Talarico S *et al. Dermatol Surg* 2015;41(12):1361–1369.

Restylane[®]

REFYNE[™]

RESTYLANE[®] REFYNE[™] FILLS
LINES AND WRINKLES

August 2020



 GALDERMA

Restylane Refyne Core Claims

Smooth away lines and wrinkles for natural and lasting results

*Naturally integrates into the tissue for fine corrections
Refined results that last for up to 18 months with one retreatment*

Our most flexible OBT™ gel for refined and tailored results

Smooth and flexible gel to maintain facial expression

Favorable safety profile based on unrivalled experience

Well tolerated with a safety profile built on robust clinical data

Results that come recommended

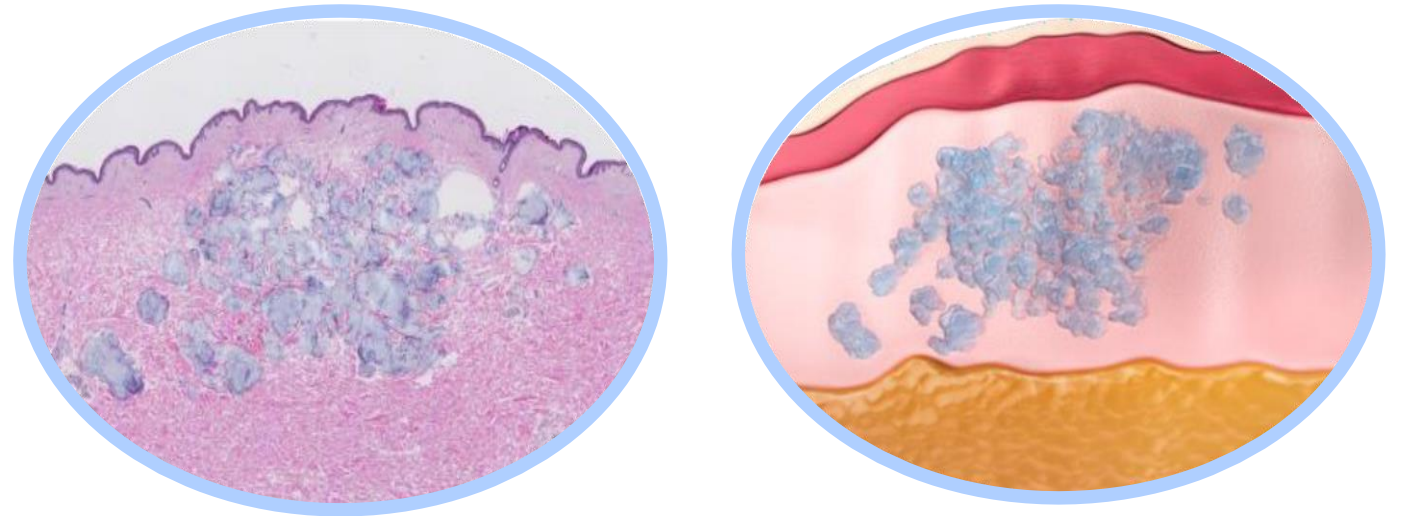
Results that deliver high patient and HCP satisfaction

Smooth away lines and wrinkles for natural and lasting results

Naturally integrates into the tissue for fine corrections¹⁻⁵

Supporting information:

Restylane Refyne is a **soft and flexible** gel (high xStrain) that distributes naturally within the tissue after injection, filling lines and moderate wrinkles in **dynamic treatment areas** for a **smooth finish^{1,2}**



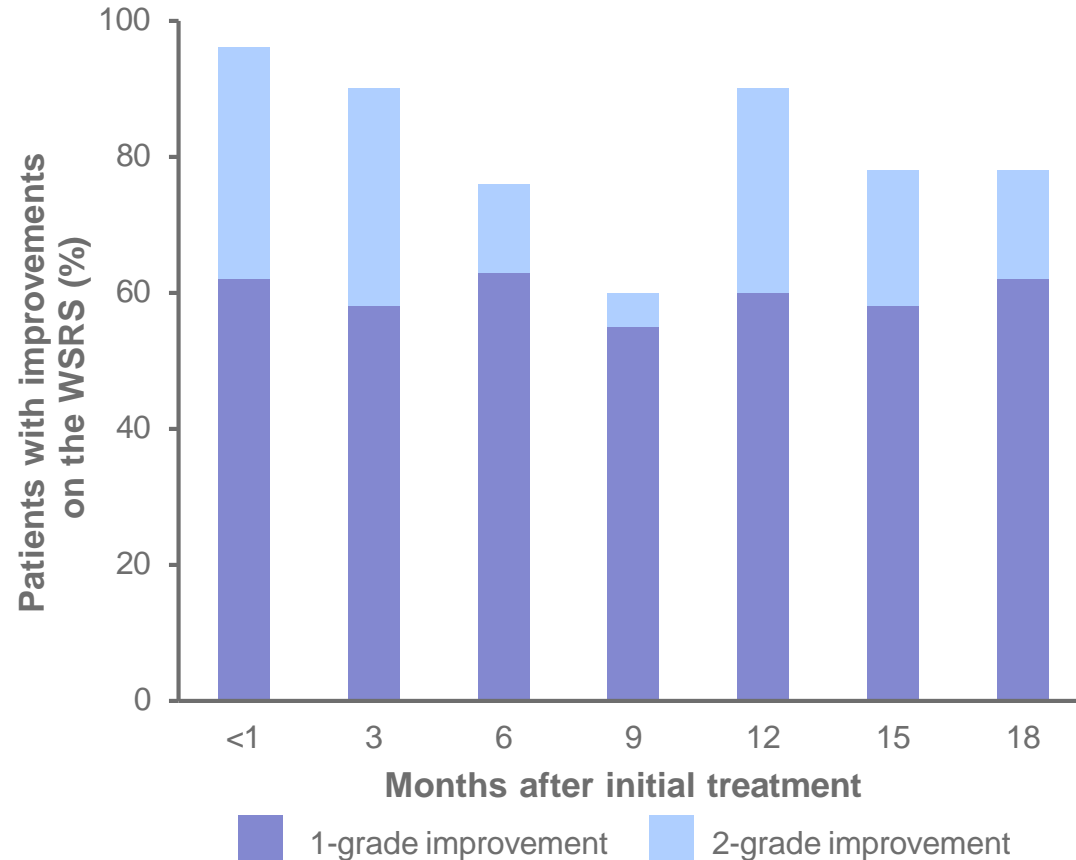
Restylane Refyne is tailored for patients with **thinner tissue coverage** or where a more **subtle treatment effect** is desired^{3,4}

Smooth away lines and wrinkles for natural and lasting results

Refined results that last for up to 18 months with one retreatment¹

Supporting information:

>70% of patients had at least a 1-grade improvement on the **Wrinkle Severity Rating Scale (WSRS)** at 18 months following treatment of nasolabial folds (NLFs) (with retreatment at 9 months)^{1*}



NLF, nasolabial fold; WSRS, Wrinkle Severity Rating Scale.

*Investigator evaluation. The responder rate based on subjects' assessment of WSRS was in keeping with that of the blinded evaluator.

1. Rzany B *et al. Dermatol Surg* 2017;43(1):58–65.

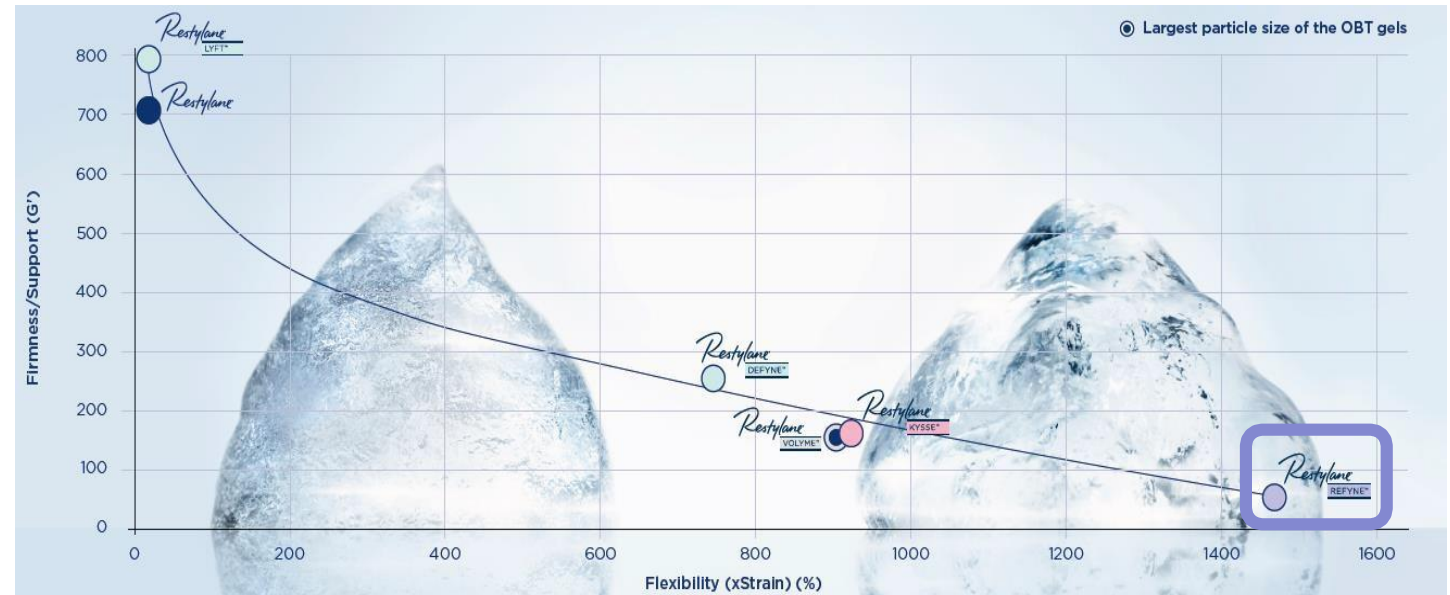
GALDERMA

Our most flexible OBT gel for refined and tailored results

Smooth and flexible gel to maintain facial expression¹⁻⁷

Supporting information:

Restylane Refyne has the **highest flexibility** (xStrain) of all Restylane HA fillers, facilitating **dynamic movement and facial expression**¹⁻⁴



HA, hyaluronic acid; OBT, Optimal Balance Technology.

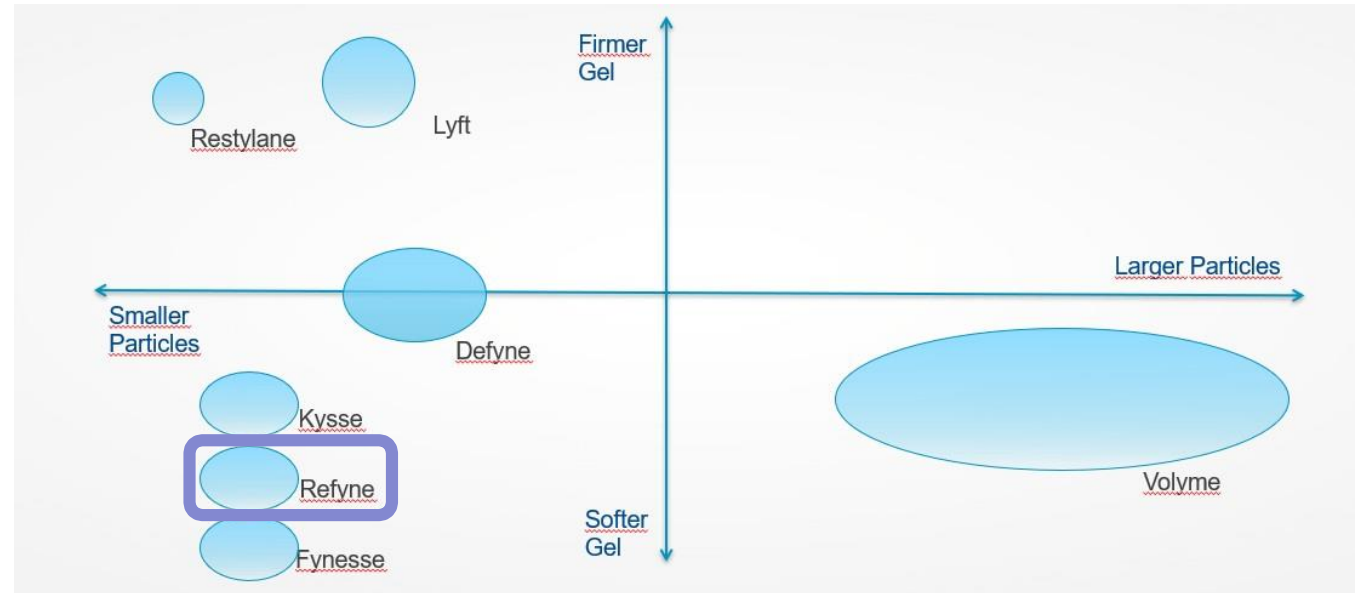
1. Data on file (MA-43049);
2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;
3. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746;
4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5–S8;
5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986;
6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e–305e;
7. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606.

Our most flexible OBT gel for refined and tailored results

Smooth and flexible gel to maintain facial expression¹⁻⁷

Supporting information:

Restylane Refyne has the **equal smallest gel particle size** of any product in the Restylane OBT filler range⁴



This allows natural tissue integration and dispersal following injection, avoiding lumps and bumps for a **refined result**^{4,5}

HA, hyaluronic acid; OBT, Optimal Balance Technology.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832; 3. Solish N *et al. J Cosmet Dermatol* 2019; 18(3):738–746; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5–S8; 5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e–305e; 7. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606.

Our most flexible OBT gel for refined and tailored results

Smooth and flexible gel to maintain facial expression¹⁻⁷

Supporting information:*

Older individuals display higher amounts of **facial strain** during dynamic expression⁶



Objective facial dynamic results (3D stereophotogrammetry) at baseline and after treatment with Restylane Defyne⁶

After treatment with Restylane Refyne, the amount of strain exerted is reduced, helping to **restore a youthful strain profile⁶**

NLF, nasolabial fold; OBT, Optimal Balance Technology.

*Patients received bilateral treatment with Restylane Refyne, Restylane Defyne™, or both in the NLFs and marionette lines. The degree of facial strain was then assessed by three-dimensional digital stereophotogrammetry at baseline and 42 days after treatment.

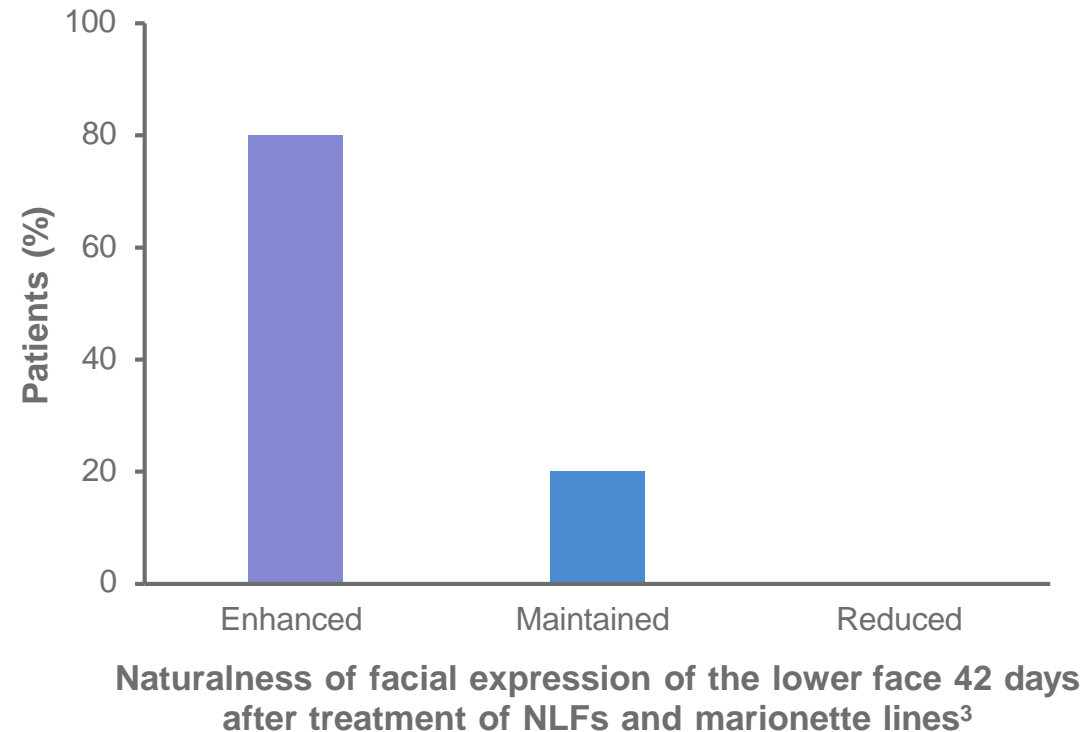
1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832; 3. Solish N *et al. J Cosmet Dermatol* 2019; 18(3):738–746; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5–S8; 5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e–305e; 7. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606.

Our most flexible OBT gel for refined and tailored results

Smooth and flexible gel to maintain facial expression¹⁻⁷

Supporting information:*

After treatment with Restylane Refyne, the **naturalness of dynamic expression**, as assessed by investigators, was **enhanced or maintained** in all patients (100%)³



NLF, nasolabial fold; OBT, Optimal Balance Technology.

*Two-dimensional video assessment by treating investigator at Day 42 compared with baseline, in which the patients displayed facial expressions and emotions and undertook reading exercises. Pooled results for patients receiving Restylane Refyne and Restylane Defyne.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832; 3. Solish N *et al. J Cosmet Dermatol* 2019; 18(3):738–746; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5–S8; 5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e–305e; 7. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606.

Our most flexible OBT gel for refined and tailored results

Smooth and flexible gel to maintain facial expression¹⁻⁷

Supporting information:*

Across all examined expressions, **>70%** of patients achieved **improvements in naturalness** after treatment with Restylane Refyne³



OBT, Optimal Balance Technology.

*Naturalness of expression in the lower face at full contraction based on two-dimensional photo assessment by treating investigator at Day 42 compared with baseline. Pooled results for patients receiving Restylane Refyne and Restylane Defyne.

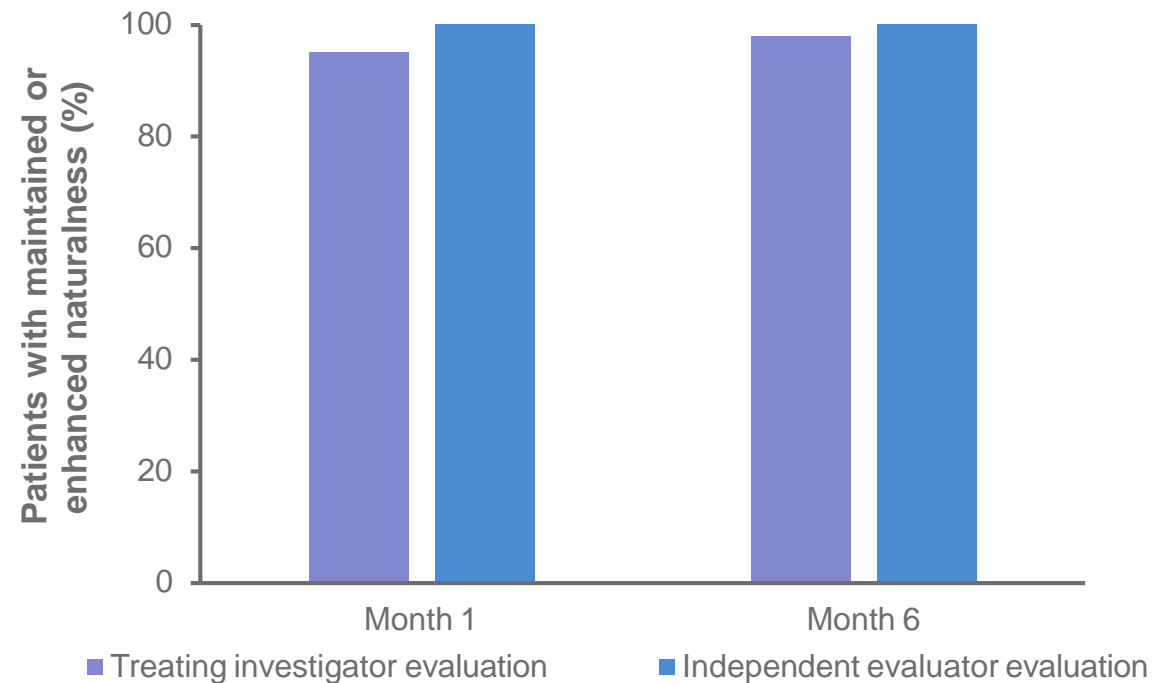
1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832; 3. Solish N *et al. J Cosmet Dermatol* 2019; 18(3):738–746; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5–S8; 5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e–305e; 7. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606.

Our most flexible OBT gel for refined and tailored results

Smooth and flexible gel to maintain facial expression¹⁻⁷

Supporting information:*

6 months after treatment with Restylane Refyne, **≥95%** of patients had **maintained or enhanced naturalness** of their facial expressions⁷



NLF, nasolabial fold; OBT, Optimal Balance Technology.

*Pooled results for both Restylane Refyne and Restylane Defyne 12 months after treatment of NLFs and marionette lines.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832; 3. Solish N *et al. J Cosmet Dermatol* 2019; 18(3):738–746; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5–S8; 5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982–986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e–305e; 7. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606.

Favorable safety profile based on unrivalled experience

*Well tolerated with a safety
profile built on robust
clinical data¹*

Supporting information:

Restylane Refyne* has a **favorable safety profile**, established in 11 clinical investigations encompassing over 1,000 patients¹



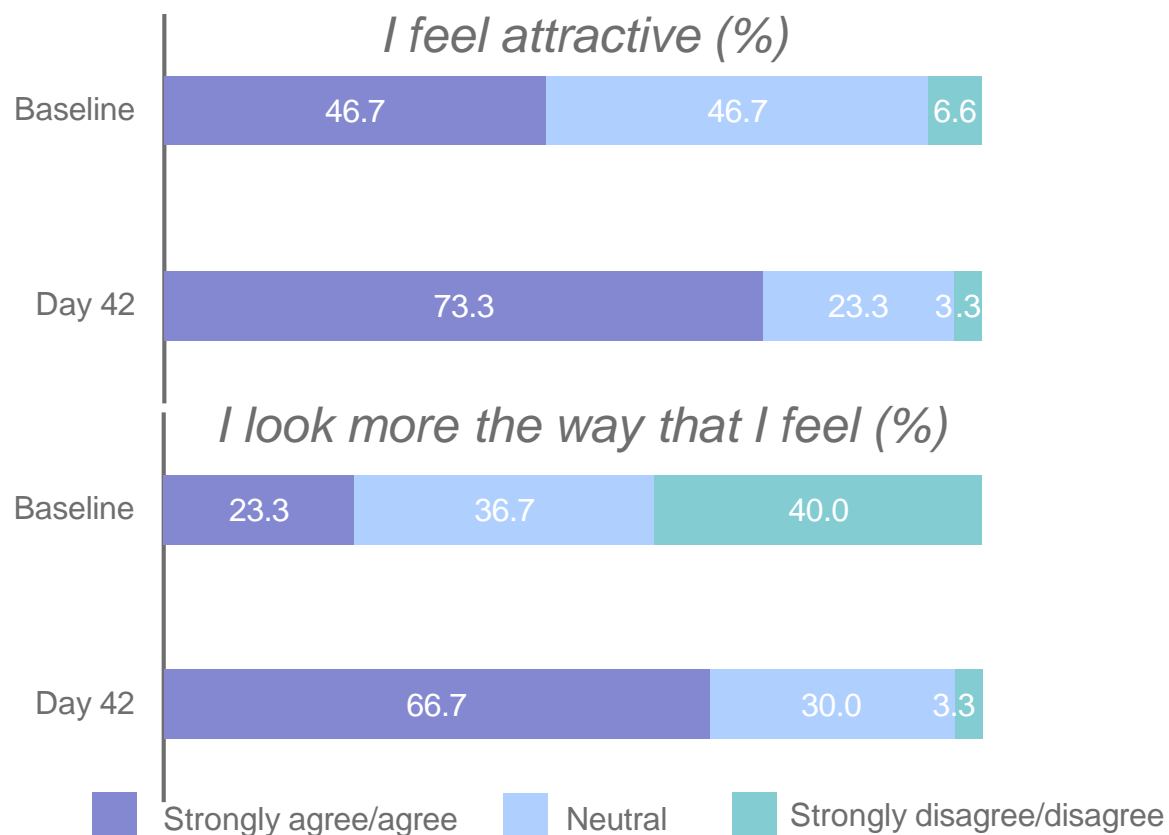
*Or equivalent product without lidocaine.
1. Data on file (MA-22124).

Results that come recommended

Results that deliver high patient and HCP satisfaction¹⁻⁴

Supporting information:*

After treatment of NLFs and marionette lines, most patients **agreed or strongly agreed** with positive statements regarding their appearance¹



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 42 days after treatment. Optional touch-up treatment at 2 weeks.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

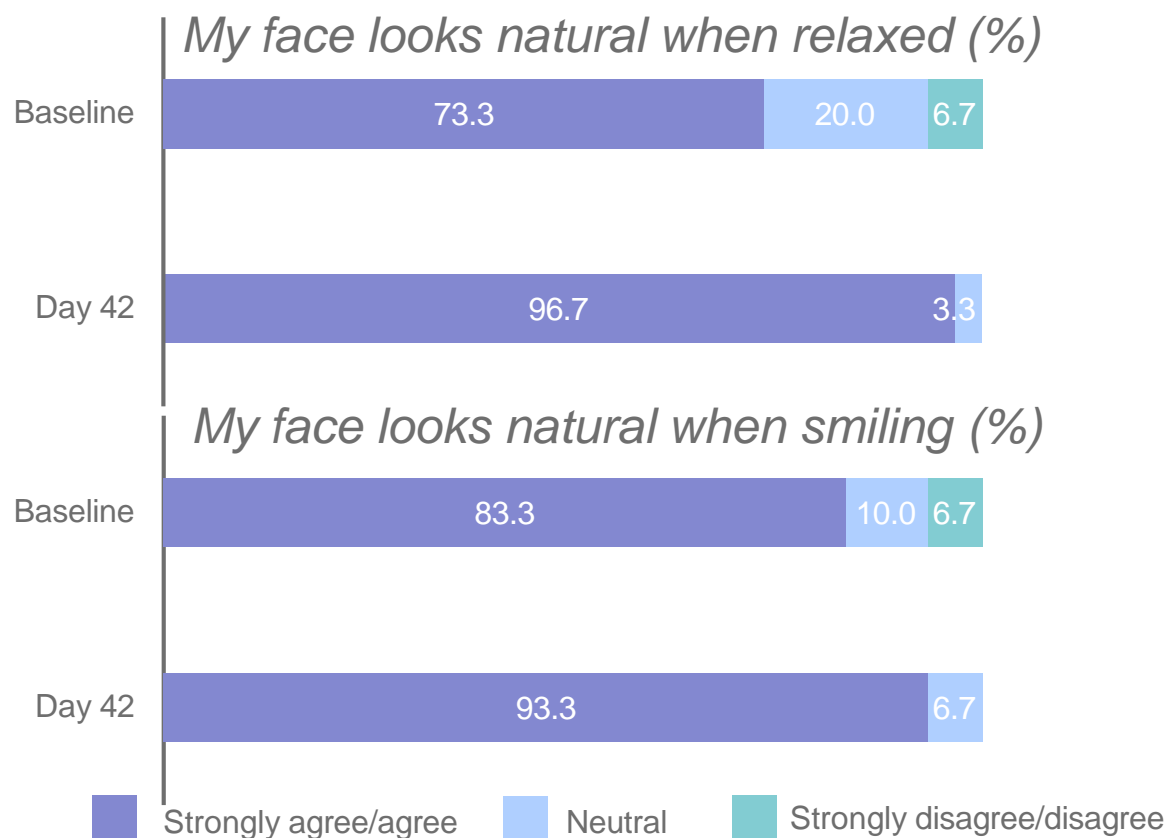
3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

Results that come recommended

Results that deliver high patient and HCP satisfaction¹⁻⁴

Supporting information:*

After treatment of NLFs and marionette lines, most patients **agreed or strongly agreed** with statements about the naturalness of their expressions¹



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 42 days after treatment. Optional touch-up treatment at 2 weeks.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

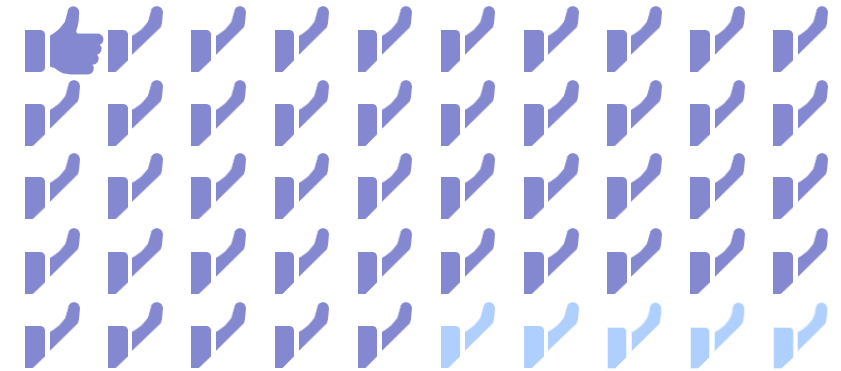
Results that come recommended

Results that deliver high patient and HCP satisfaction¹⁻⁴

Supporting information:

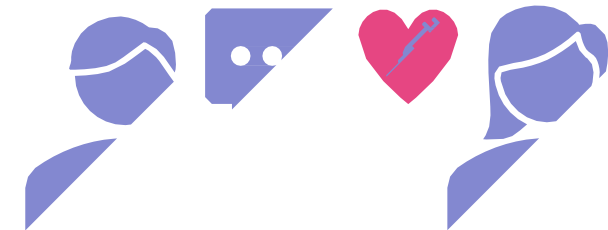
≥95%

were **satisfied** with their treatment results^{2*} and would have treatment again^{3†}



95%

would **recommend** the treatment to a friend^{4*}



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 1 month after treatment of NLFs and marionette lines.

†Pooled results for both Restylane Refyne and Restylane Defyne 12 months after treatment of NLFs and marionette lines.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

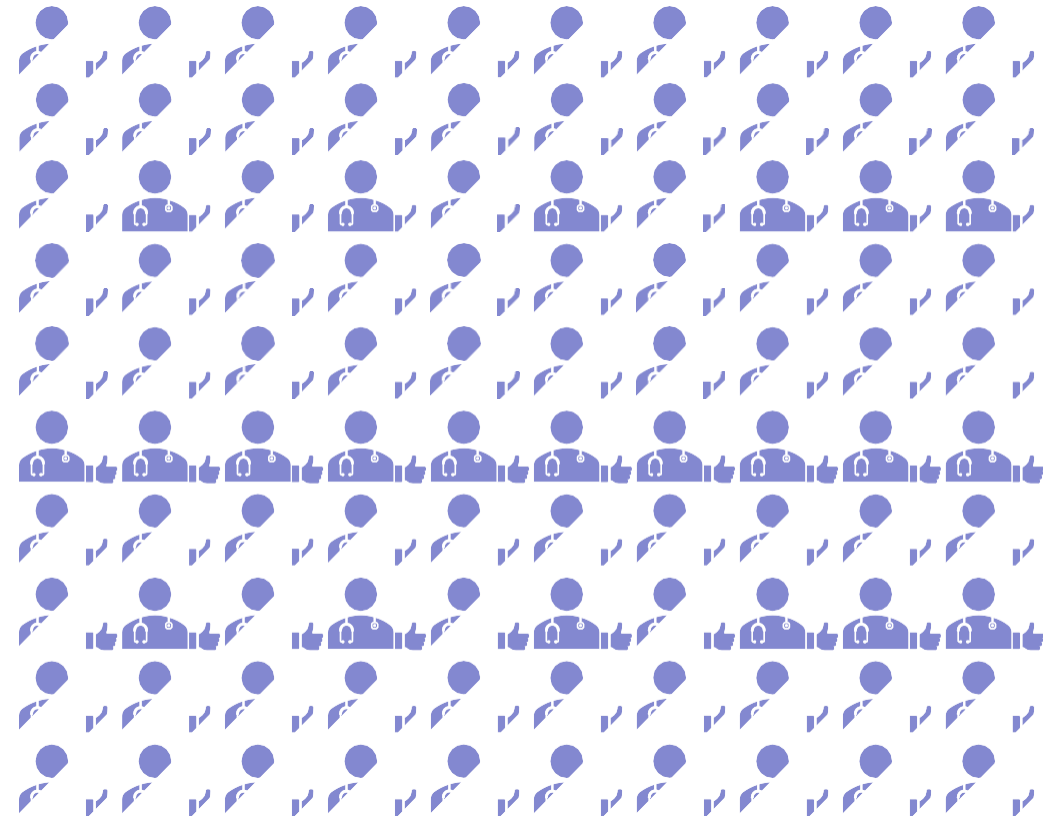
3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

Results that come recommended

Results that deliver high patient and HCP satisfaction¹⁻⁴

Supporting information:*

100% of treating investigators were **satisfied** with the aesthetic outcome of all patients²



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 1 month after treatment of NLFs and marionette lines.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

GALDERMA

Restylane

DEFYNE™

RESTYLANE® DEFYNE™
PROVIDES CONTOURING
AND DEFINITION

August 2020



 GALDERMA

Restylane Defyne Core Claims

Optimal correction of deep lines and wrinkles

Soft projection to create natural-looking contouring and definition

Maintain dynamic expression with flexible OBT™ gel technology

Distributed tissue integration to provide mobility for true expression

Favorable safety profile based on unrivalled experience

Well tolerated with a safety profile built on robust clinical data

Results that come recommended

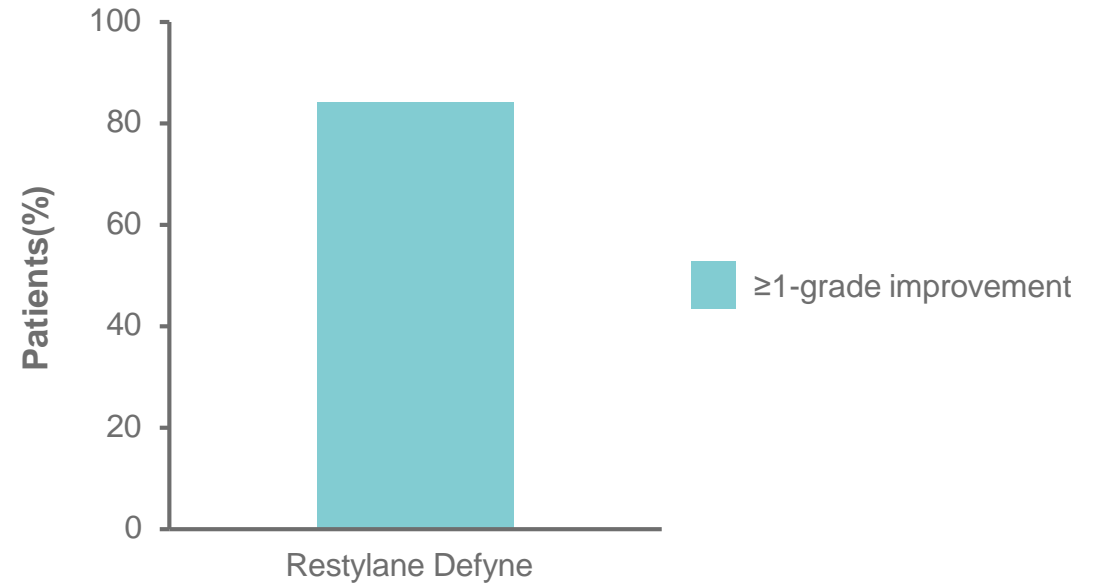
Natural and lasting results supported by high patient and HCP satisfaction

Optimal correction of deep lines and wrinkles

Soft projection to create natural-looking contouring and definition¹⁻³

Supporting information:

Restylane Defyne can be used for the **correction** of severe lines and wrinkles or to **redefine the shape** of the cheeks¹



Approximately 80% of patients achieved a ≥1-grade improvement on the evaluator-assessed Wrinkle Severity Rating Scale at Week 48 following treatment of nasolabial folds (NLFs) with Restylane Defyne²

NLF, nasolabial fold.

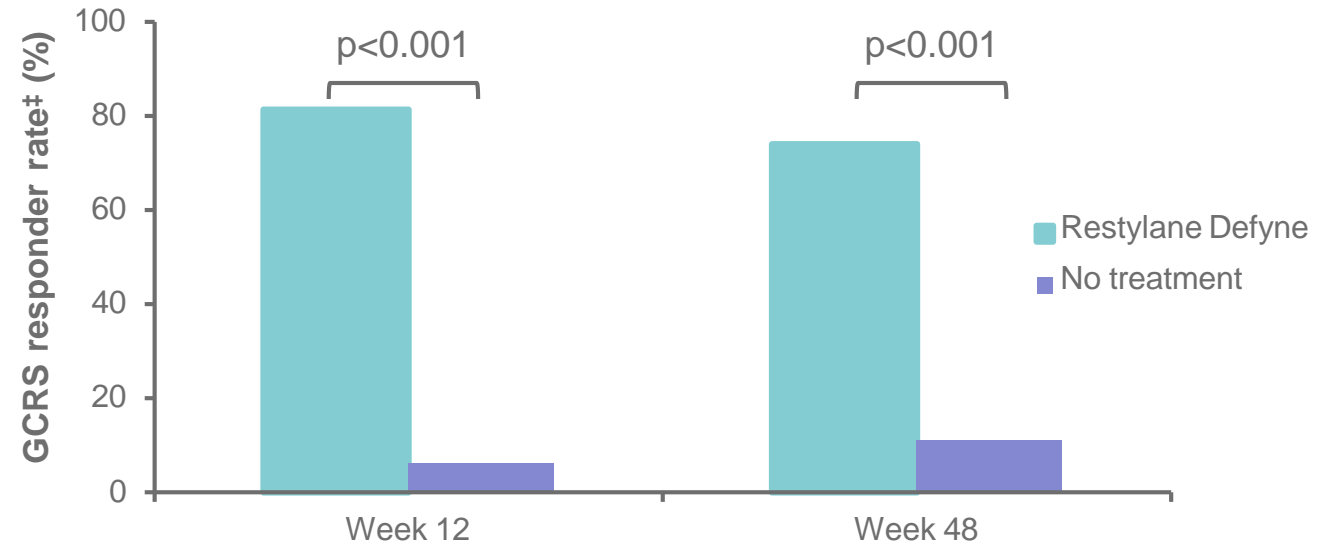
1. Restylane Defyne EU IFU. 2020; 2. Ascher B *et al. Dermatol Surg* 2017;43(3):339-345. 3. Deparlan A *et al. J Dermatol* (MA-42769).

Optimal correction of deep lines and wrinkles

Soft projection to create natural-looking contouring and definition¹⁻³

Supporting information:*

Restylane Defyne can also help to **build definition** in the chin,[†] providing improvements on both the Global Chin Retrusion Scale (GCRS) and the Global Aesthetic Improvement Scale (GAIS)³



At Week 48, 78% and 70% of patients treated with Restylane Defyne were **satisfied with the style and shape** of their chin, respectively³

GAIS, Global Aesthetic Improvement Scale; GCRS, Global Chin Retrusion Scale.

*Patients either received no treatment or Restylane Defyne injections into the chin at Day 1. Optional touch-up treatment was permitted 4 weeks after initial treatment. [†]Restylane Defyne is currently not approved for use in the chin. [‡]Defined as the proportion of patients achieving a ≥ 1 grade improvement from baseline on the GCRS as assessed by a blinded evaluator.

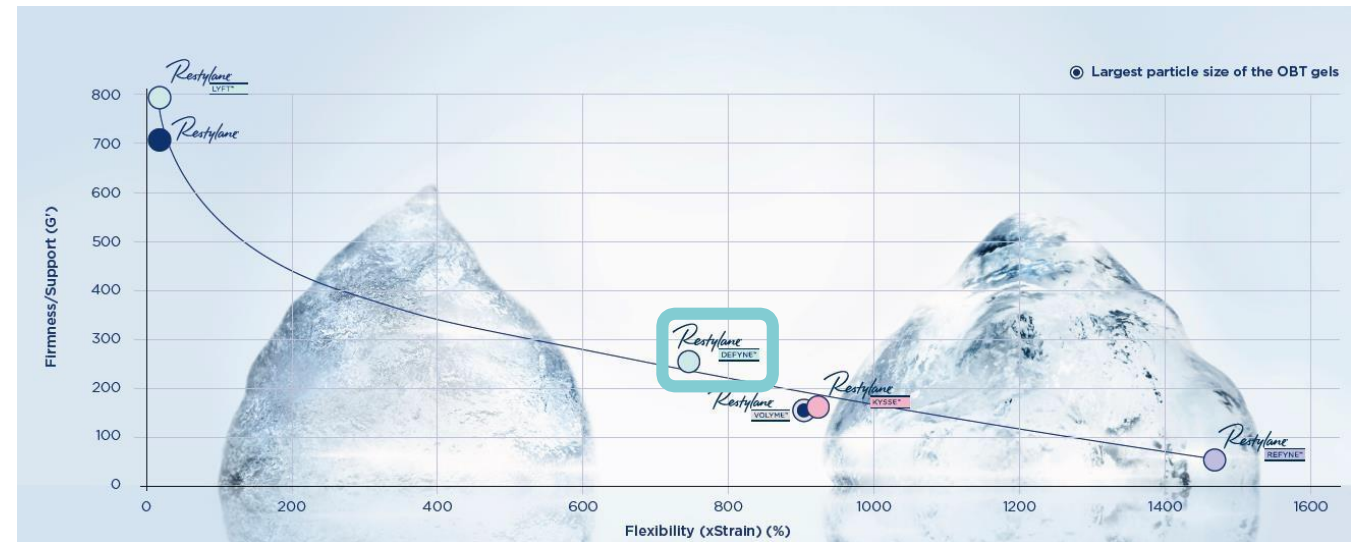
1. Restylane Defyne EU IFU. 2020; 2. Ascher B *et al. Dermatol Surg* 2017;43(3):389-395. 3. Galderma (MA-42769).

Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸

Supporting information:

The mid-range xStrain (flexibility) of Restylane Defyne OBT gel **facilitates movement**, making it ideally suited to dynamic treatment areas that **require lift whilst maintaining animation^{1,2}**



Restylane Defyne is ideal for patients with **thinner tissue coverage** or where a more **subtle treatment effect** is desired³

OBT, Optimal Balance Technology.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826-832;

3. Nikolis A *et al. Aesthet Surg J Open Forum* 2020;2(1):ojaa005; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5-S8;

5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982-986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e-305e;

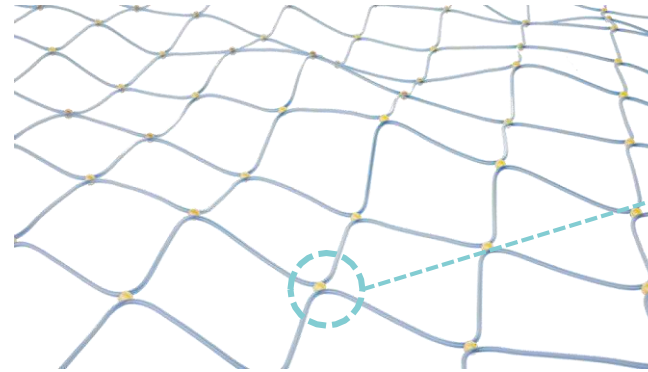
7. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738-746; 8. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600-1606.

GALDERMA

Supporting information:

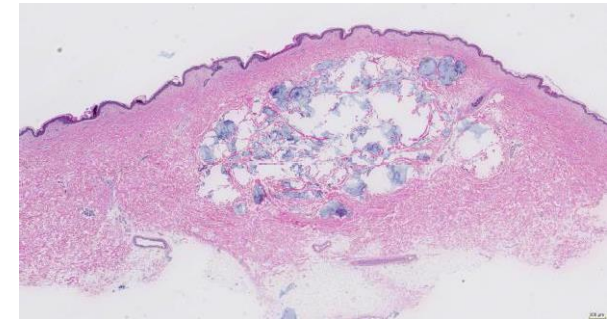
Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸



The OBT gel net:
A chemical (BDDE) is used to create **cross-links** between HA chains⁴

Restylane Defyne OBT gel technology **distributes within the skin⁵**



BDDE, 1,4-butanediol diglycidyl ether; HA, hyaluronic acid; OBT, Optimal Balance Technology.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826-832;
3. Nikolis A *et al. Aesthet Surg J Open Forum* 2020;2(1):ojaa005; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5-S8;
5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982-986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e-305e;
7. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738-746; 8. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600-1606.

Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸

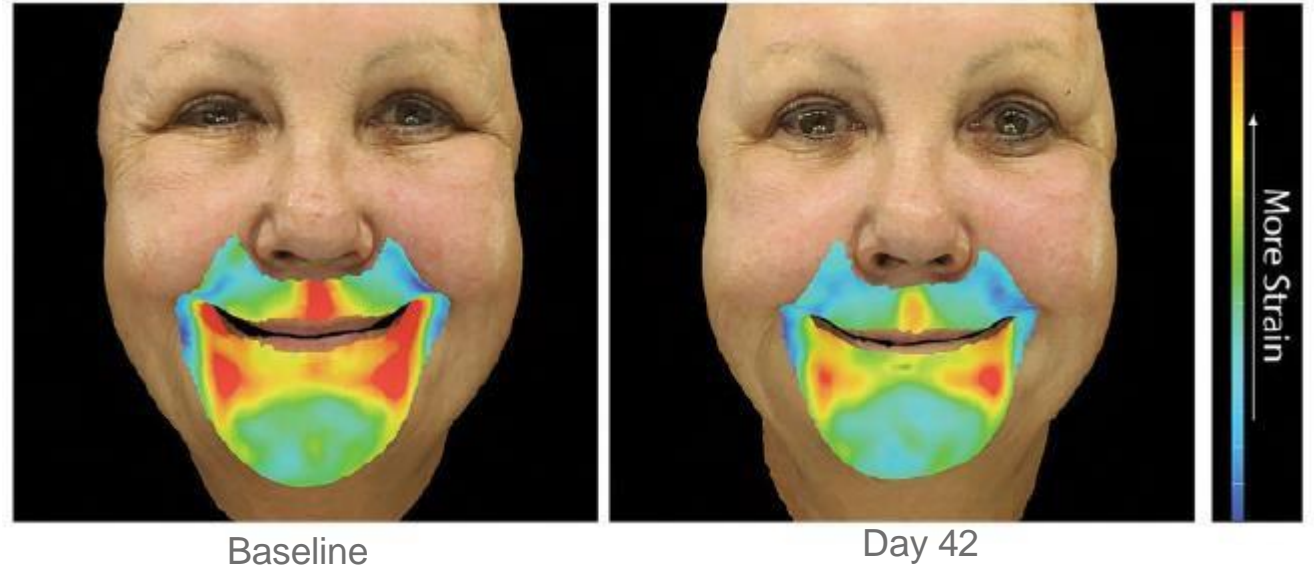
NLF, nasolabial fold; OBT, Optimal Balance Technology.

*Patients received bilateral treatment with Restylane Refyne™, Restylane Defyne, or both in the NLFs and marionette lines. The degree of facial strain was then assessed by three-dimensional digital stereophotogrammetry at baseline and 42 days after treatment.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826-832;
3. Nikolis A *et al. Aesthet Surg J Open Forum* 2020;2(1):ojaa005; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5-S8;
5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982-986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e-305e;
7. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738-746; 8. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600-1606.

Supporting information:*

Older individuals display higher amounts of **facial strain** during dynamic expression⁶



Objective facial dynamic results (3D stereophotogrammetry) at baseline and after treatment with Restylane Defyne⁶

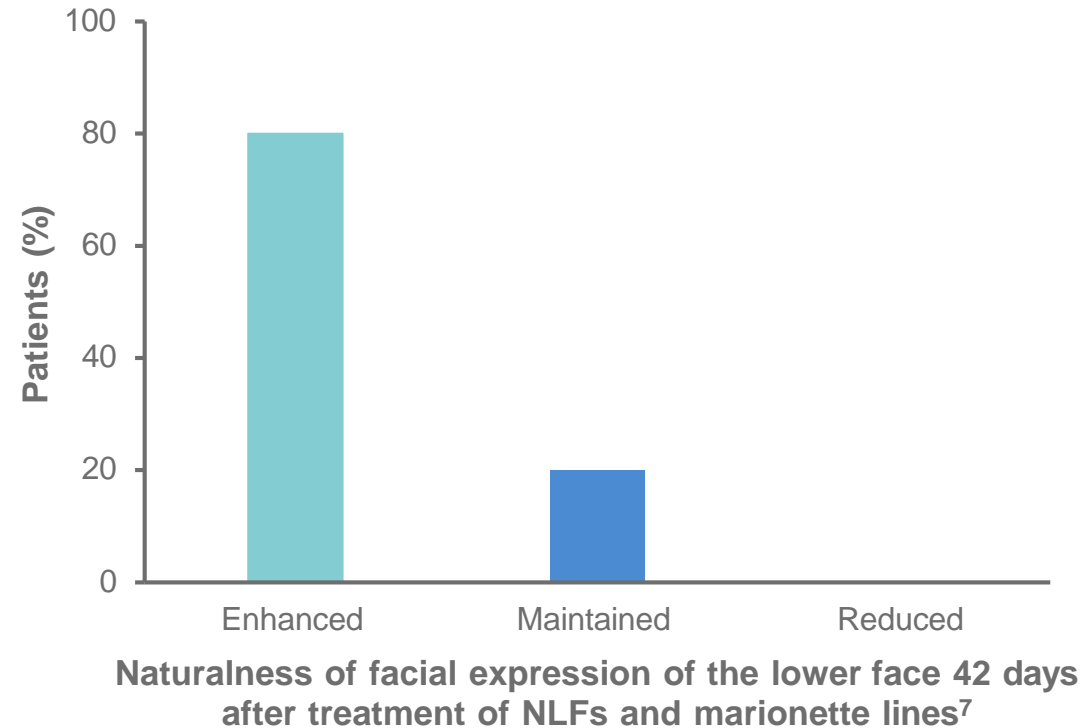
After treatment with Restylane Defyne, the amount of strain exerted is reduced, helping to **restore a youthful strain profile⁶**

Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸

Supporting information:*

After treatment with Restylane Defyne, the **naturalness of dynamic expression**, as assessed by investigators, was **enhanced or maintained** in all patients (100%)⁷



NLF, nasolabial fold; OBT, Optimal Balance Technology.

*Two-dimensional video assessment by treating investigator at Day 42 compared with baseline, in which the patients displayed facial expressions and emotions and undertook reading exercises. Pooled results for patients receiving Restylane Refyne and Restylane Defyne.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826-832;

3. Nikolis A *et al. Aesthet Surg J Open Forum* 2020;2(1):ojaa005; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5-S8;

5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982-986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e-305e;

7. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738-746; 8. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600-1606.

Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸

Supporting information:*

Across all examined expressions, **>70%** of patients achieved **improvements in naturalness** after treatment with Restylane Defyne⁷



OBT, Optimal Balance Technology.

*Naturalness of expression in the lower face at full contraction based on two-dimensional photo assessment by treating investigator at Day 42 compared with baseline. Pooled results for patients receiving Restylane Refyne and Restylane Defyne.

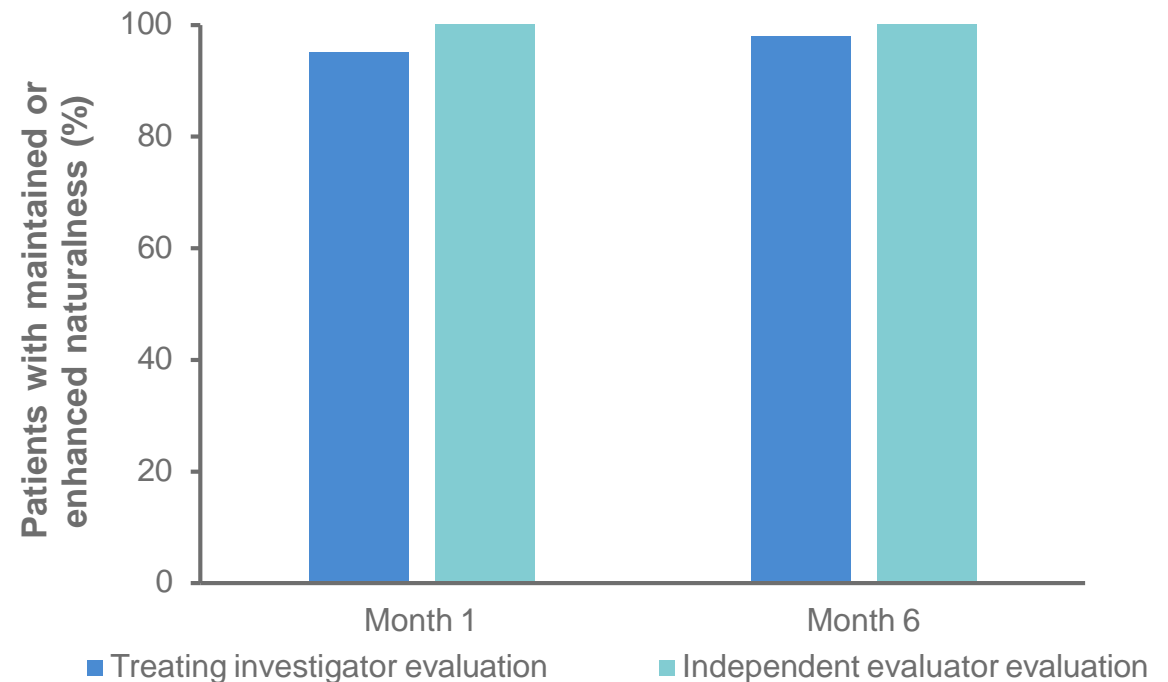
1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826-832;
3. Nikolis A *et al. Aesthet Surg J Open Forum* 2020;2(1):ojaa005; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5-S8;
5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982-986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e-305e;
7. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738-746; 8. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600-1606.

Maintain dynamic expression with flexible OBT gel technology

Distributed tissue integration to provide mobility for true expression¹⁻⁸

Supporting information:*

6 months after treatment with Restylane Defyne, **≥95%** of patients had **maintained or enhanced naturalness** of their facial expressions⁸



NLF, nasolabial fold; OBT, Optimal Balance Technology.

*Pooled results for both Restylane Refyne and Restylane Defyne 12 months after treatment of NLFs and marionette lines.

1. Data on file (MA-43049); 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826-832;

3. Nikolis A *et al. Aesthet Surg J Open Forum* 2020;2(1):ojaa005; 4. Segura S *et al. J Drugs Dermatol* 2012;11(1 Suppl):S5-S8;

5. Lundgren B *et al. J Drugs Dermatol* 2018;17(9):982-986; 6. Percec I *et al. Plast Reconstr Surg* 2020;145(2):295e-305e;

7. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738-746; 8. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600-1606.

Favorable safety profile based on unrivalled experience

*Well tolerated with a safety
profile built on robust
clinical data¹*

Supporting information:

Restylane Defyne* has a **favorable safety profile**, established in 11 clinical investigations encompassing over 1,000 patients¹



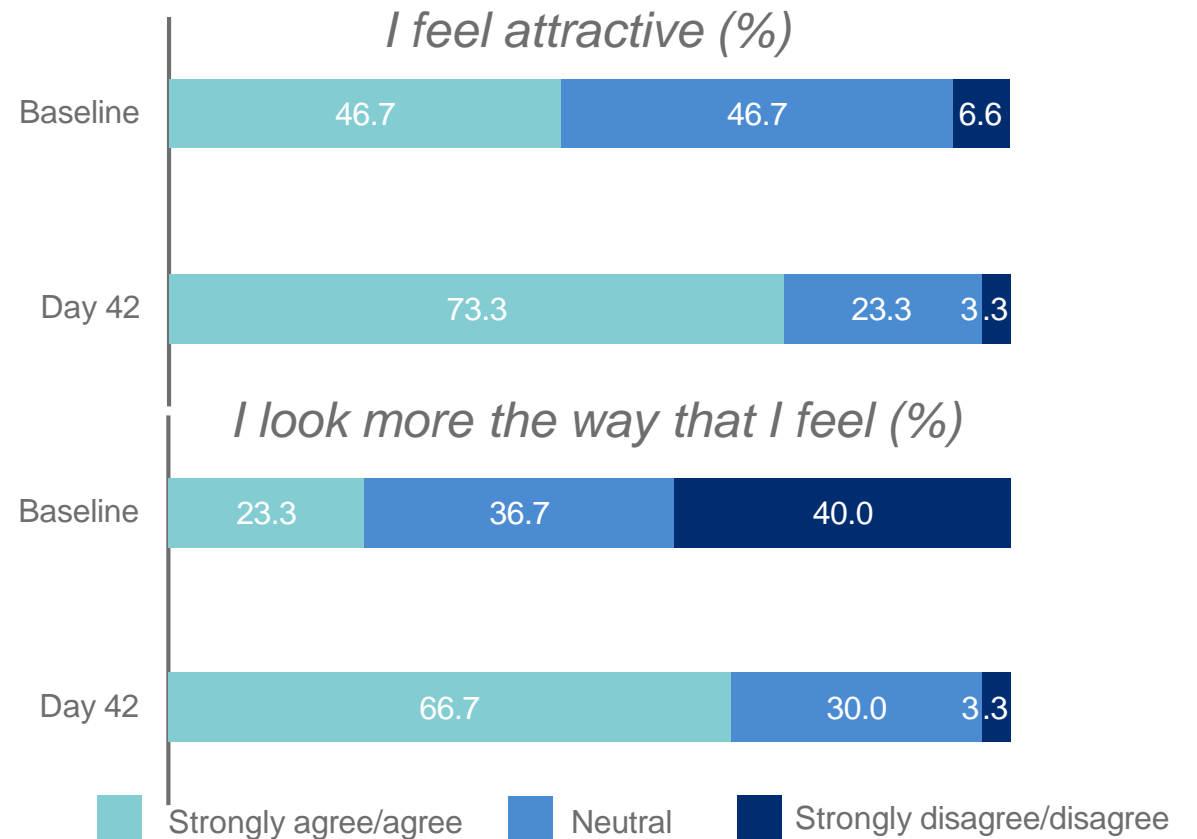
*Or equivalent product without lidocaine.
1. Data on file (MA-22124).

Results that come recommended

Natural and lasting results supported by high patient and HCP satisfaction¹⁻⁴

Supporting information:*

After treatment of NLFs and marionette lines, most patients **agreed or strongly agreed** with positive statements regarding their appearance¹



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 42 days after treatment. Optional touch-up treatment at 2 weeks.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

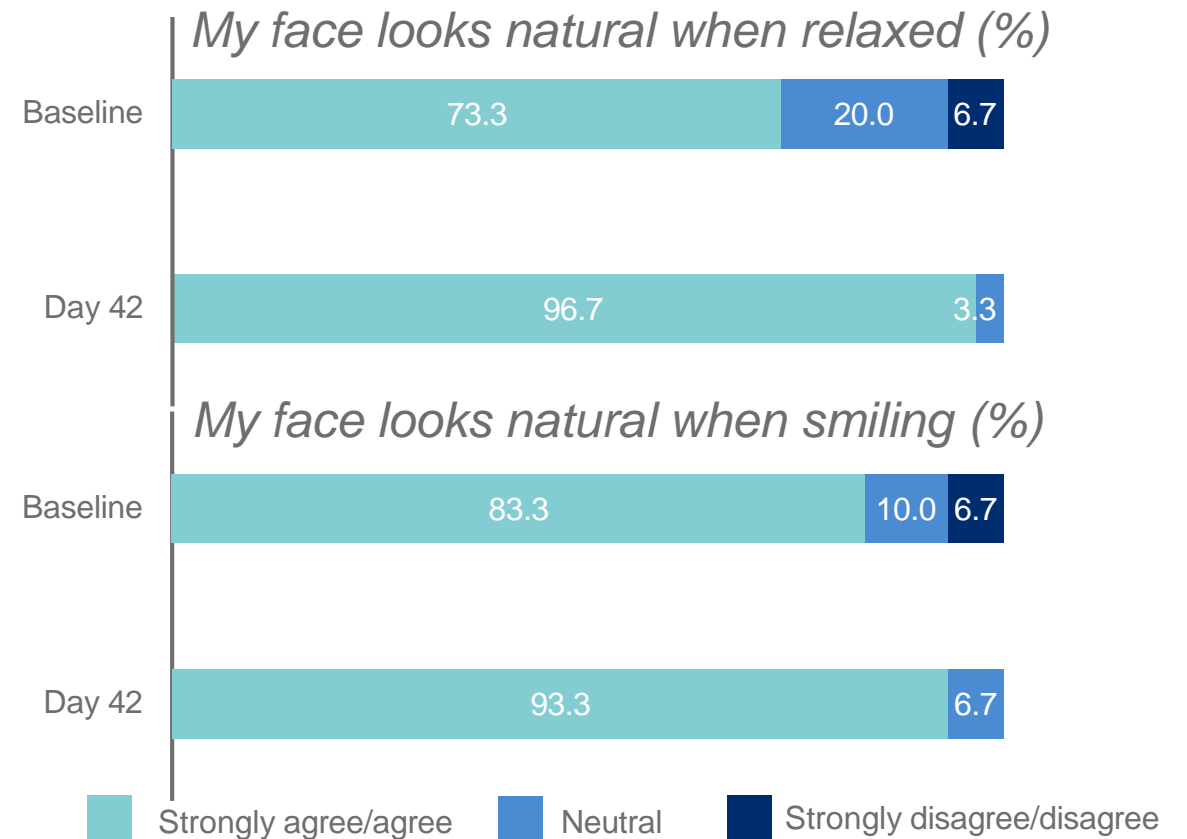
3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

Results that come recommended

Natural and lasting results supported by high patient and HCP satisfaction¹⁻⁴

Supporting information:*

After treatment of NLFs and marionette lines, most patients **agreed or strongly agreed** with statements about the naturalness of their expressions¹



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 42 days after treatment. Optional touch-up treatment at 2 weeks.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

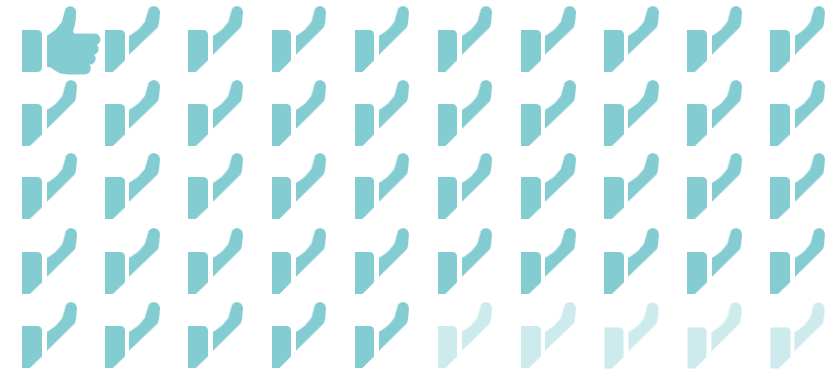
Results that come recommended

Natural and lasting results supported by high patient and HCP satisfaction¹⁻⁴

Supporting information:

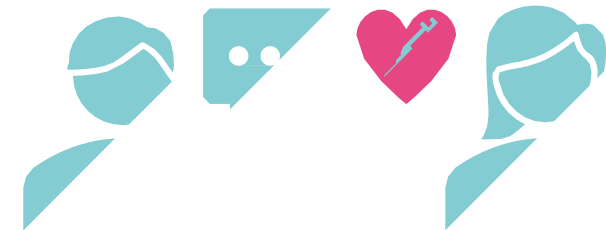
≥95%

were **satisfied** with their treatment results^{2*} and would have treatment again^{3†}



95%

would **recommend** the treatment to a friend^{4*}



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 1 month after treatment of NLFs and marionette lines.

†Pooled results for both Restylane Refyne and Restylane Defyne 12 months after treatment of NLFs and marionette lines.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

Results that come recommended

Natural and lasting results supported by high patient and HCP satisfaction¹⁻⁴

Supporting information:*

83%

of patients achieved a **younger-looking** appearance^{1†}

87%

of patients displayed **enhanced attractiveness**^{1†}

90%

of patients **liked** their overall appearance¹



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 42 days after treatment of NLFs and marionette lines. Optional touch-up treatment at 2 weeks.

†Treating-investigator-reported scores. Perception of attractiveness and age of lower face in motion at Day 42 compared with baseline.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

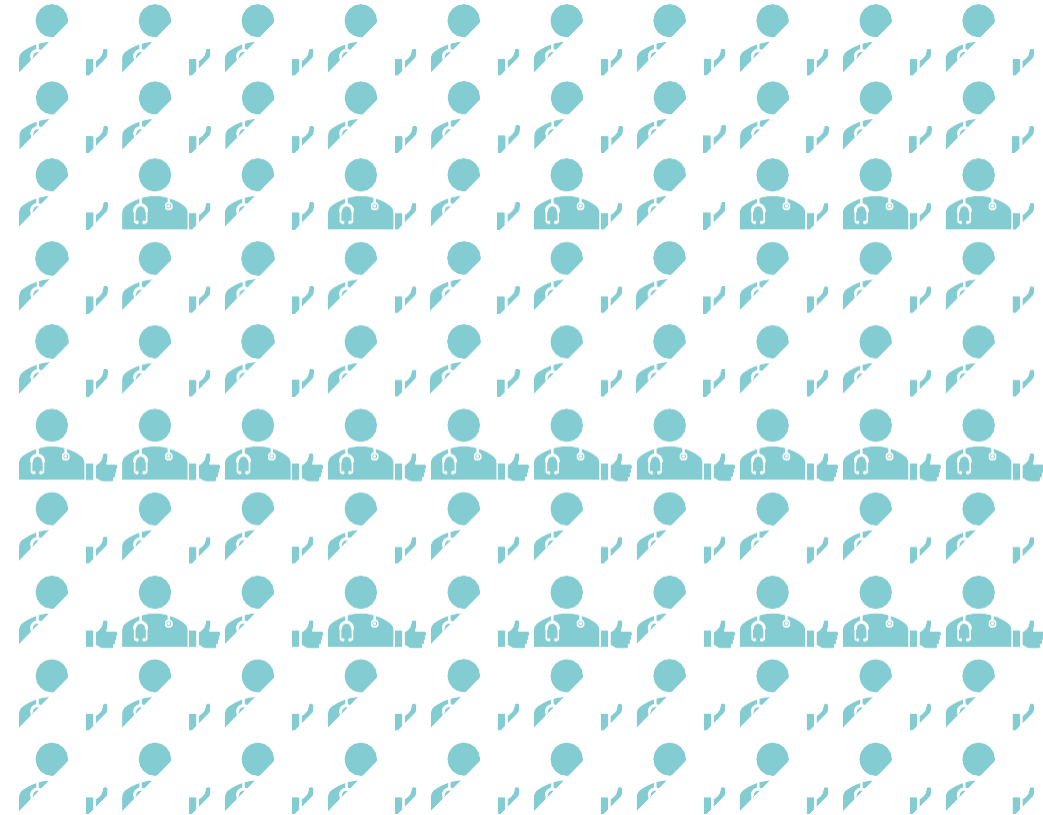
GALDERMA

Results that come recommended

Natural and lasting results supported by high patient and HCP satisfaction¹⁻⁴

Supporting information:*

100% of treating investigators were **satisfied** with the aesthetic outcome of all patients²



HCP, healthcare professional; NLF, nasolabial fold.

*Pooled results for both Restylane Refyne and Restylane Defyne 1 month after treatment of NLFs and marionette lines.

1. Solish N *et al. J Cosmet Dermatol* 2019;18(3):738–746; 2. Philipp-Dormston WG *et al. Dermatol Surg* 2018;44(6):826–832;

3. Philipp-Dormston WG *et al. J Cosmet Dermatol* 2020;19(7):1600–1606; 4. Philipp-Dormston WG *et al. Poster presented at AMWC 2017.*

Restylane®

KYSSE™

RESTYLANE® KYSSE™
FOR SOFT, FULL, AND
NATURAL-LOOKING LIPS

August 2020



 GALDERMA

Restylane Kysse Core Claims

Shaping and natural enhancement with lasting results

*Enhanced volume achieved with significantly less product than Juvéderm® Volbella™
Durable results that last up to 12 months*

Balanced volume for a natural look and feel

*Soft and flexible OBT™ gel technology for natural-feeling softness
Improved lip texture*

Favorable safety profile based on clinical experience

Minimal swelling and nodule formation

Proven satisfaction for recommendation and repetition

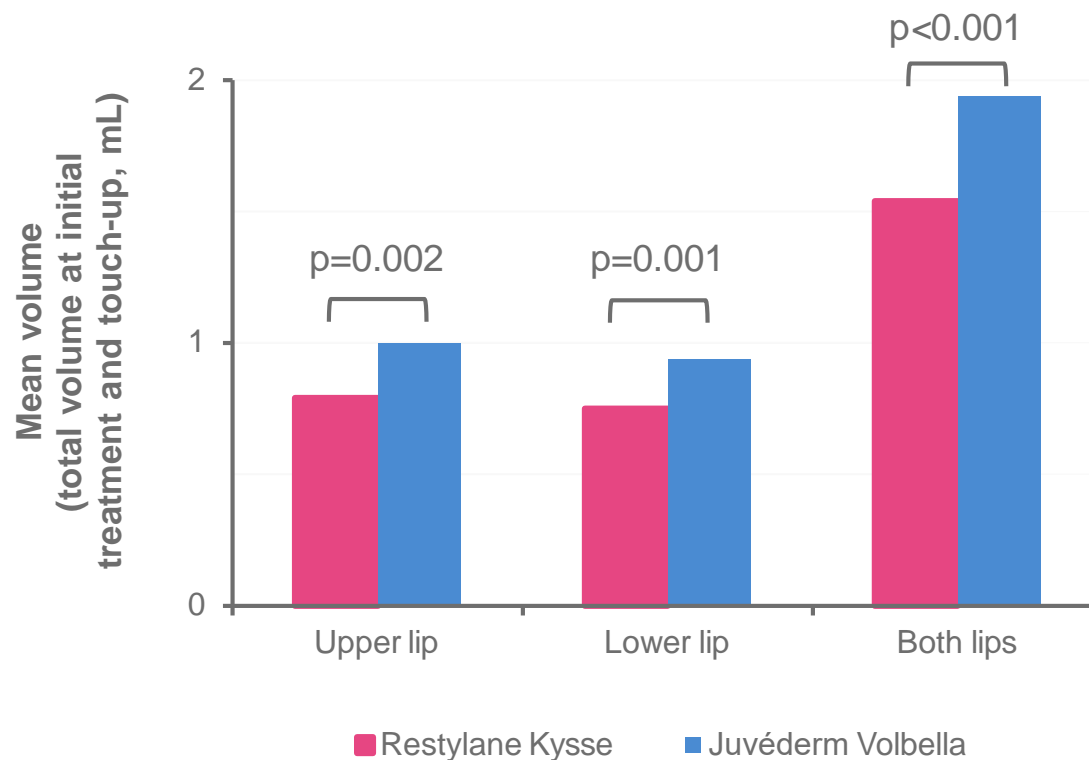
*Patient satisfaction maintained for up to 12 months
High partner satisfaction with lip enhancement*

Shaping and natural enhancement with lasting results

Enhanced volume achieved with significantly less product than Juvéderm Volbella^{1,2}

Supporting information:

A lower amount of Restylane Kysse was **required to achieve a ≥ 1 -grade improvement** on the Lip Fullness Grading Scale in both lips following treatment, compared with Juvéderm Volbella^{1*}



*Statistical comparison was carried out using a Student's t-test.

1. Hilton S *et al. Dermatol Surg* 2018;44(2):261–269; 2. Weiss R *et al. Poster presented at IMC PS 2024.*

Shaping and natural enhancement with lasting results

Enhanced volume achieved with significantly less product than Juvéderm Volbella^{1,2}

Supporting information:

A Phase 3 study comparing Restylane Kysse with a control treatment found non-inferiority of **lip fullness augmentation** at 8 weeks after the last treatment:^{2*}

	Mean volume in the lips ²
Restylane Kysse	1.82 mL
Control	2.24 mL

~20%

lower volume of Restylane Kysse used than of control treatment for comparable fullness^{2*}

*Post hoc analysis data on the total amount of product needed to show a ≥1-grade improvement in lip fullness (Medicis Lip Fullness Scale, 8 weeks after treatment).

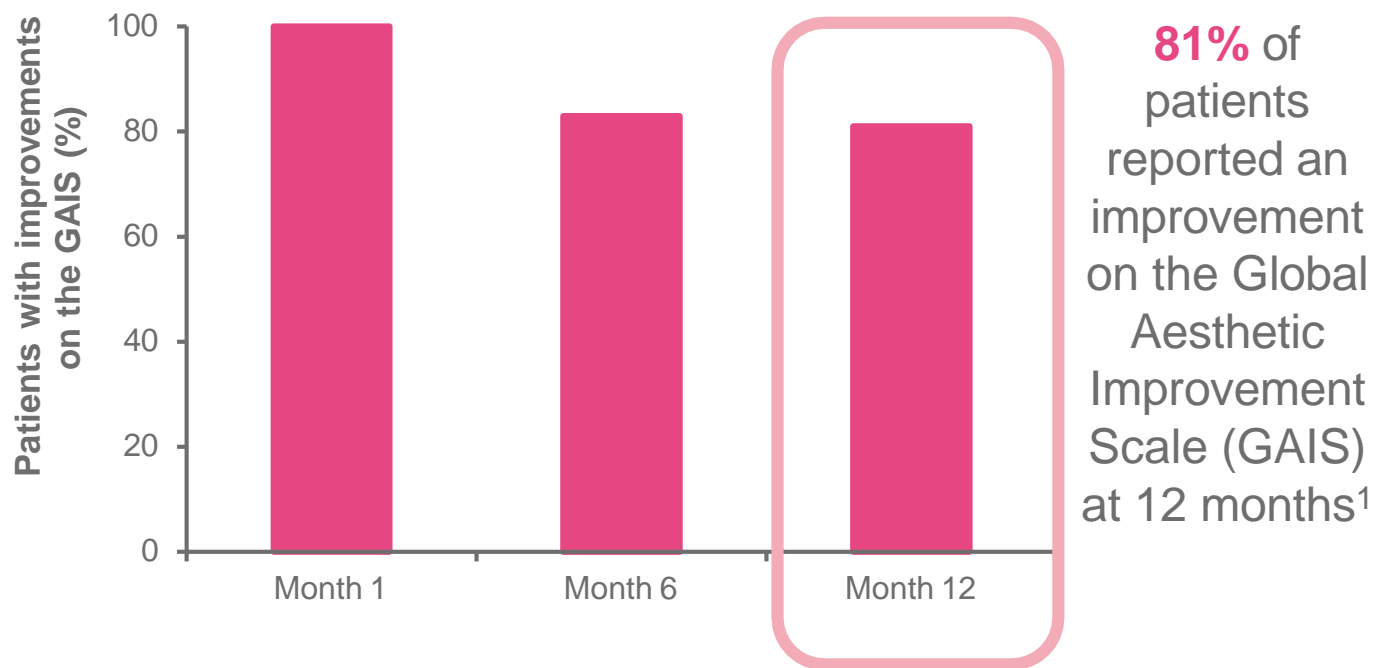
1. Hilton S et al. *Dermatol Surg* 2018;44(2):261–269; 2. Weiss R et al. Poster presented at IMC PS 2024.

Shaping and natural enhancement with lasting results

Durable results that last up to 12 months¹

Supporting information:

Restylane Kysse provides results that last up to 12 months, as assessed by both patients and blinded evaluators¹



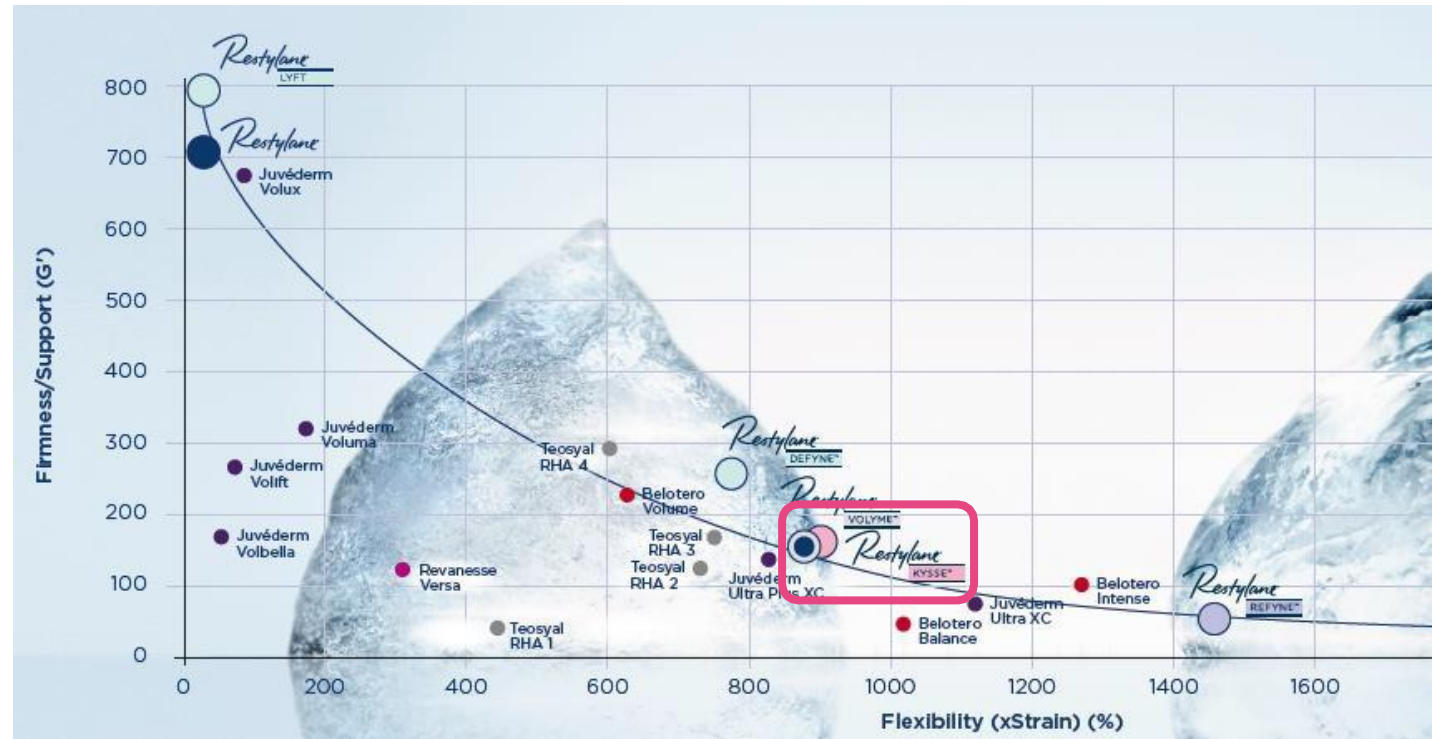
71% of blinded evaluators described an improvement on the GAIS at the same time point¹

Balanced volume for a natural look and feel

Soft and flexible OBT gel technology for natural-feeling softness¹⁻³

Supporting information:

Dynamic treatment areas, such as the lips, require support while maintaining animation



The soft and flexible OBT gel makes Restylane Kysse ideally suited to enhance the volume and shape of the lips^{1,2}

OBT, Optimum Balance Technology.

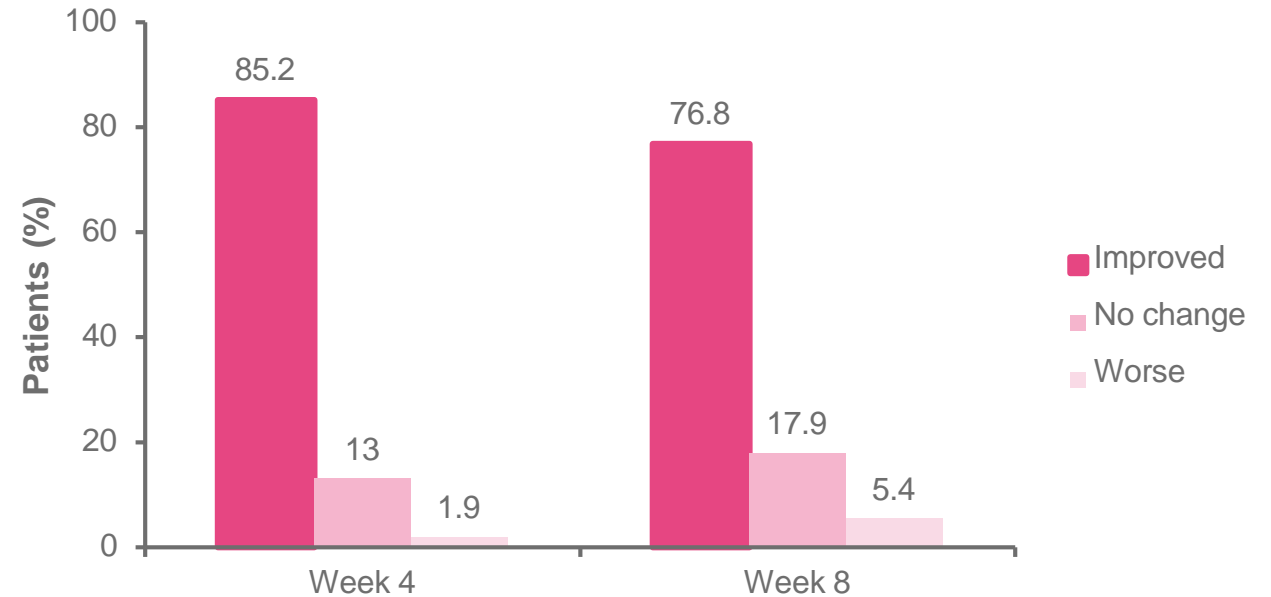
1. Data on file (MA-43049); 2. Restylane Kysse EU IFU. 2020; 3. Hilton S et al. *Dermatol Surg* 2018;44(2):261-269.

Balanced volume for a natural look and feel

Improved lip texture¹

Supporting information:

The majority of patients (76.8%) were assessed to have an improved lip texture 8 weeks after treatment with Restylane Kysse^{1*}



Assessment by independent photographic reviewer at Week 8 found naturalness of facial expressions was maintained in the majority of patients (80.4%)¹

*In a Phase 4 clinical study, 59 patients were treated with either Restylane Kysse in the lips only (n=19) or Restylane Kysse in the lips in combination with either Restylane Refyne™/Restylane Defyne™ for the treatment of facial wrinkles and folds surrounding the lips (n=40).

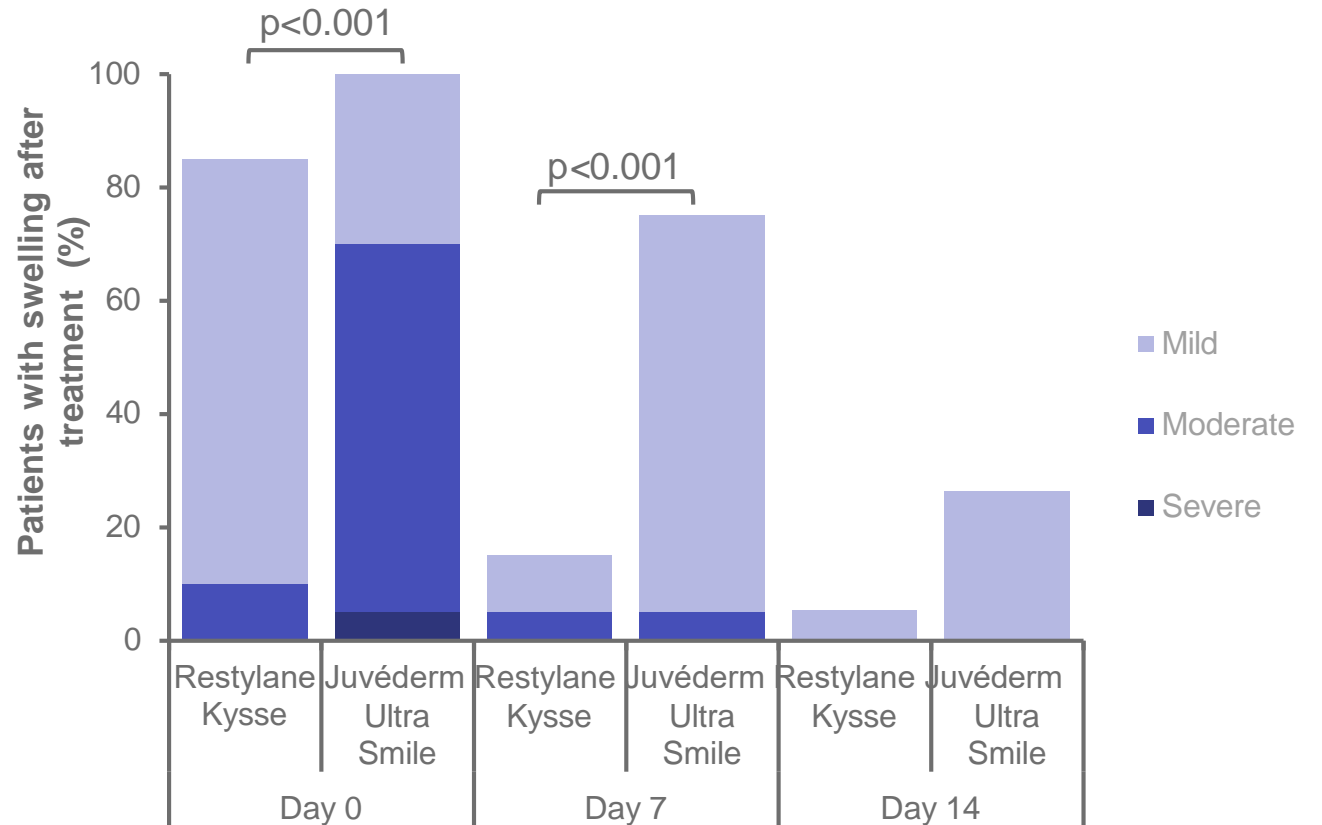
1. Data on file (MA-42436).

Favorable safety profile based on clinical experience

Minimal swelling and nodule formation¹⁻³

Supporting information:

Significantly less swelling was observed after treatment with Restylane Kysse compared with Juvéderm Ultra[™] Smile^{3*}



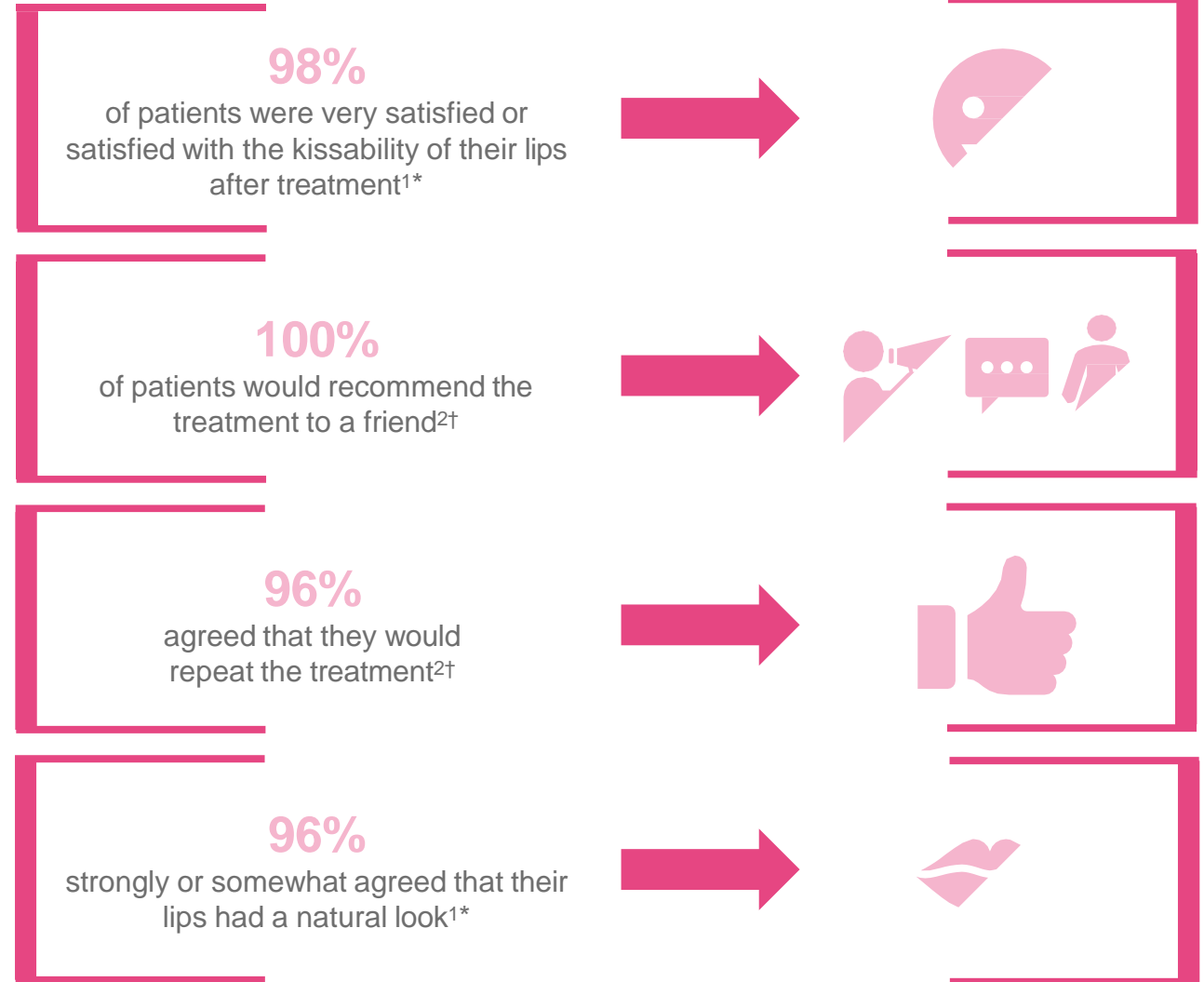
*Swelling was assessed by a blinded evaluator after a single lip treatment with either Restylane Kysse or Juvéderm Ultra Smile and at 1, 3, 7, and 14 days post-treatment. Statistical comparison was carried out using an exact Wilcoxon rank-sum test.

1. Data on file (MA-22124); 2. Hilton S *et al. Dermatol Surg* 2018;44(2):261–269; 3. Data on file (MA-22124); 4. Galderma

Proven satisfaction for recommendation and repetition

Patient satisfaction maintained for up to 12 months^{1,2}

Supporting information:



*Percentage of patients who were satisfied with questionnaire items at 8 weeks following their last treatment.

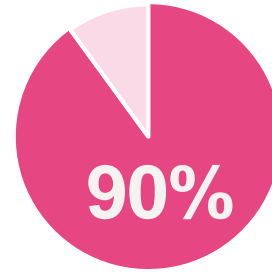
†Percentage of patients surveyed at 12 months following treatment with Restylane Kysse.

1. Nikolis A *et al.* Poster presented at IMCAS 2020; 2. Hilton S *et al.* *Dermatol Surg* 2018;14(5):612-619.

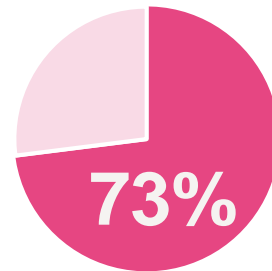
Proven satisfaction for recommendation and repetition

High partner satisfaction with lip enhancement¹

Supporting information:



of partners were satisfied or very satisfied with the appearance of their partners' lips^{1*}



of partners agreed that their partners' lips had a more kissable and natural feel^{1*}

*Percentage of partners who were satisfied with questionnaire items at 8 weeks following the patients' last treatment.

1. Nikolis A *et al.* Poster presented at IMCAS 2020.

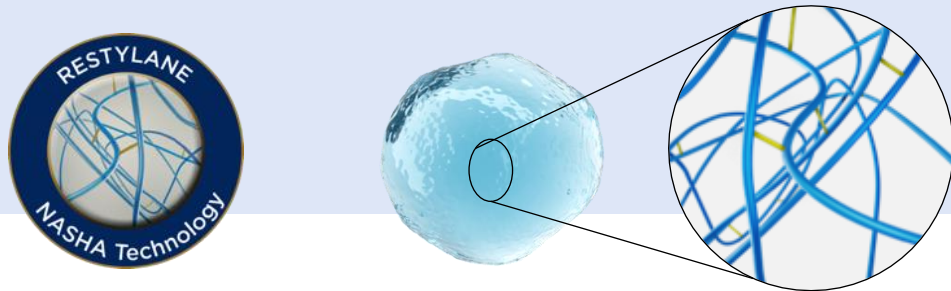
Restylane Gel Technology

GAIN

2 Unique and Complementary Technologies

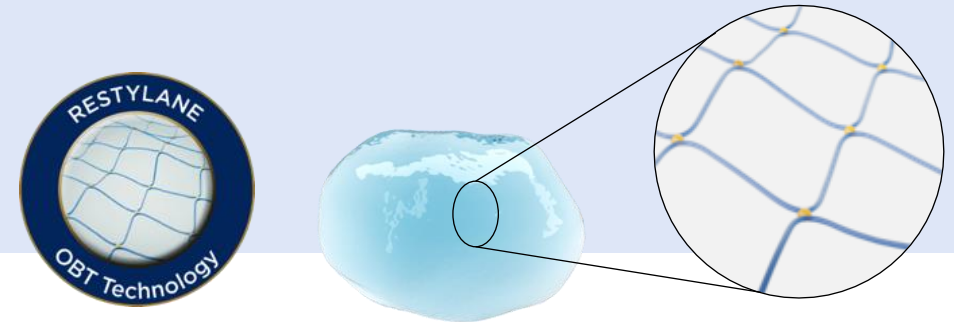
NASHA

- Incorporates a limited number of synthetic cross-links
- Preserves natural cross-links and entanglements of HA network
- Results in a minimally modified version of natural HA (<1% BDDE)
- Higher G' : firm gels for lifting and projection



OBT



- Fewer natural entanglements and a higher degree of chemical cross-linking than NASHA
- Multiple degrees of cross-linking yield gels with different levels of resistance, from very soft to firm
- Cross-linking coupled with controlled particle sizing results in distinct gel textures with different levels of support
- Lower G' : Softer, more flexible gels for contouring and volumization



BDDE, 1,4-butanediol diglycidyl ether; G' , storage modulus; HA, hyaluronic acid, NASHA, nonanimal stabilized hyaluronic acid. Micheels P, et al. *J Drugs Dermatol.* 2016;15(5):600-606.

Characteristics of NASHA and OBT Fillers

GAIN

	 NASHA	 OBT
Product(s)	Restylane, Restylane Lyft, Restylane Silk	Restylane Refyne, Restylane Defyne, Restylane Volyme, Restylane Kysse, Restylane Fynesse*
Manufacturing process	Stabilization: natural entanglements and minimal synthetic cross-linking	Different cross-linking levels
MoD (%)	1	6–8
Particle size	Specifically sized particles (differs by SKU)	Specifically sized particles (differs by SKU)
HA concentration, mg/mL	20	20
Firmness (G') range, Pa	Firm 500–800	Soft to moderately firm 70–300

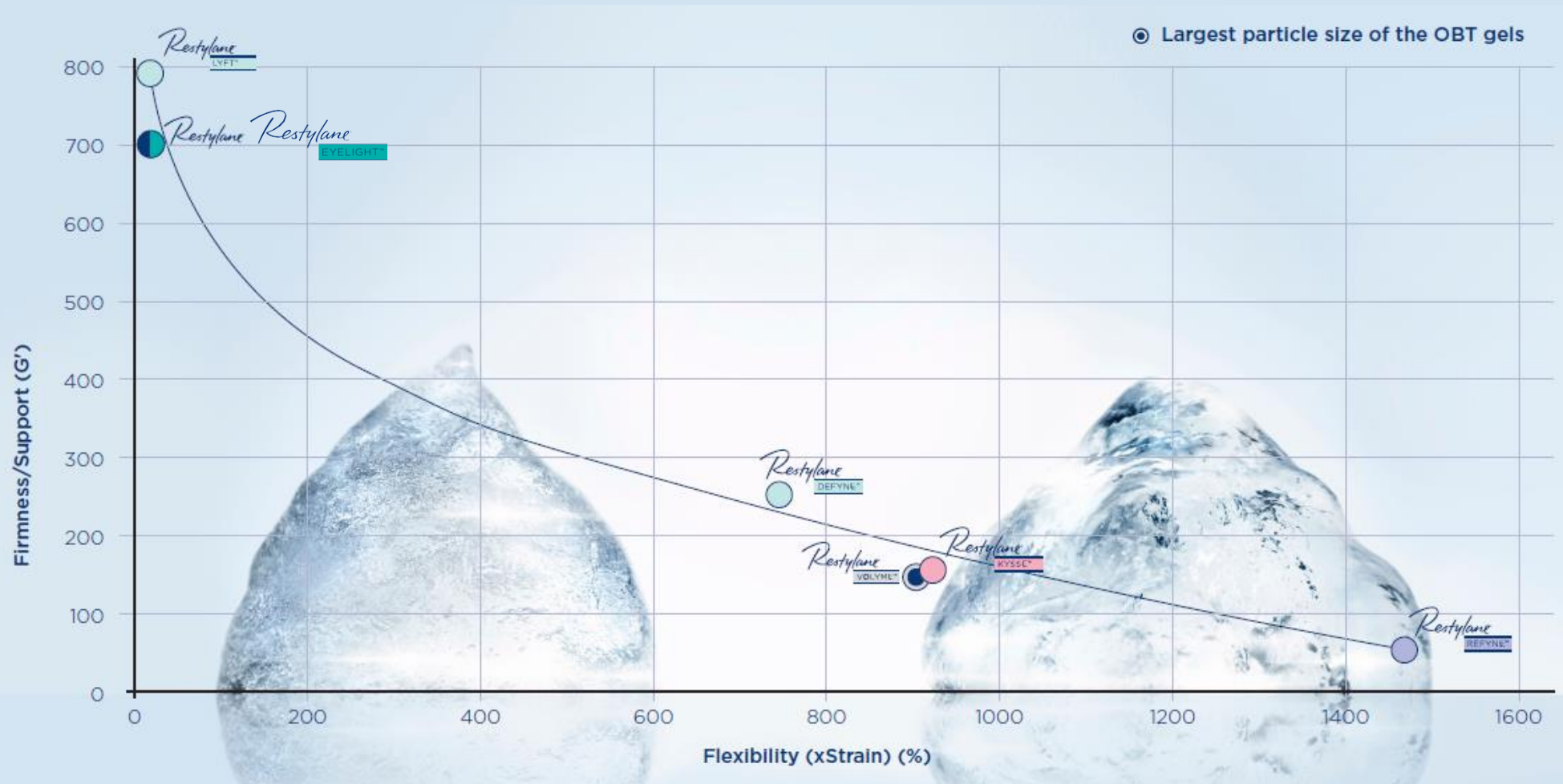
*Product being phased out.

G', storage modulus; HA, hyaluronic acid, MoD, degree of modification; NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology; SKU, stock keeping unit.

Data on file. MA-34483 Study Report v5.0. Fort Worth, TX: Galderma Laboratories, L.P. 2021.

The Restylane Range – From Firm to Flexible¹

GAIN



The firmer NASHA gels (lower xStrain and higher G') provide more support for lifting and precision and the softer OBT gels are more flexible (high xStrain and lower G')

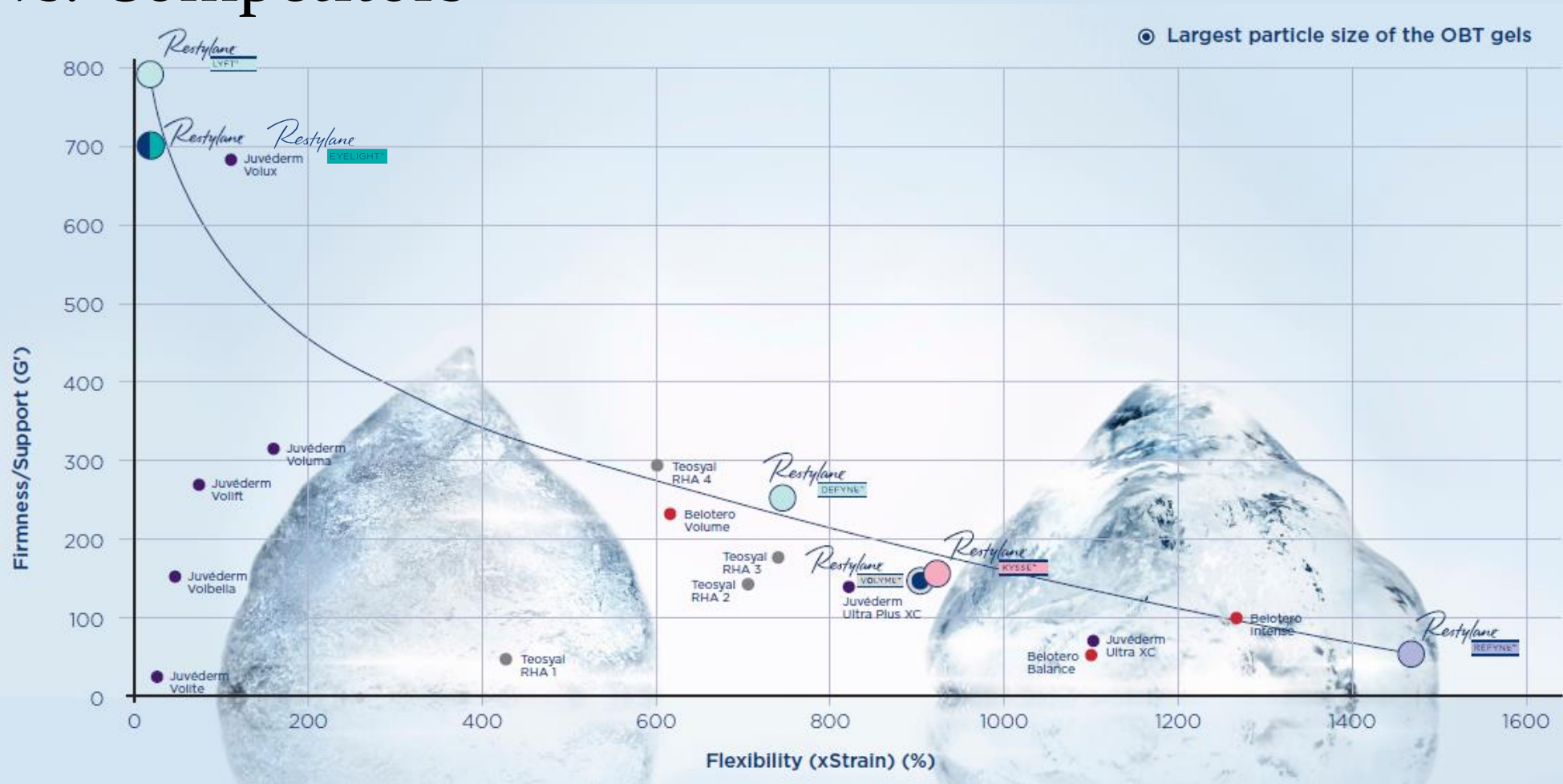
NASHA gels include Restylane Lyft, Restylane, and Restylane EYLIGHT. OBT gels include Restylane Defyne, Restylane Volyme, Restylane Kysse, and Restylane Refyne.

HA, hyaluronic acid; G', storage modulus; NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

1. Data on file (MA-43049).

The Restylane Range – From Firm to Flexible¹ vs. Competitors

GAIN



The firmer NASHA gels (lower xStrain and higher G') provide more support for lifting and precision and the softer OBT gels are more flexible (high xStrain and lower G')

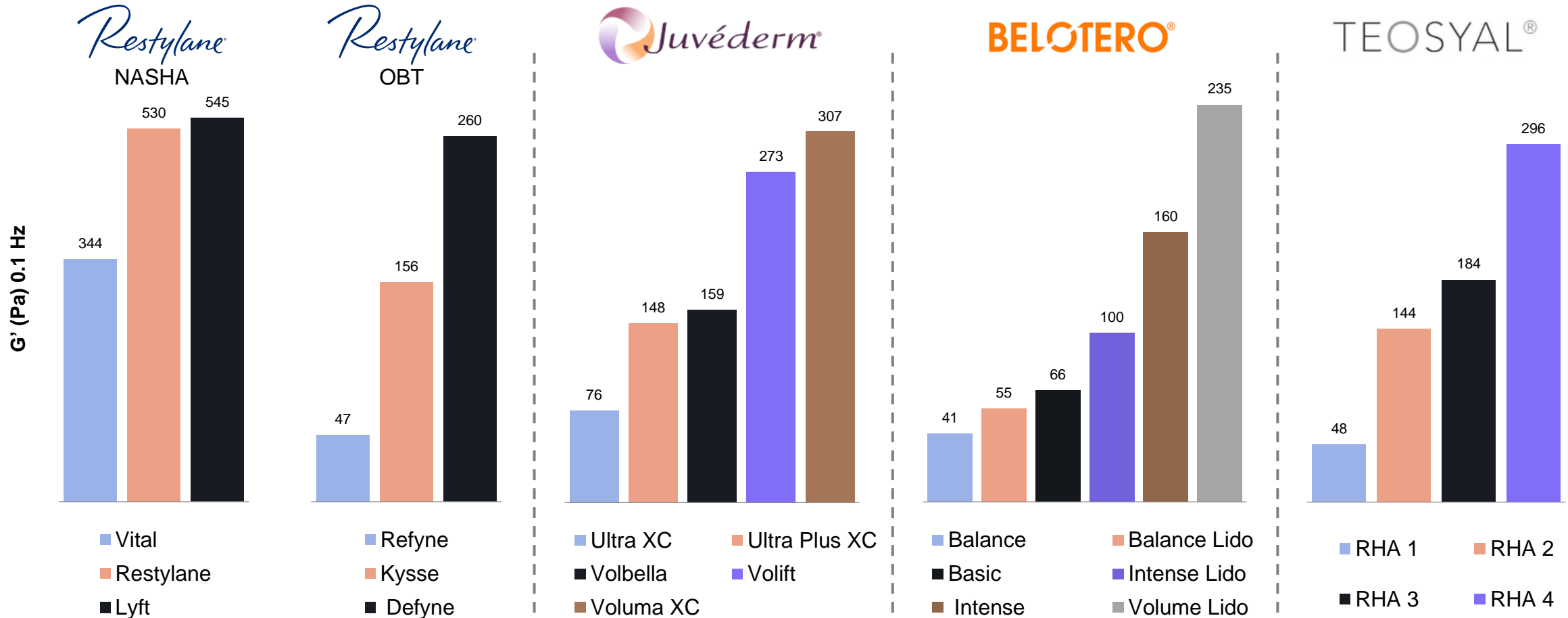
NASHA gels include Restylane Lyft, Restylane, and Restylane Eyelight. OBT gels include Restylane Defyne, Restylane Volyme, Restylane Kysse, and Restylane Refyne.

HA, hyaluronic acid; G', storage modulus; NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

1. Data on file (MA-43049).

Lifting Capacity of Commonly Used HA Fillers^{1,2}

GAIN



G', storage modulus; HA, hyaluronic acid; NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

1. Micheels P, et al. *J Drugs Dermatol.* 2016 ;15(5):600-606. 2. Data on file - MA-43049

GALDERMA

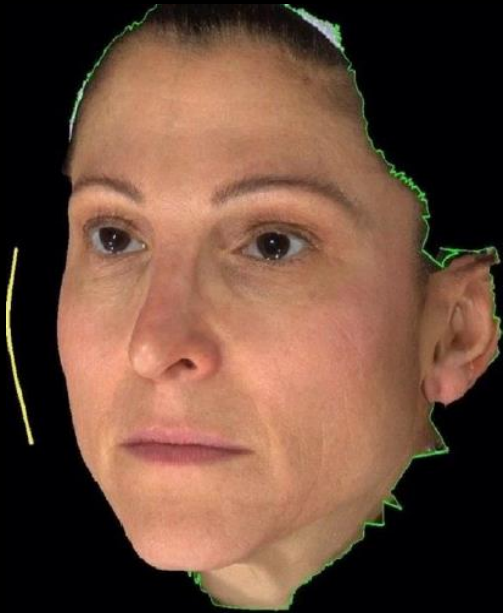
EST. 1981



Tissue Covarage

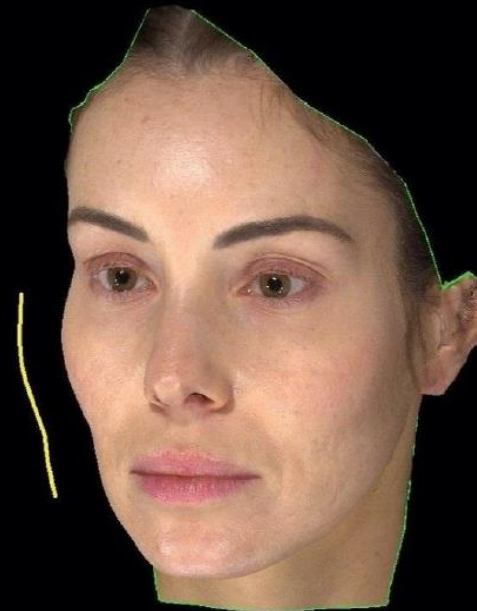
GAIN

Patients with different tissue coverages require fillers with different biomechanical characteristics¹



Thick tissue coverage

Patients with thick tissue coverage require fillers with enough lifting capacity (high G') to sufficiently correct their volume loss¹



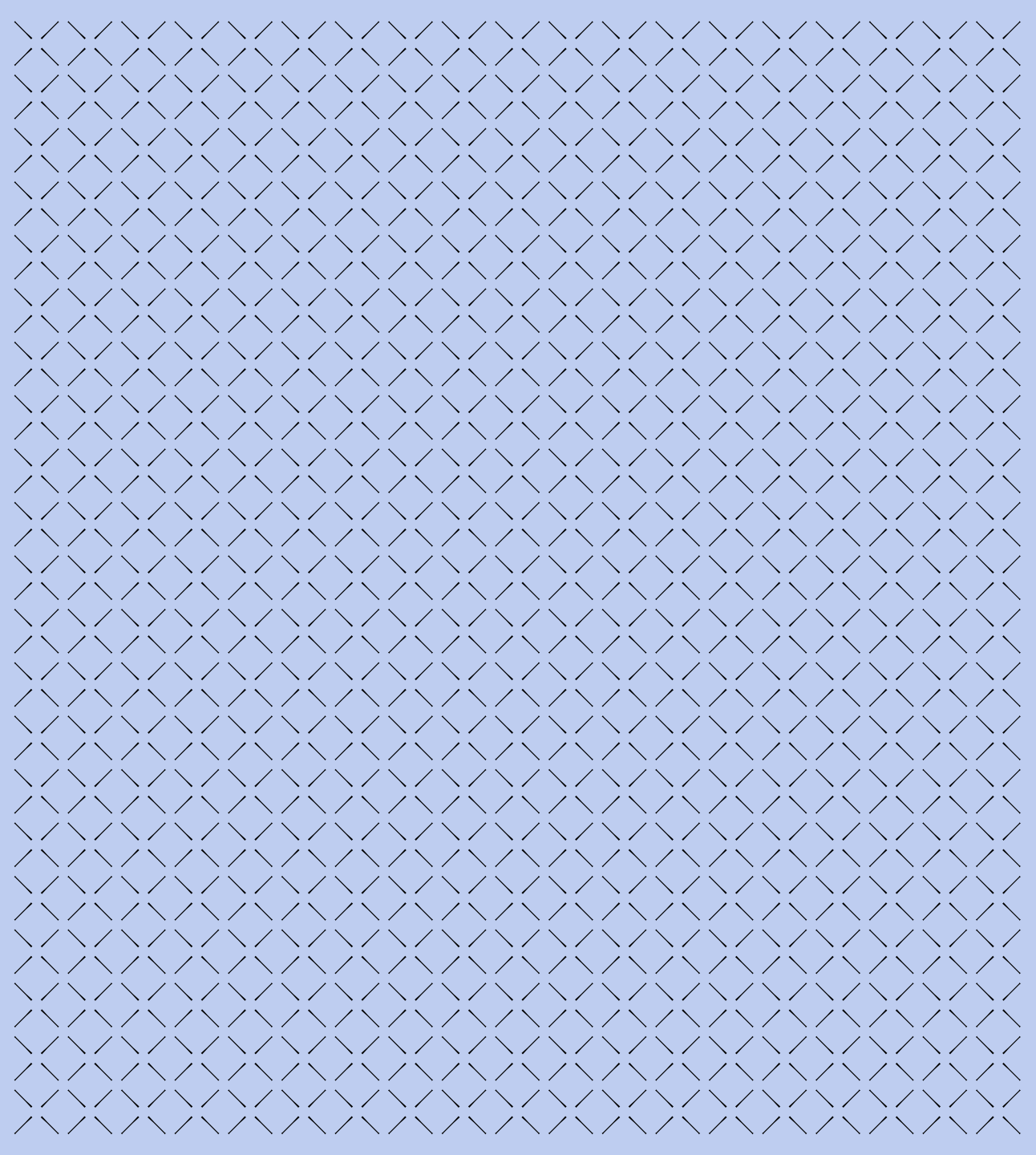
Thin tissue coverage

Patients with thin tissue coverage require dermal fillers with a lower lifting capacity (low G') because a greater lifting capacity would create visible contours and irregularities¹

G' , storage modulus.

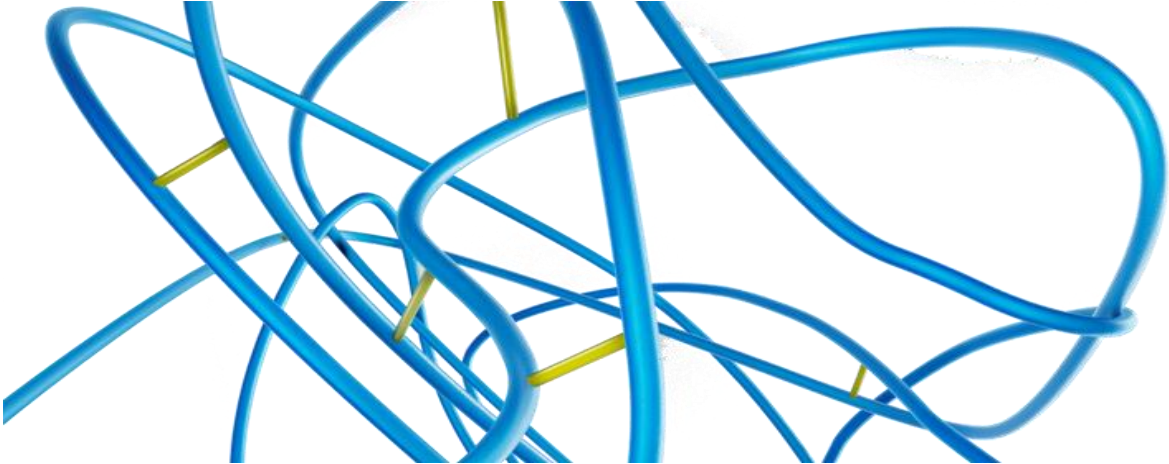
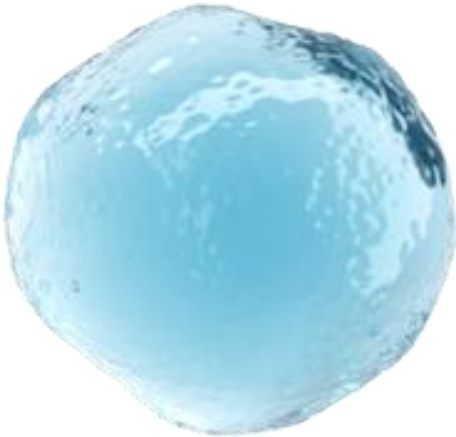
1. Nikolis A et al. *Aesthet Surg J Open Forum*. 2020;2(1):oja005

RESTYLANE[®]
SKINBOOSTERS[™]



Restylane SKINBOOSTERS™ — the first stabilized HA-based injection for improving skin texture¹

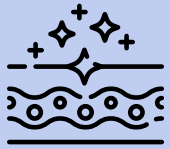
NASHA™ uses the natural entanglement of HA strands for cross-linking to stabilize HA



HA, hyaluronic acid.
1. Galderma MA-33110_HD.
2. Edsman K, et al. Dermatol Surg 2012;38:1170–1179.

Why should I use Restylane® SKINBOOSTERS™?1

GAIN



To improve skin quality and radiance

As a result of deep hydration and improved elasticity¹⁻³

For long-lasting results (up to 15 months)⁴ and high patient satisfaction⁵



For reliability and safety

NASHA™ technology⁶ and the SmartClick injection system^{7,8}

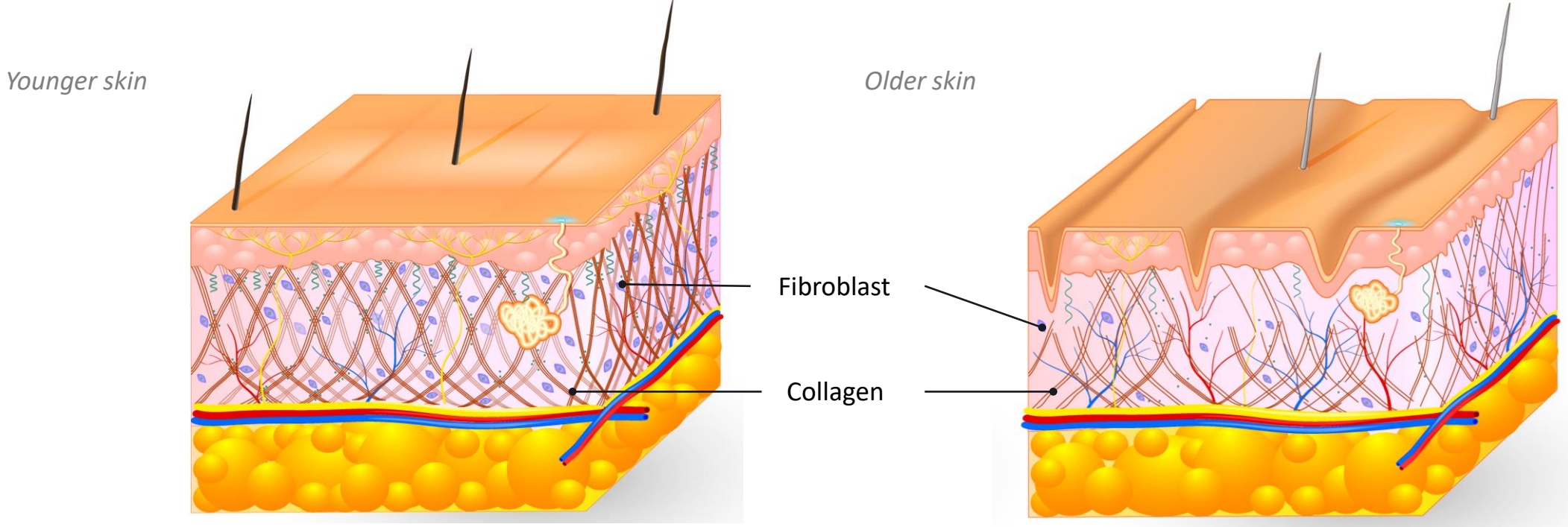
Over 16 years' clinical experience⁹

1. Nikolis A, Enright KM. Clin Cosmet Investig Dermatol 2018;11:467-475.
2. Williams S, et al. J Cosmet Dermatol 2009;8(3):216-225.
3. Gubanova E, et al. J Drugs Dermatol 2015; 14:288-295.
4. Wu Y, et al. J Cosmet Dermatol 2020;19:1627-1635.
5. Lee BM et al. Arch Plast Surg 2015;42(3):282-287.

6. Edsman K, et al. Dermatol Surg 2012;38:1170-1179.
7. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01.
8. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.
9. Galderma data on file (MA-33110).

GALDERMA

Stretched fibroblasts are critical for normal balanced production of collagen¹



Normal collagen production

Stretched fibroblasts are supported by healthy collagen fibres¹

Fragmentation of dermal collagen

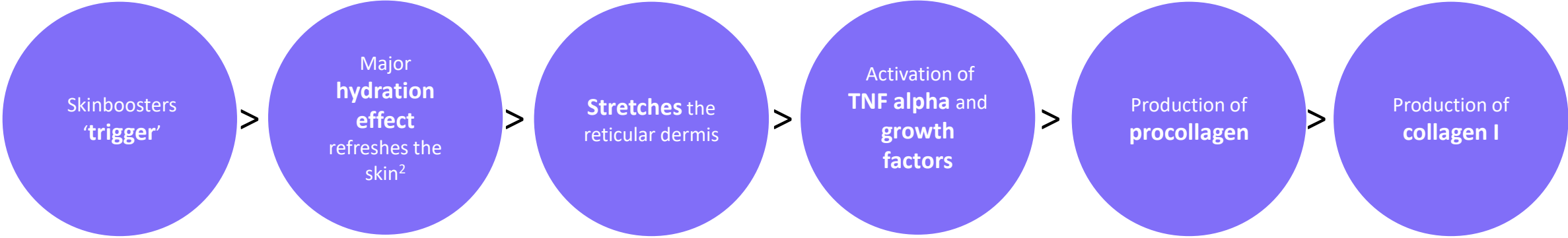
Fibroblasts collapse, and produce less collagen¹

Images: Designua. Aging Skin [Image ID 1687655]. Vectorstock: <https://www.vectorstock.com/royalty-free-vector/collagen-and-elastin-skin-aging-vector-1687655?refer=eml>. Purchased 27 October 2021.

1. Fisher G, et al. Arch Dermatol 2008;144:666–672.

Restylane® SKINBOOSTERS™ VITAL refreshes and rejuvenates the skin

Refreshing effect of Restylane SKINBOOSTERS VITAL injection may partially result from deposition of new collagen^{1,2}



TNF, tumour necrosis factor.
1. Fisher G, et al. Arch Dermatol 2008;144:666–672.
2. Wang F, et al. Arch Dermatol 2007;143:155–163.

GAIN

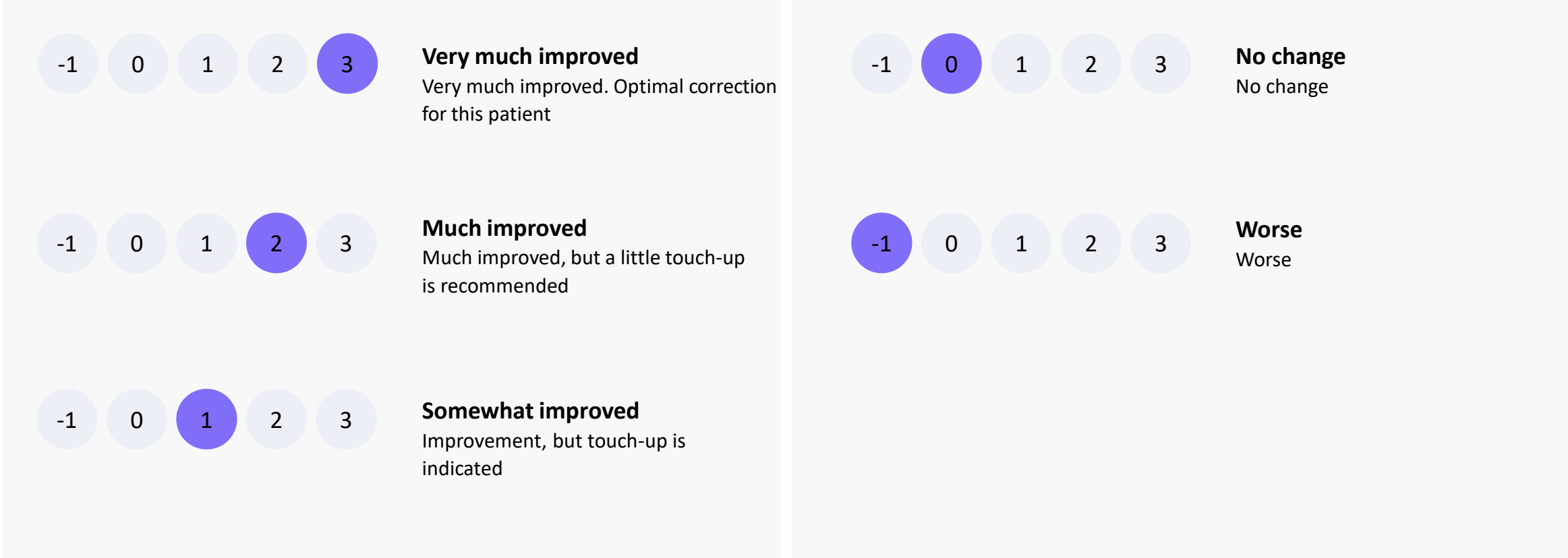
Restylane® SKINBOOSTERS™
have long-lasting results and
high patient satisfaction^{1,2}

1. Wu Y, et al. J Cosmet Dermatol 2020;19:1627–1635.

2. Lee BM et al. Arch Plast Surg 2015;42(3):282–287.

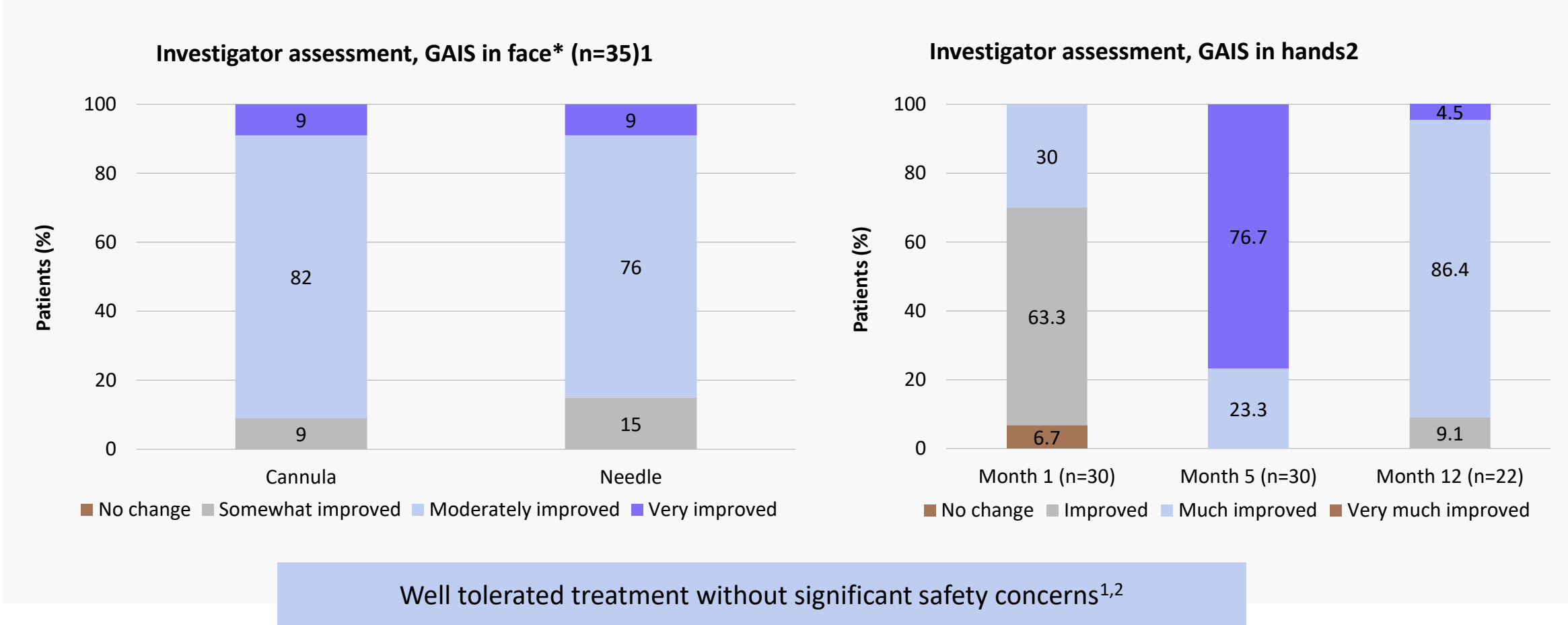
GALDERMA

Assessment tools used in studies — the Global Aesthetic Improvement Scale (GAIS)¹



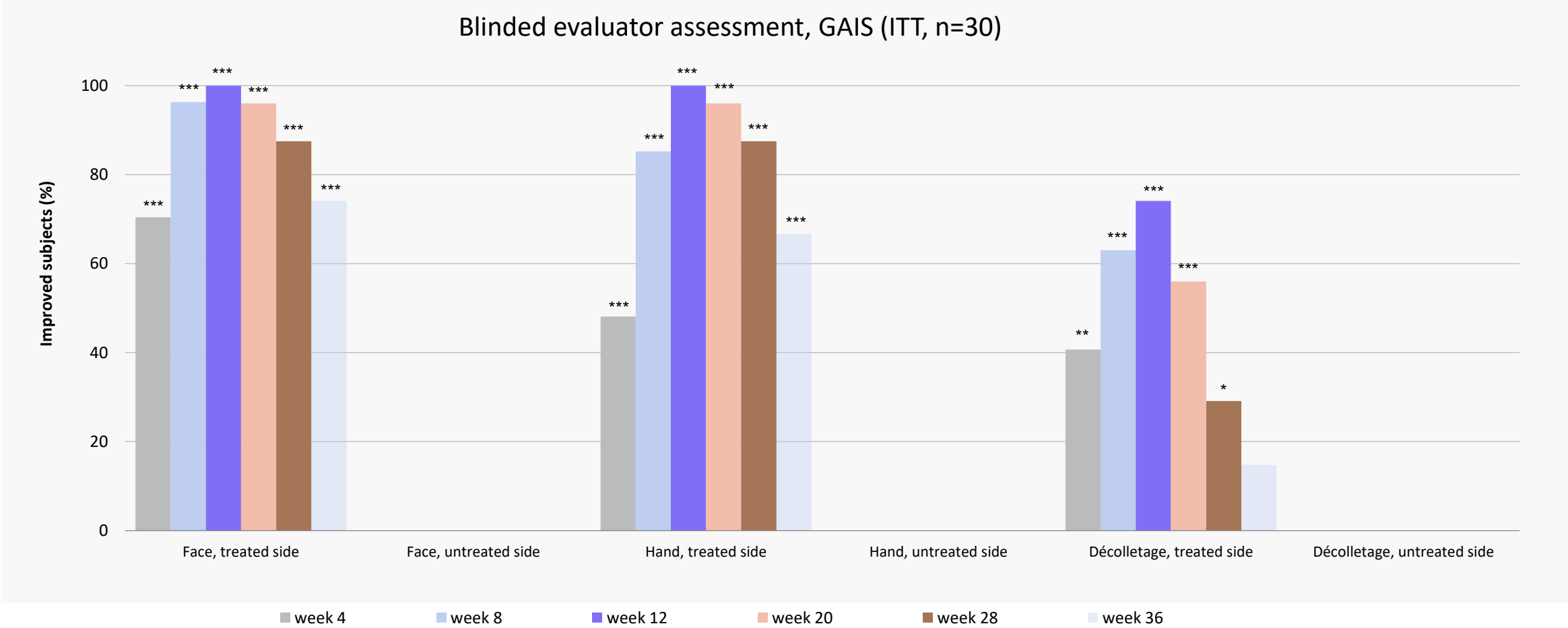
GAIS, Global Aesthetic Improvement Scale.
1. Gubanova E, et al. J Drugs Dermatol 2015;14:288–295.

Longlasting efficacy for face and aging hands 12 months after Restylane® SKINBOOSTERS™ VITAL



*Cheeks and crow's feet. GAIS, Global Aesthetic Improvement Scale.
1. Gubanova E, et al. Injections of stabilized hyaluronic acid with a sharp needle compared with a blunt microcannula for facial skin rejuvenation: 12-month result. Poster IMCAS 2015.
2. Gubanova E, et al. J Drugs Dermatol 2015;14:288-295.

Longlasting efficacy for face, hands and décolletage after Restylane® SKINBOOSTERS™ VITAL LIGHT



*P<0.05; **P<0.01; ***P<0.001 compared to untreated side.
GAIS, Global Aesthetic Improvement Scale.
1. Streker M, et al. J Drugs Dermatol 2013;12:990-994.

Restylane® SKINBOOSTERS™ hydrate the face, neck and hands, and are safe and well tolerated¹



Patients moved to the next hydration level — face went **from dry to moisturized** and hands went very dry to dry



Hydration levels of face, neck and hands **continuously improved** in with each consecutive visit



For the face, **significant results were seen** after only one of the three treatment sessions; for the neck and hands, two treatments were needed to significantly increase hydration levels



TEWL analyses revealed that **Restylane® SKINBOOSTERS™ were safe and well tolerated** and did not damage the stratum corneum's ability to retain moisture or effectively act as a barrier



TEWL scores on the hands indicate that **Restylane® SKINBOOSTERS™ may increase the skin's ability to retain moisture and reverse possible damage** to the skin's water-barrier function because after two and three injections the TEWL scores on the hands significantly decreased to below critical levels

TEWL, transepidermal water loss.

1. Nikolis A, Enright KM. Clin Cosmet Investig Dermatol 2018;11:467–475.



GAIN

The Smartclick™ system
enables precision and control

GALDERMA

GAIN

The Smartclick™ system
enables precision and control

GALDERMA

The Smartclick™ system increases precision and control

Smartclick™ activation button

Comfortable finger grip

Ergonomic thumb rest

Luer lock

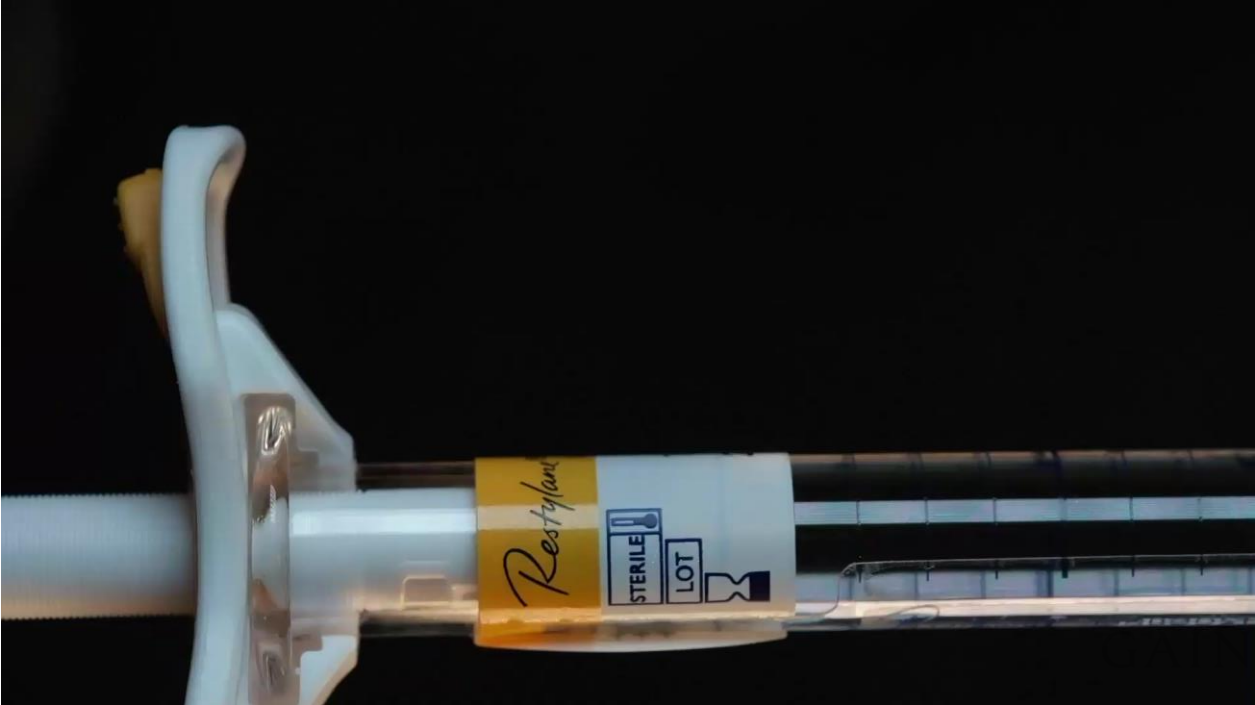
Tamper-proof seal



reddot award 2014
winner

1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01. 2. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

The SmartClick™ audible dosage indicator delivers ~10 µL microdroplets for every click that you hear^{1,2}



1 mL delivers approximately 100 doses^{1,2}

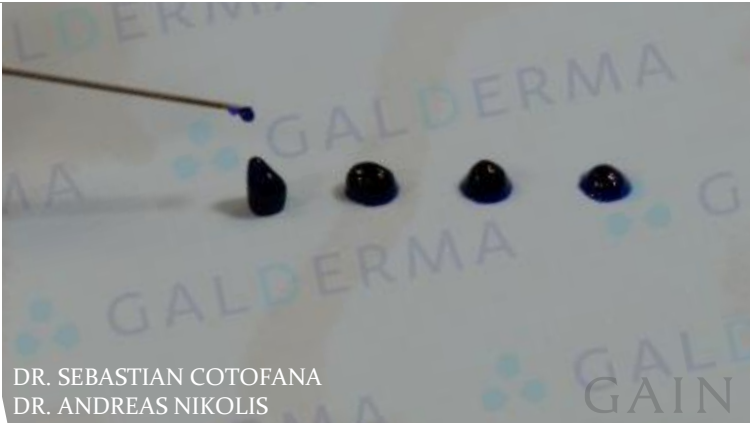


Allows for focus on injection technique, rather than the amount injected

1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01. 2. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

Restylane® Skinboosters™ Vital injection using the SmartClick™ vs not using SmartClick™

The Smartclick™ system increases precision and control





GAIN

Treatment

GALDERMA

Restylane® SKINBOOSTERS™ VITAL and VITAL LIGHT improve skin elasticity in the face, neck and hands

GAIN



Restylane SKINBOOSTERS VITAL LIGHT lidocaine¹

To improve skin elasticity in:

- Lower cheek/jawline
- Face
- Upper neck^{1*}



Restylane SKINBOOSTERS VITAL lidocaine²

To improve skin smoothness, appearance, and elasticity in:

- Lower cheek/jawline
- Face
- Dorsal hands^{2*}

*Indications may change for different markets.

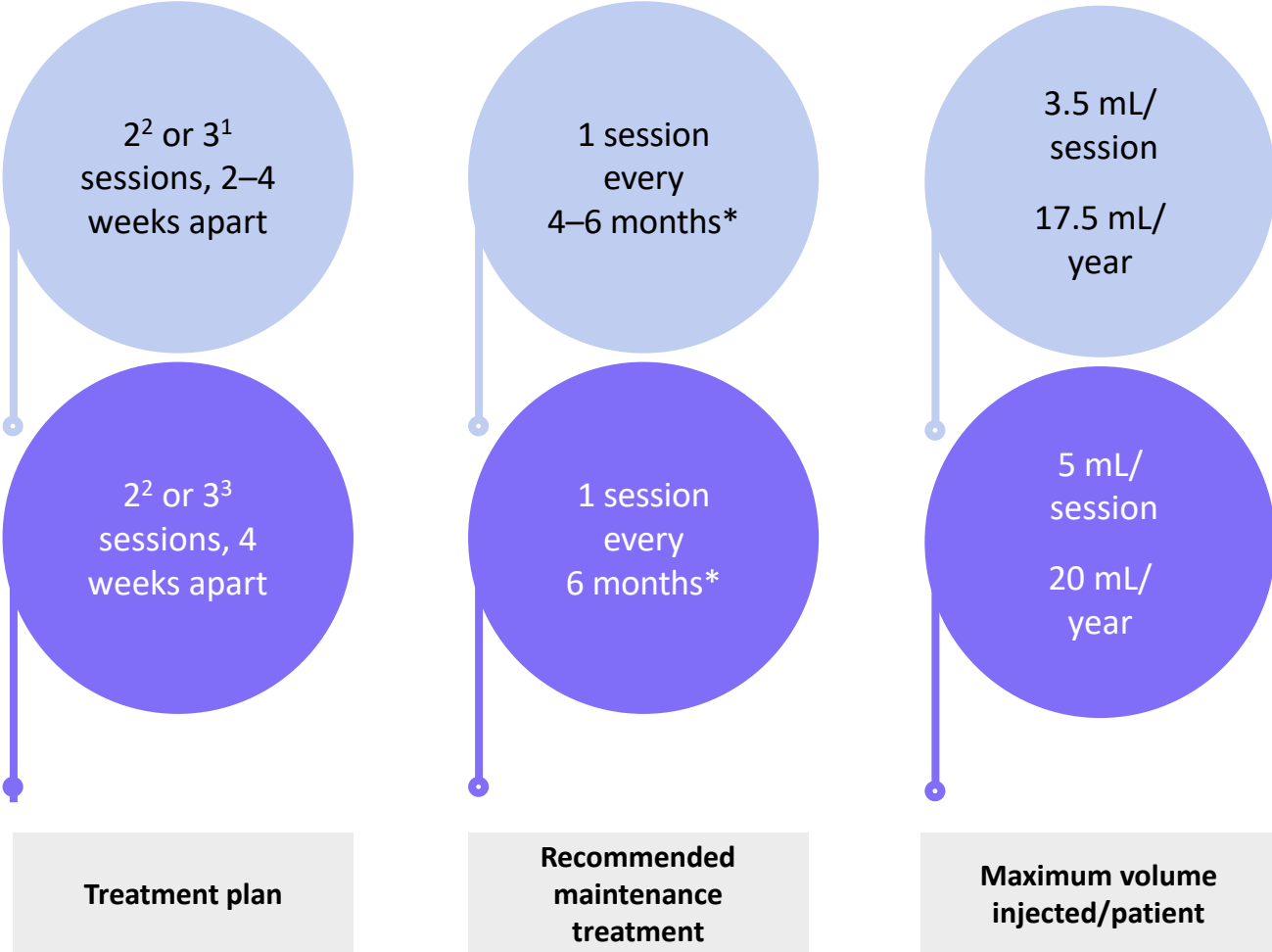
1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01. 2. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

The Restylane® SKINBOOSTERS™ treatment plan

Restylane SKINBOOSTERS VITAL LIGHT lidocaine¹



Restylane SKINBOOSTERS VITAL lidocaine³

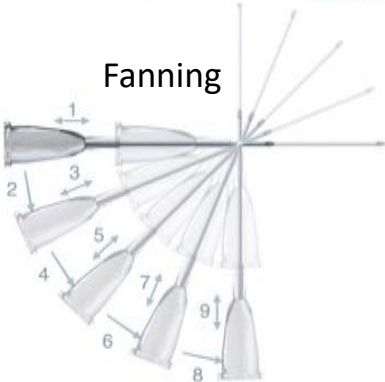
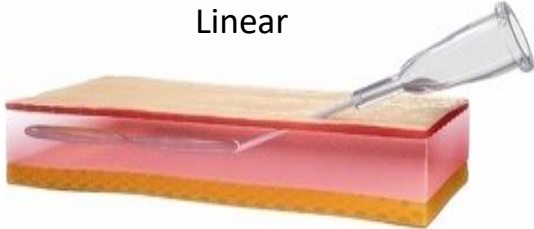
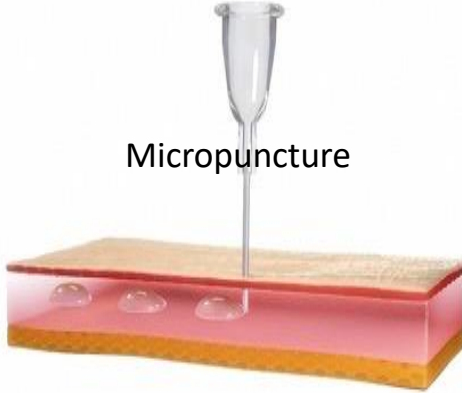


*Results and patient preferences may vary.

1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01.
 2. Nikolis A, Enright KM. Clin Cosmet Investig Dermatol 2018;11:467–475.
 3. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

Restylane® SKINBOOSTERS™ are injected into the dermis

Restylane® SKINBOOSTERS™ VITAL injection techniques



Restylane® SKINBOOSTERS™ VITAL LIGHT is injected into the mid-dermis
Restylane® SKINBOOSTERS™ VITAL is preferably injected in deeper dermis^{1,2}

1. Galderma. Restylane SB Vital Light Lido IFU (4) AW 90-58866-01. 2. Galderma. Restylane SB Vital Lido IFU (4) AW 90-38299-01.

Injection technique, steps 1 and 2



- Engage the SmartClick™ system
- Assess the direction of the collapsed skin lines (wrinkles)



- Stretch the skin to ensure the needle is located in the dermal layer

Injection technique, steps 3 and 4



- Introduce the needle at 30° to the deep dermal plane (you should see the shape of the needle, but not the needle itself)



- Move the needle retrograde mode perpendicular to the cheek line and click 2–3 times along the movement path (space boluses evenly across the length of the retracting needle)
- Single microboluses can be injected with separate injections as well

Restylane® SKINBOOSTERS™ VITAL LIGHT is injected into the mid-dermis
 Restylane® SKINBOOSTERS™ VITAL is preferably injected in deeper dermis^{1,2}

Injection tips



Mark the treatment area before starting the procedure

Inject at rest, injecting while the patient is smiling makes the procedure more painful



Insert the needle almost parallel to the skin surface to allow injection to the deep dermis

Using horizontal delivery reduces trauma to the skin



If the needle is visible when you introduce it to the skin, withdraw and reintroduce

A visible needle suggests placement is too superficial



Change your needle after delivery of 0.5 ml of the product

Inject at rest, injecting while the patient is smiling makes the procedure more painful

GAIN

Performance
&
Safety Data

GALDERMA

Restylane®: The Gold Standard of HA Fillers

GAIN






Restylane is the standard against which most other fillers are judged and is the most common active comparator in clinical trials



HA, hyaluronic acid.

Clinical Data

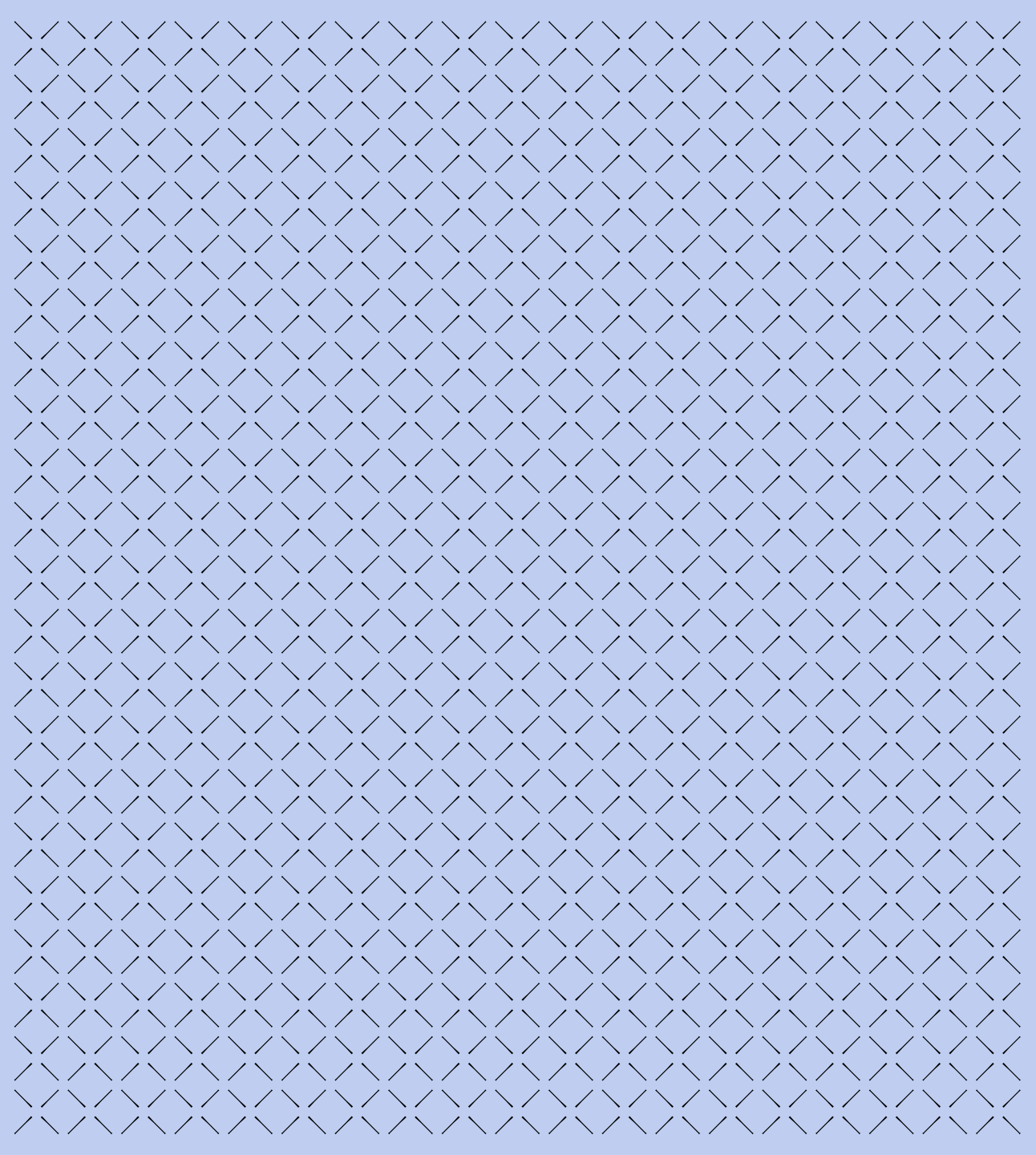
GAIN

	 NASHA	 OBT
Clinical Trials 	>30 (completed or in progress)	>20 (completed or in progress)
Clinical Publications 	~95	~25
Patients Treated 	>2200 in sponsored trials ~4000 in independent studies (eg, not sponsored by Galderma)	>3000 in sponsored trials

NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

GALDERMA

Duration



Duration of Efficacy

GAIN

Randomized, split-face, evaluator-blinded trial (N=68), with optional touch-up at week 3

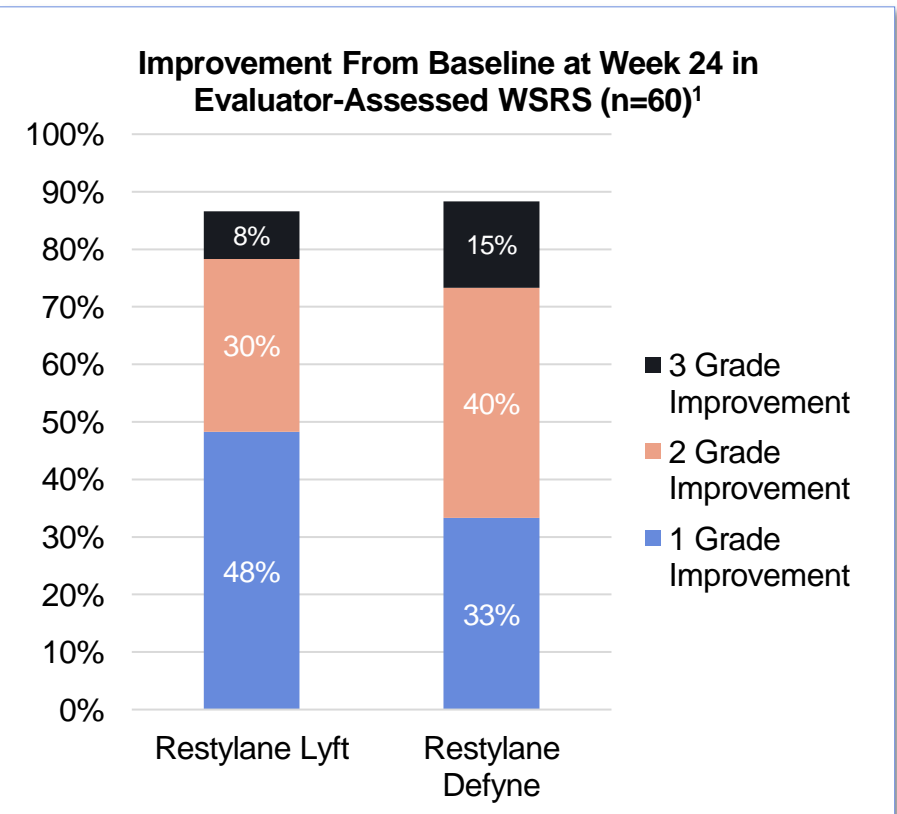
Study product	RESTYLANE LYFT and Emervel Deep (equivalent to Restylane Defyne, but without lidocaine)
Indications	Nasolabial folds

- Both Restylane Lyft and Restylane Defyne were effective and well tolerated for the treatment of severe NLFs^{1,2}
- Responder rates (≥ 1 grade improvement in WSRS)²:

90% Defyne group

88% Lyft group

- Overall response rate over time was 79%–99%²
- **~80% of patients maintained ≥ 1 grade improvement in WSRS for at least 12 months**



NLF, nasolabial fold; WSRS, Wrinkle Severity Rating Scale.

1. Ascher B, et al. *J Cosmet Dermatol*. 2011;10:94-98; 2. Ascher B, et al. *Dermatol Surg*. 2017;43:389-395.

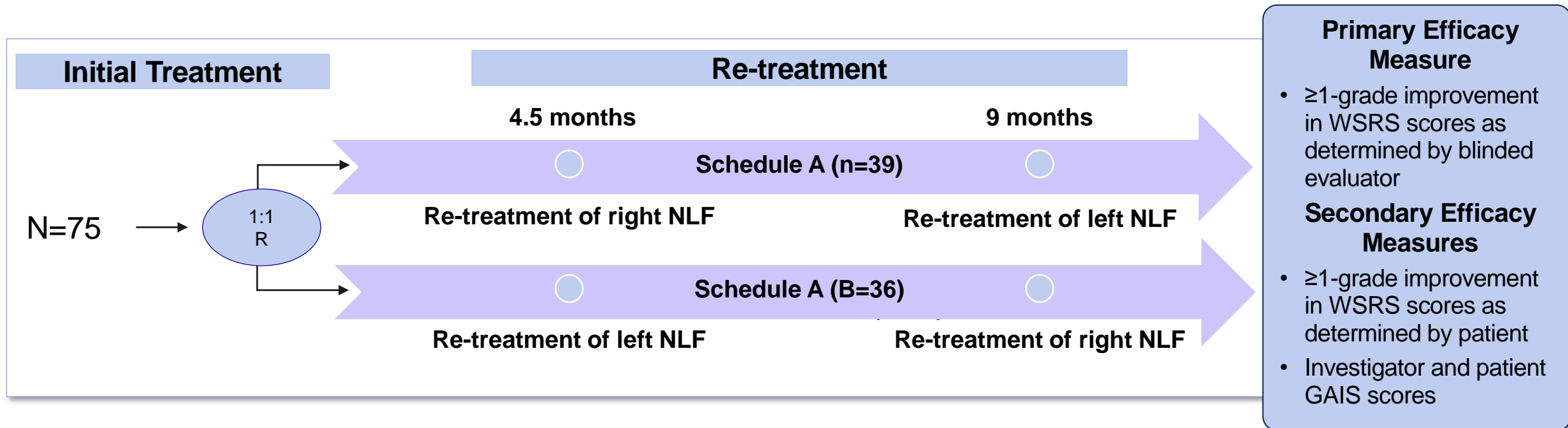
GALDERMA

Duration of Efficacy

GAIN

30-month (primary and extension), randomized, split-face, evaluator-blinded trial (N=75)^{1,2}

Study product	RESTYLANE
Indications	Nasolabial folds



GAIS, Global Aesthetic Improvement Scale; NLF, nasolabial fold; R, randomization; WSRS, Wrinkle Severity Rating Scale.

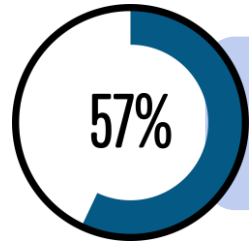
1. Narins RS, et al. *Dermatol Surg.* 2008;34(suppl 1):S2-8; discussion S8; 2. Narins RS, et al. *Dermatol Surg.* 2011;37(5):644-650.

GALDERMA

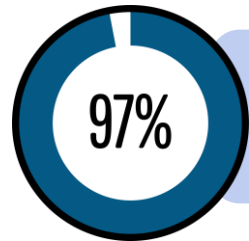
Duration of Efficacy

GAIN

30-month (primary and extension), randomized, split-face, evaluator-blinded trial (N=75)¹



improved by ≥ 2 WSRS grades at 18 months (improvement starting at 4.5 months)¹



showed ≥ 1 grade improvement in WSRS for up to 18 months after initial treatment¹



36 months of continuous response observed in patients re-treated at 18 months in the extension study²

- Re-treatment with Restylane at 4.5 or 9 months led to **persistent efficacy for up to 18 months**¹
- Efficacy continued to 36 months in patients re-treated at 18 months²
- Mean injection volume decreased ~50% with each re-treatment²

WSRS, Wrinkle Severity Rating Scale.

1. Narins RS, et al. *Dermatol Surg.* 2008;34(suppl 1):S2-8; discussion S8; 2. Narins RS, et al. *Dermatol Surg.* 2011;37(5):644-650.

GALDERMA

Duration of Efficacy

GAIN

6-month open-label study at 5 centers in France and Germany in multiple aesthetic indications (N=77)¹

Inclusion Criteria

- Augmentation for ≥ 3 indications
 - LRS score 3–4 for NLF
 - LRS ≥ 2 for periorbital lines, cheek folds, upper lip lines, marionette lines
 - LFGS 0–2 for upper or lower lip

Indications

Cheeks, cheek folds, NLFs, periorbital lines, tear troughs, upper lip lines, lips, marionette lines

SKU*	Indication
Restylane Defyne	Deep dermis (moderate to deep wrinkles)
Restylane Refyne	Mid-dermis (moderate to deep wrinkles)
Restylane Volyme	SC fat tissue (correction of facial volume)
Restylane Fynesse [†]	Superficial dermis (periorbital lines, upper lip lines, cheek folds)
Restylane Kysse	Submucosal layer (restore or augment the volume of the lips)

*Most frequently used in NFLs and MLs were Restylane Defyne and Refyne; [†]Product being phased out.

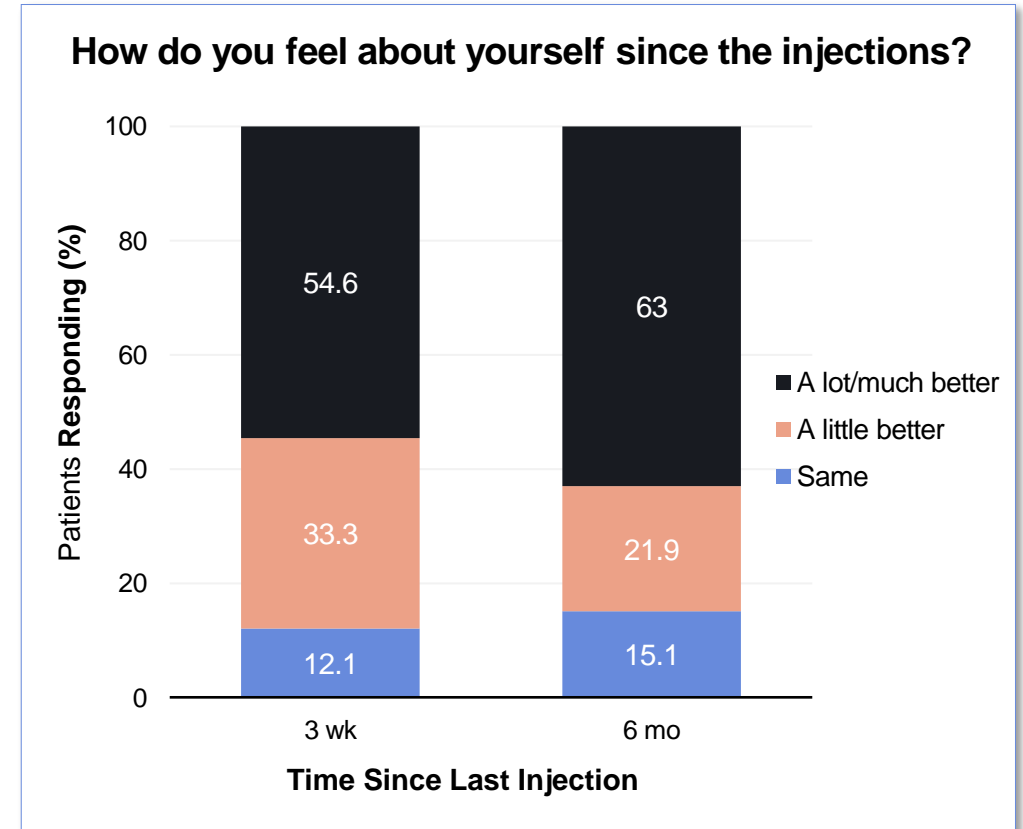
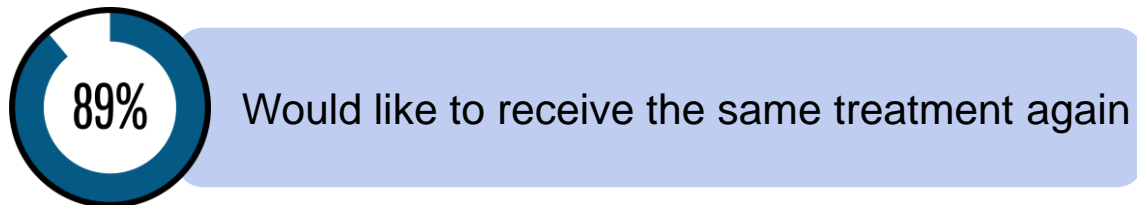
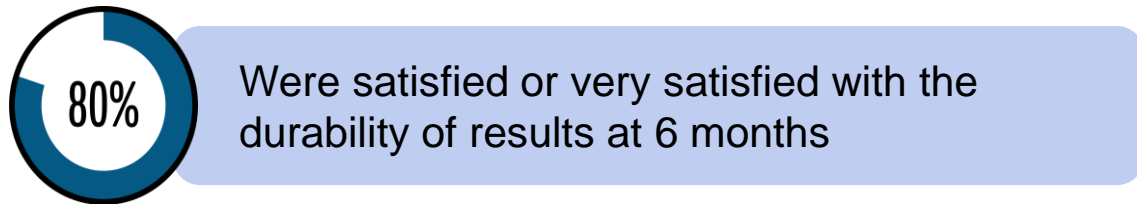
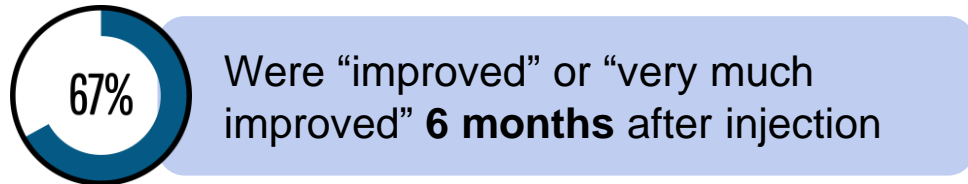
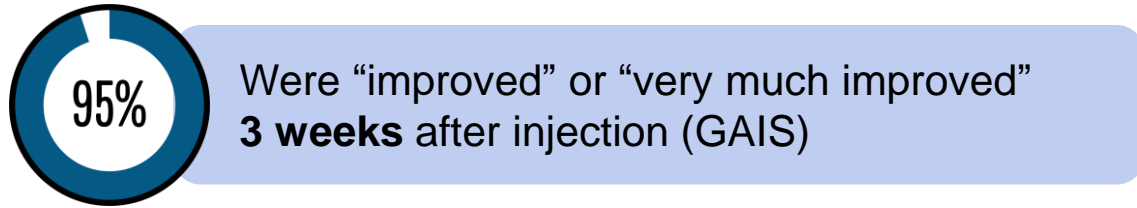
LFGS, Lip Fullness Grading Scale; LRS, Lemperte Rating Scale; NLF, nasolabial fold; ML, marionette line; SC, subcutaneous; SKU, stock keeping unit.

1. Rzany B, et al. *Dermatol Surg.* 2012;38(7 pt 2):1153-1161.

Duration of Efficacy

GAIN

6-month open-label study at 5 centers in France and Germany in multiple aesthetic indications (N=77)¹



Aesthetic improvement and high satisfaction were sustained for 6 months posttreatment

GAIS, Global Aesthetic Improvement Scale.

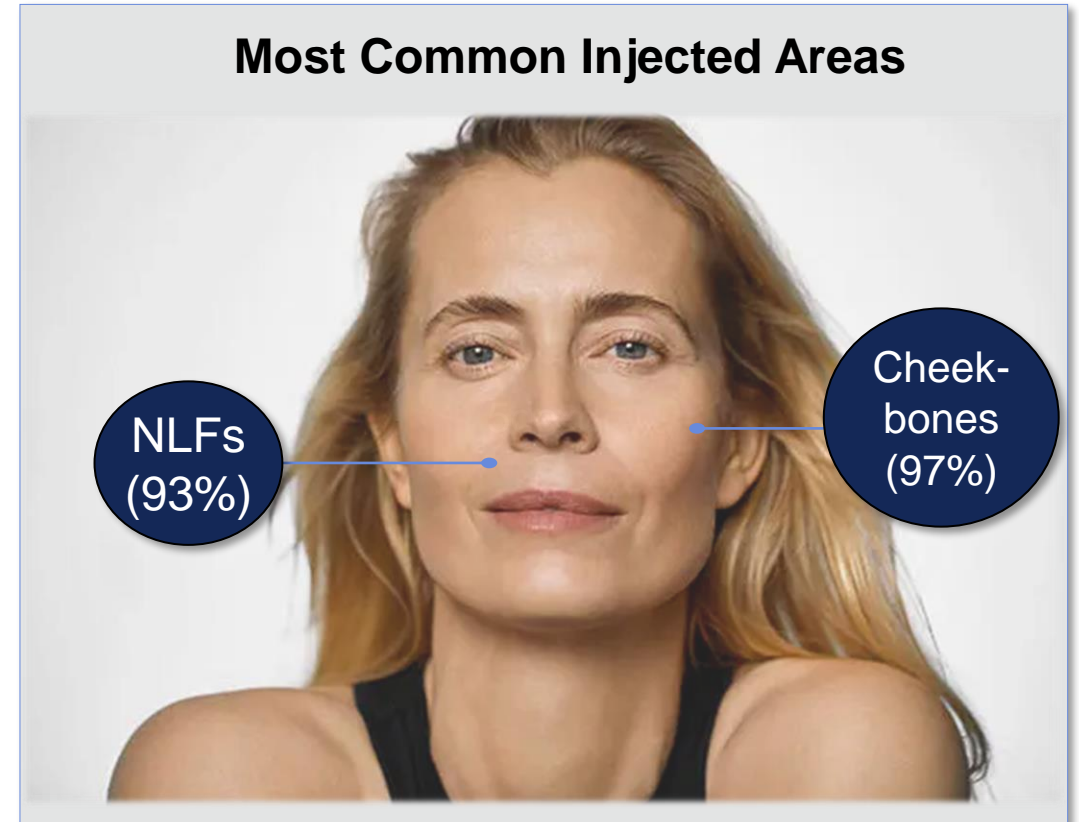
1. Rzany B, et al. *Dermatol Surg.* 2012;38(7 pt 2):1153-1161.

Duration of Efficacy

GAIN

18-month open-label study of full-face rejuvenation with Restylane Volyme (N=60)^{1*}

- Treatment for 6 indications
 - Chin
 - Temples
 - Jawline
 - Cheek
 - Cheekbones
 - NLFs
- Most patients received treatment at 3–4 sites
- Efficacy assessments: GAIS, VLS, LRS
- 3-D digital imaging to calculate volume variations



*Mean injection volume of 7.4±2.8 mL.

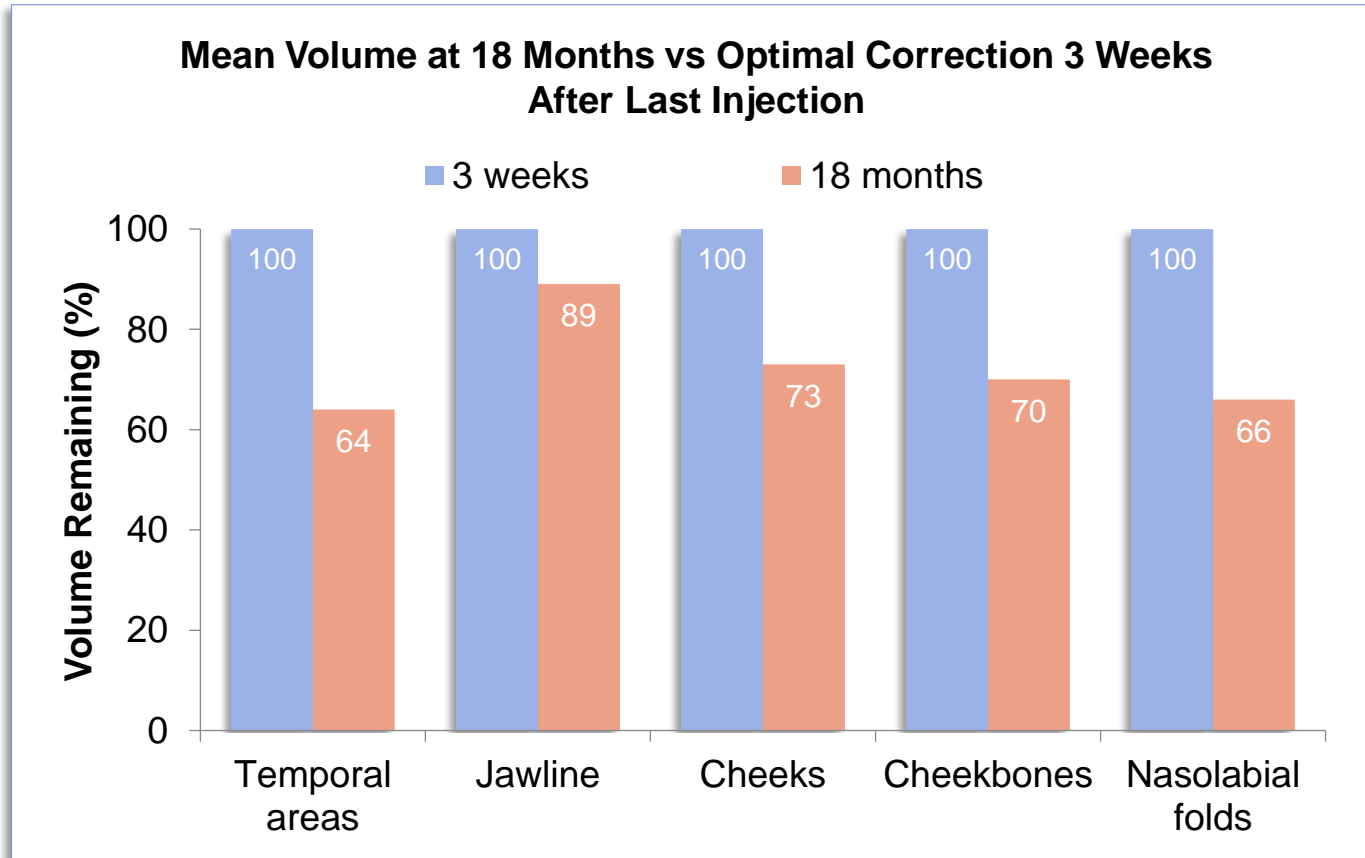
GAIS, Global Aesthetic Improvement Scale, LRS, Lemperte Rating Scale; NLF, nasolabial fold; VLS; Volume Loss Scale.

1. Talarico S, et al. *Dermatol Surg.* 2015;41:1361-1369.

Duration of Efficacy

GAIN

18-month open-label study of full-face rejuvenation with Restylane Volyme (N=60)¹



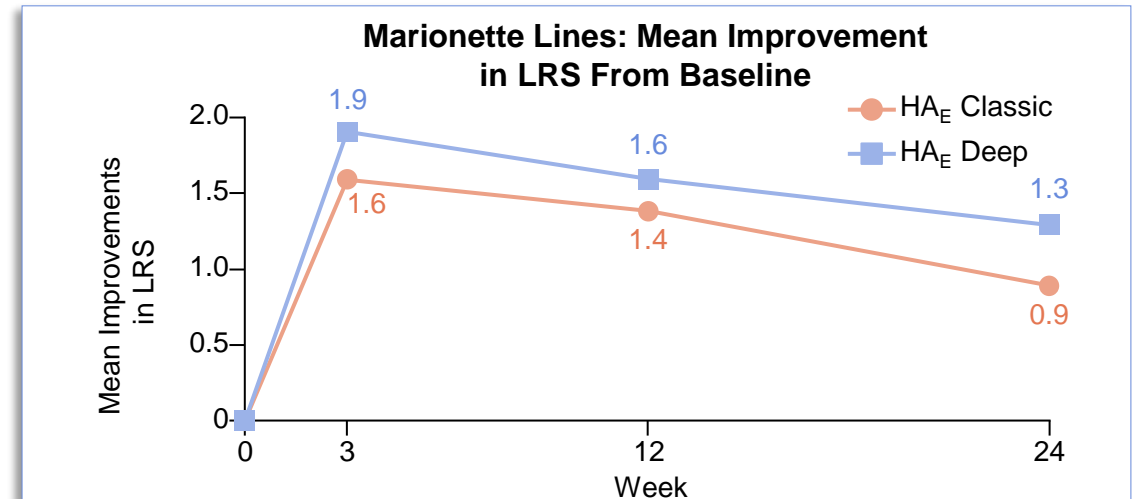
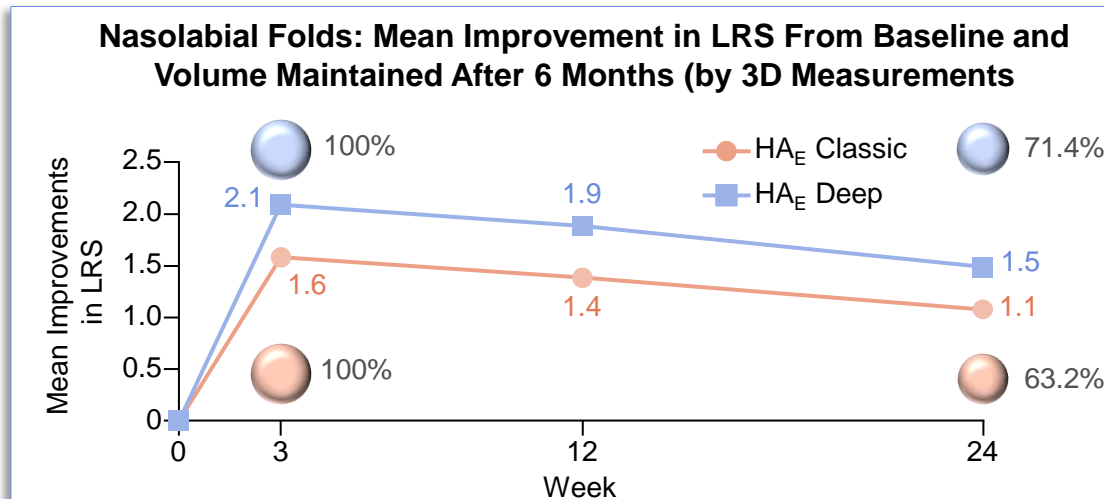
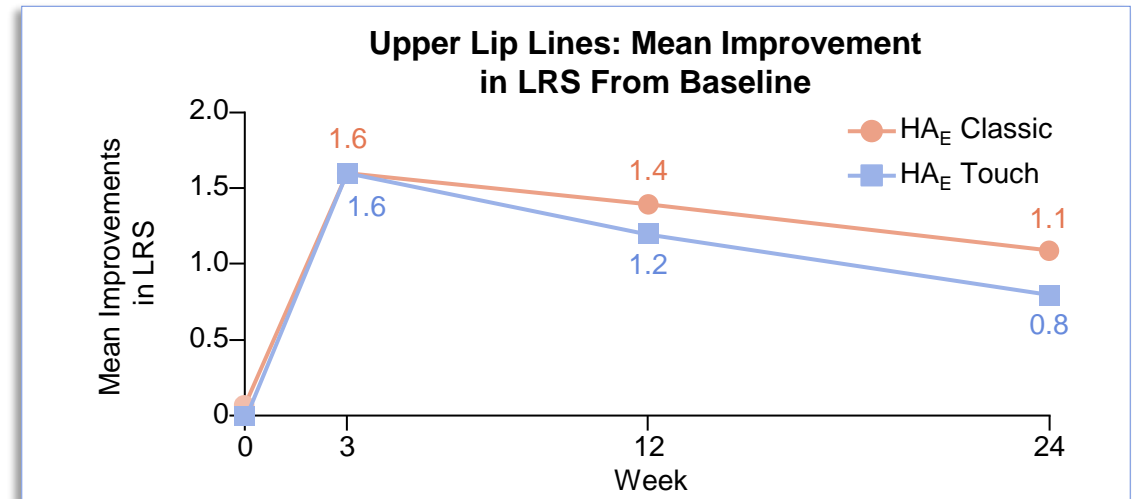
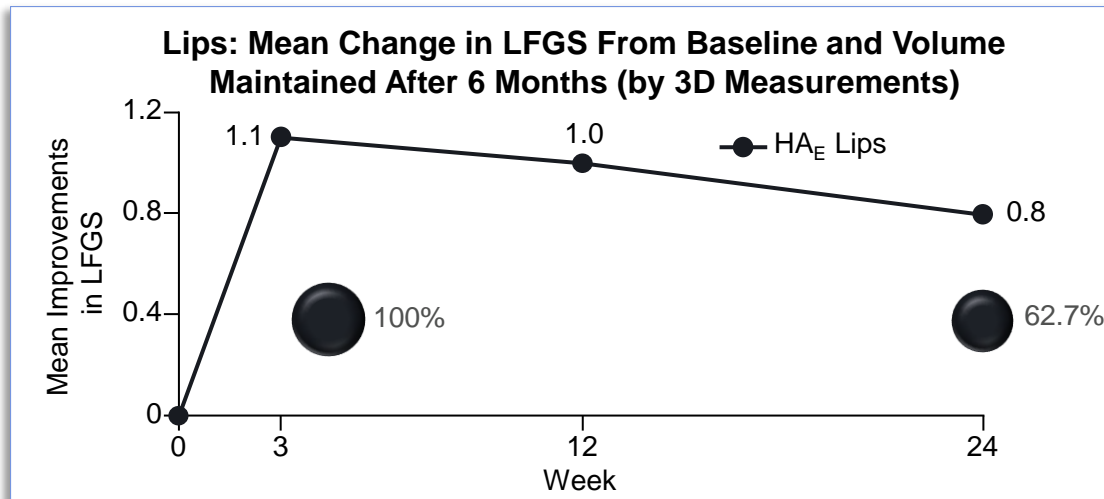
- Full-face restoration with Restylane Volyme produced durable volume improvement in mobile midface areas
- Patients reported high satisfaction with injection comfort, aesthetic outcomes, and durability of results
- All patients indicated that they would recommend the treatment to family/friends and would like to receive the treatment again

>60%
of volume
increase was
sustained at
18 months for all
indications

1. Talarico S, et al. *Dermatol Surg.* 2015;41:1361-1369.

Persistent Efficacy 6 Months After Injection

GAIN

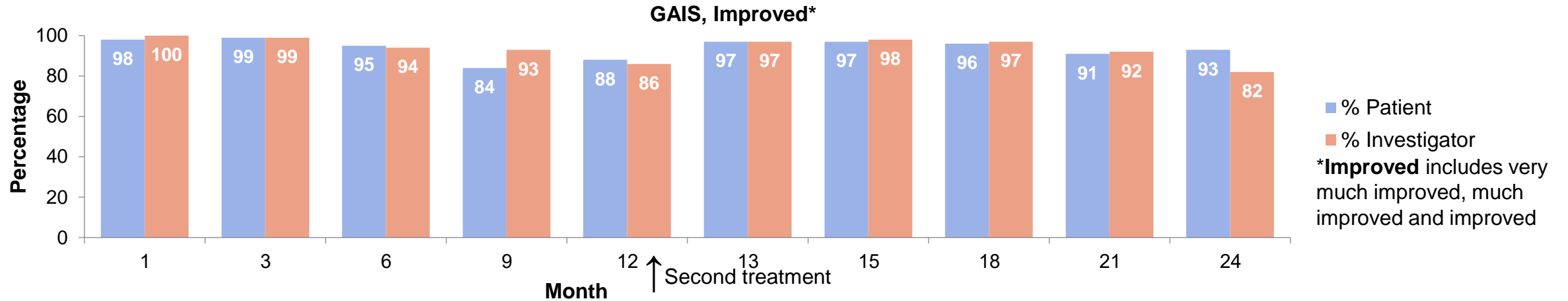


- The spheres at week 24 represent the volume maintained compared to the volume obtained at optimal correction (week 3)

Restylane and Restylane Lyft – Long-Lasting Results

GAIN

Open, evaluator-blinded, noncomparative, multicenter study to assess the safety and efficacy of Restylane and Restylane Lyft for facial augmentation in Asian population^{1,2}

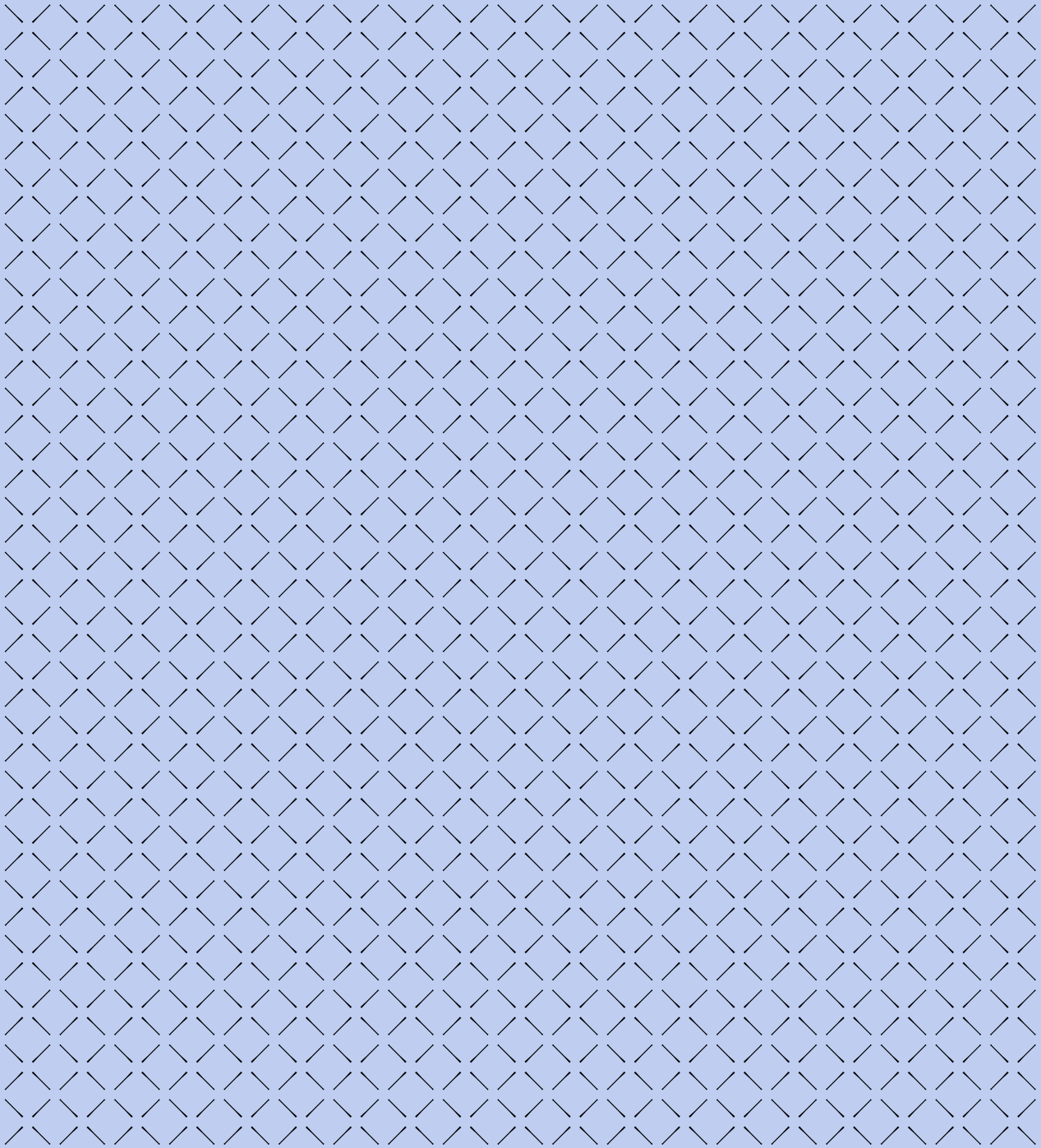


Conclusions GAIS	
Patient self-assessment	Investigator assessment
<ul style="list-style-type: none"> 88% and 93% assessed themselves as improved up to 12 months after the first and second treatment, respectively 	<ul style="list-style-type: none"> ≥82% of patients were assessed by the investigator as improved up to 12 months after both treatments

≥80%
of patients were satisfied 12 months after both treatments

GAIS, Global Aesthetic Improvement Scale.
1. Study 05DF1315, Data on file; 2. Huang S and Tsai T. *J Drugs Dermatol.* 2020;19(9):836-842.

Patient Satisfaction



Patient Satisfaction

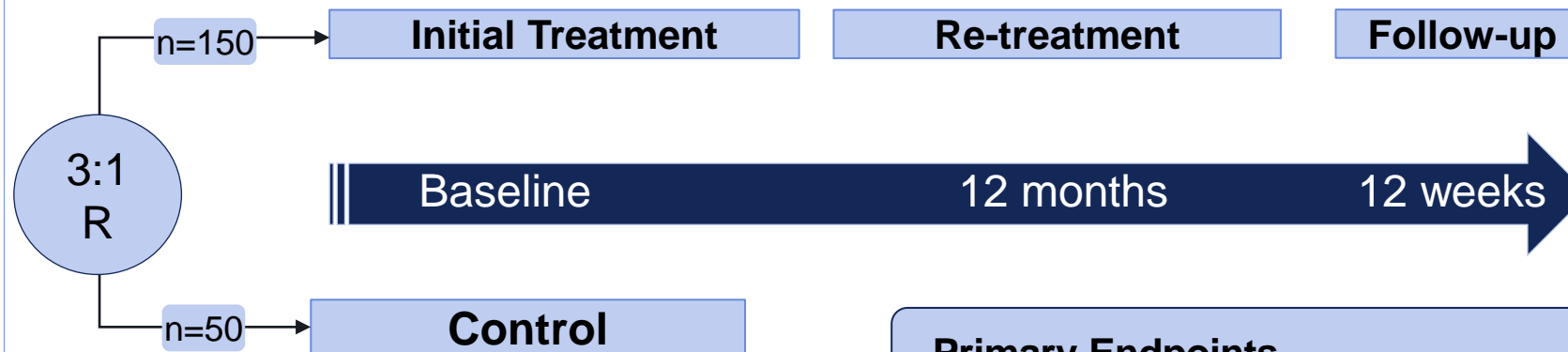
GAIN

15-month, randomized, evaluator-blinded, no-treatment control study (N=200)¹

Study product RESTYLANE LYFT Lidocaine

Indications Midface augmentation

Study Design



Primary Endpoints

- ≥ 1 -grade improvement in MMVS on each side of face at 8 weeks as assessed by blinded evaluator

Secondary Endpoints

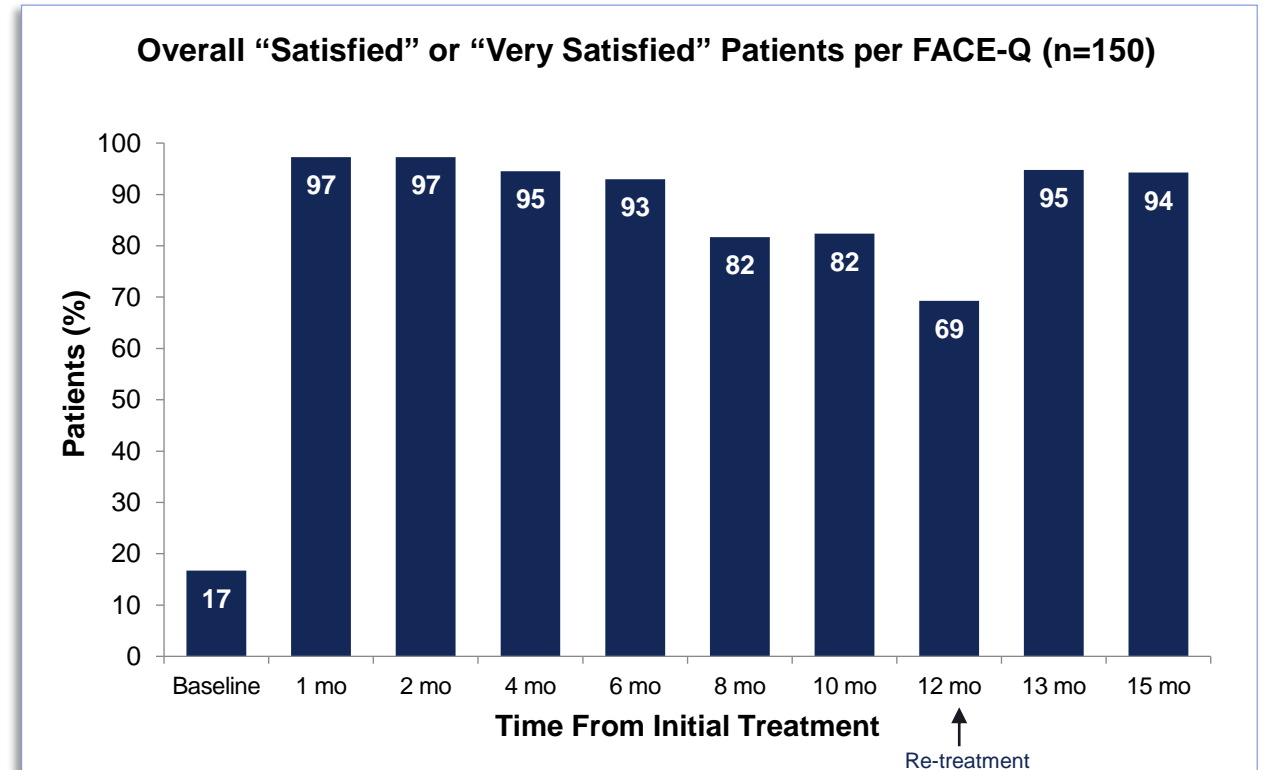
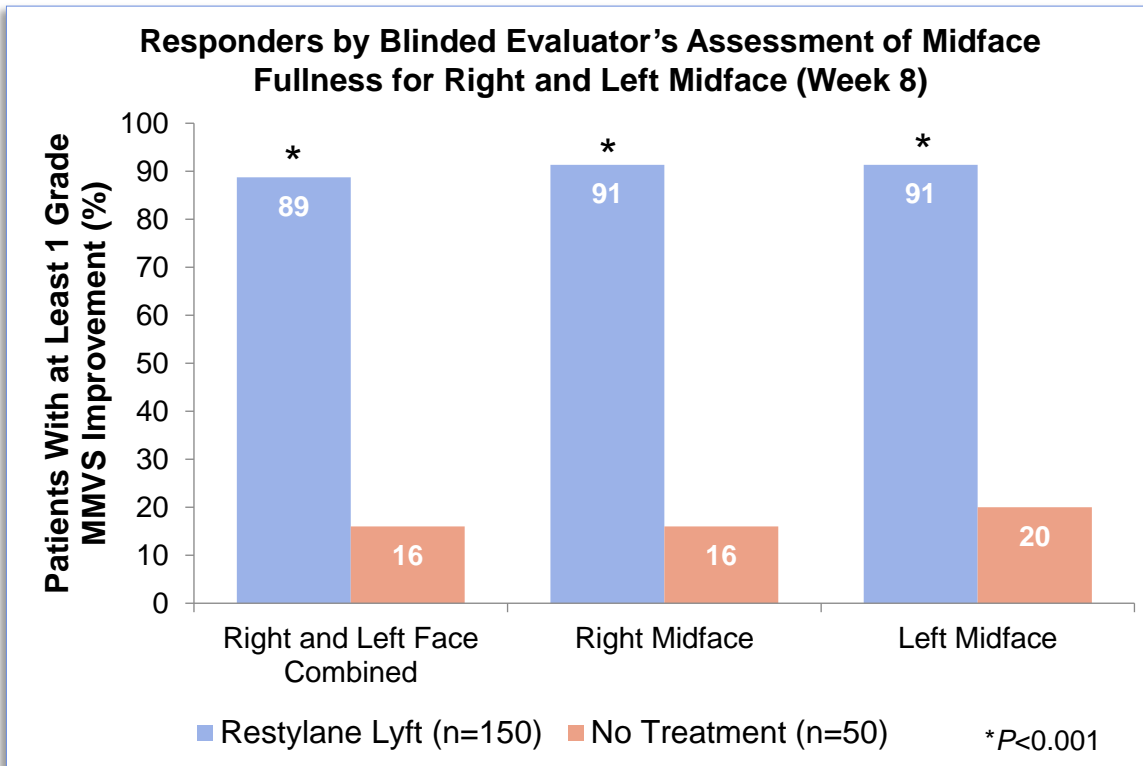
- MMVS at all time points
- Investigator and patient GAIS and FACE-Q scores

GAIS Global Aesthetic Improvement Scale; MMVS, Medicis Midface Volume Scale; R, randomization.
1. Weiss RA, et al. *Dermatol Surg.* 2016;42(6):699-709.

Patient Satisfaction

GAIN

15-month, randomized, evaluator-blinded, no-treatment control study (N=200)¹



Repeat treatment posed no additional risk and extended treatment efficacy and patient satisfaction

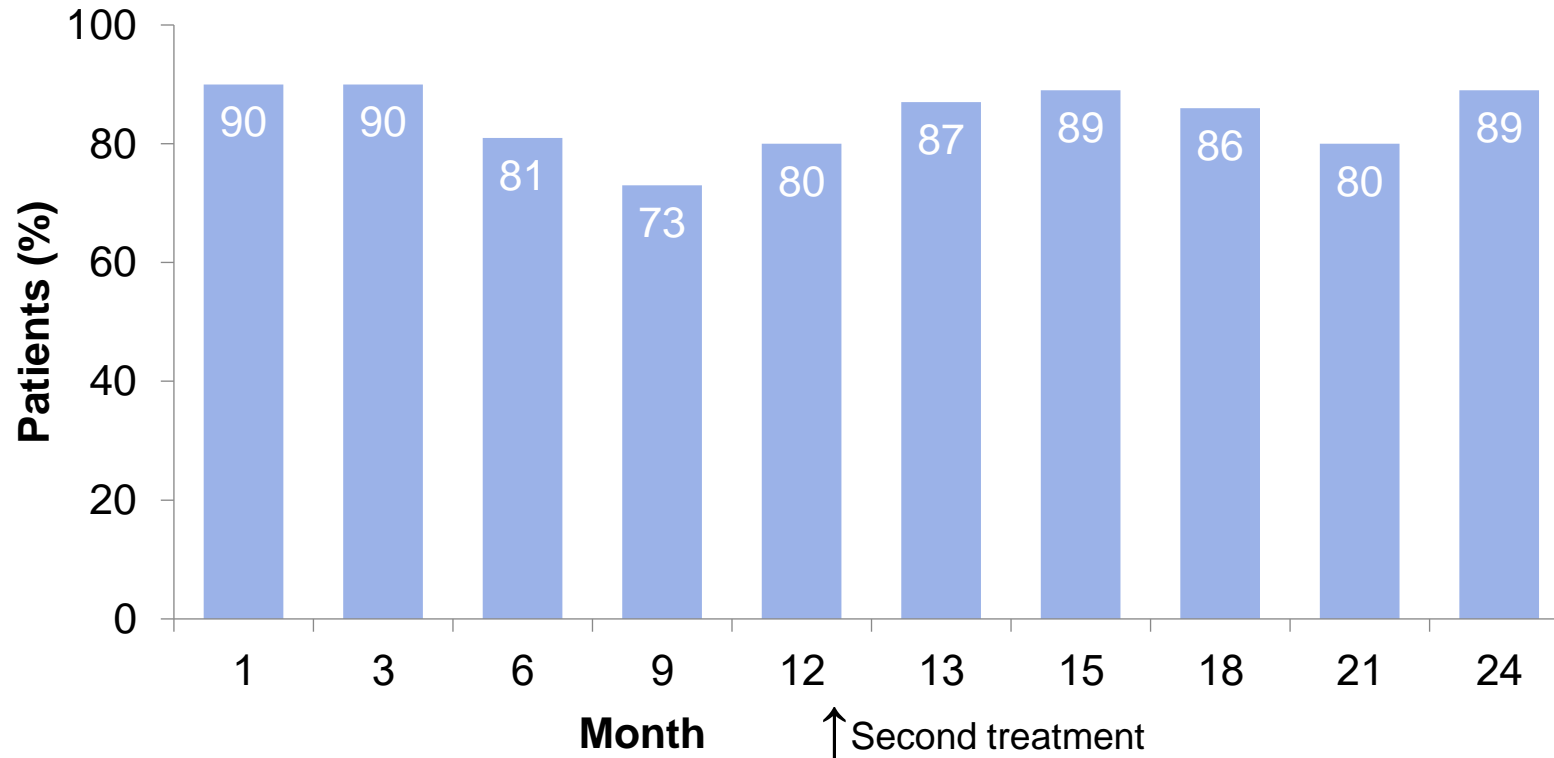
MMVS, Medicis Midface Volume Scale.

1. Weiss RA, et al. *Dermatol Surg.* 2016;42(6):699-709.

Restylane and Restylane Lyft - High Patient Satisfaction 1 Year After the Treatment

GAIN

Satisfaction With Treatment Result



- Most patients (73%–90%) were satisfied with the treatment results throughout the study
- At least 80% remained satisfied with the treatment results during the 12-month follow-up period after the second treatment

Patient Satisfaction - Restylane® KYSSE

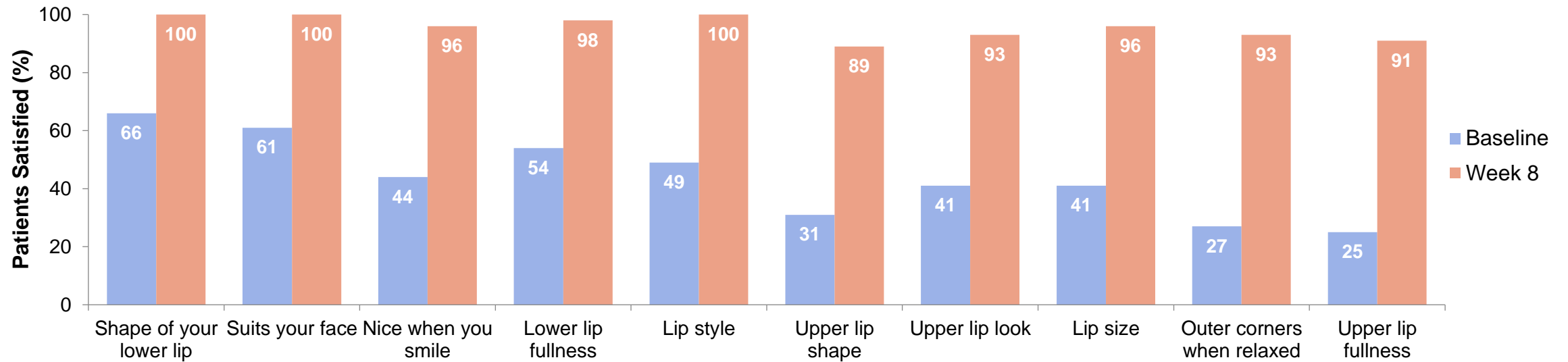
GAIN

Study product	RESTYLANE® KYSSE
Design	Open-label study, satisfaction assessed at week 8 using questionnaires (FACE-Q™ [patients] and KISSABILITY [patients and partners])
Indications	Lip enhancement
Main conclusions	Treatment with Restylane KYSSE for lip enhancement results in high levels of patient and partner satisfaction

- This study evaluated the patient and partner satisfaction with the treatment of Restylane® KYSSE for lip enhancement at week 8 after the treatment

Patient Satisfaction - Restylane® KYSSE

GAIN

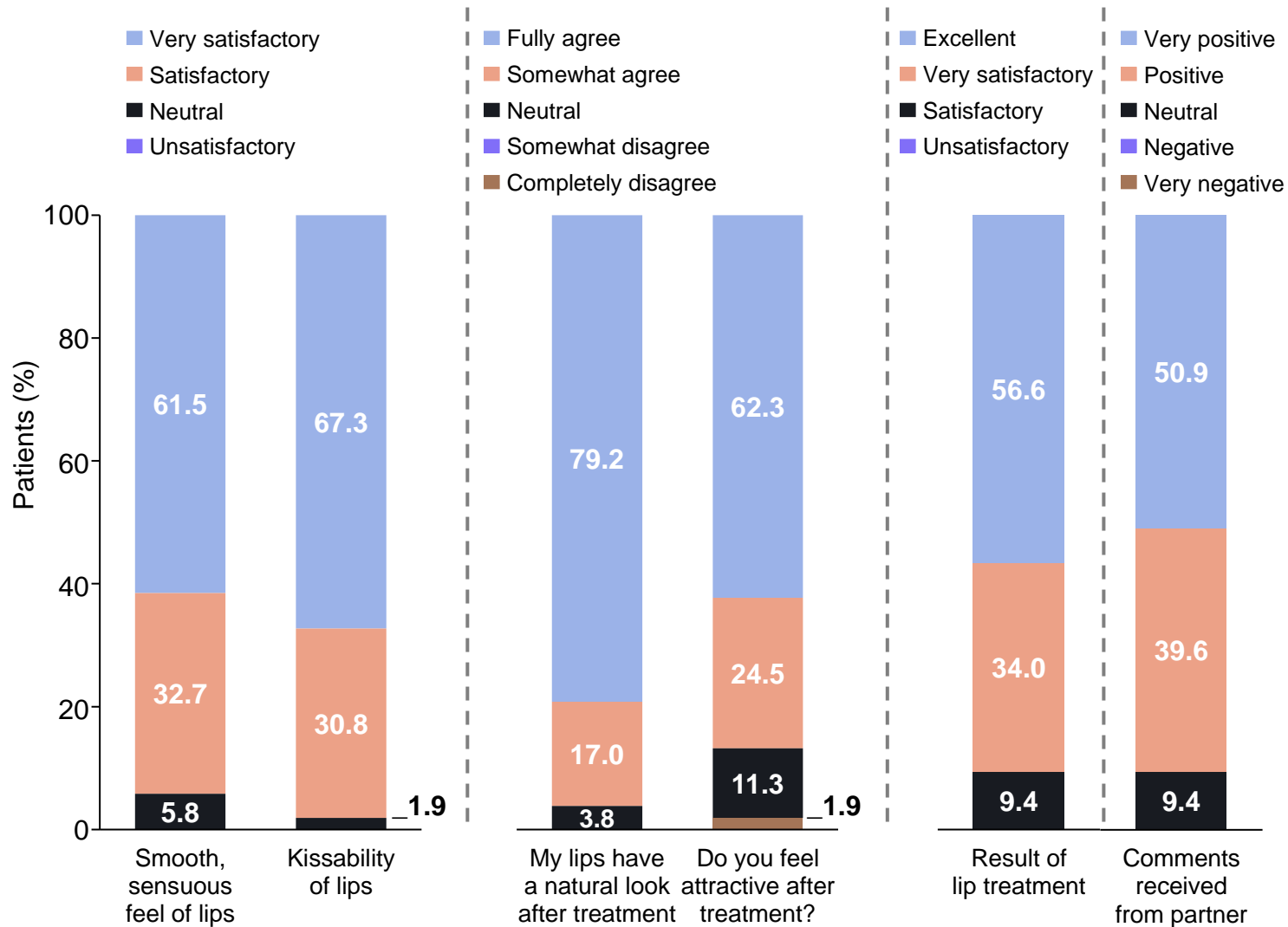


Study product	RESTYLANE® KYSSE
Design	Open-label study, satisfaction assessed at week 8 using questionnaires (FACE-Q™ [patients] and KISSABILITY [patients and partners])
Indications	Lip enhancement
Main conclusions	Lip enhancement with high levels of patient and partner satisfaction

- This graph shows the overall FACE-Q patient satisfaction at week 8 with the outcome of lip enhancement
- Most of the patients were highly satisfied with the results at week 8 after the treatment

Patient Satisfaction - Restylane® KYSSE

GAIN



• This graph shows the overall response for patients in KISSABILITY questionnaire. Most of the patients were very satisfied or satisfied with the smooth or sensuous feel of their lips and felt more attractive

Study product	RESTYLANE® KYSSE
Design	Open-label study, satisfaction assessed at week 8 using questionnaires (FACE-Q™ [patients] and KISSABILITY [patients and partners])
Indications	Lip enhancement
Main conclusions	Lip enhancement with high levels of patient and partner satisfaction

Bertucci V, et al. *J Cosmet Dermatol.* 2021;00:1-6.

Performance Data

GAIN

Key Takeaways

Uniform results

Predictable results in many different skin types^{1,2}



Long duration

Duration up to 12 months³⁻⁵

Duration up to 36 months with re-treatment^{3,4}

Patient satisfaction

High patient satisfaction for most treatment types⁶

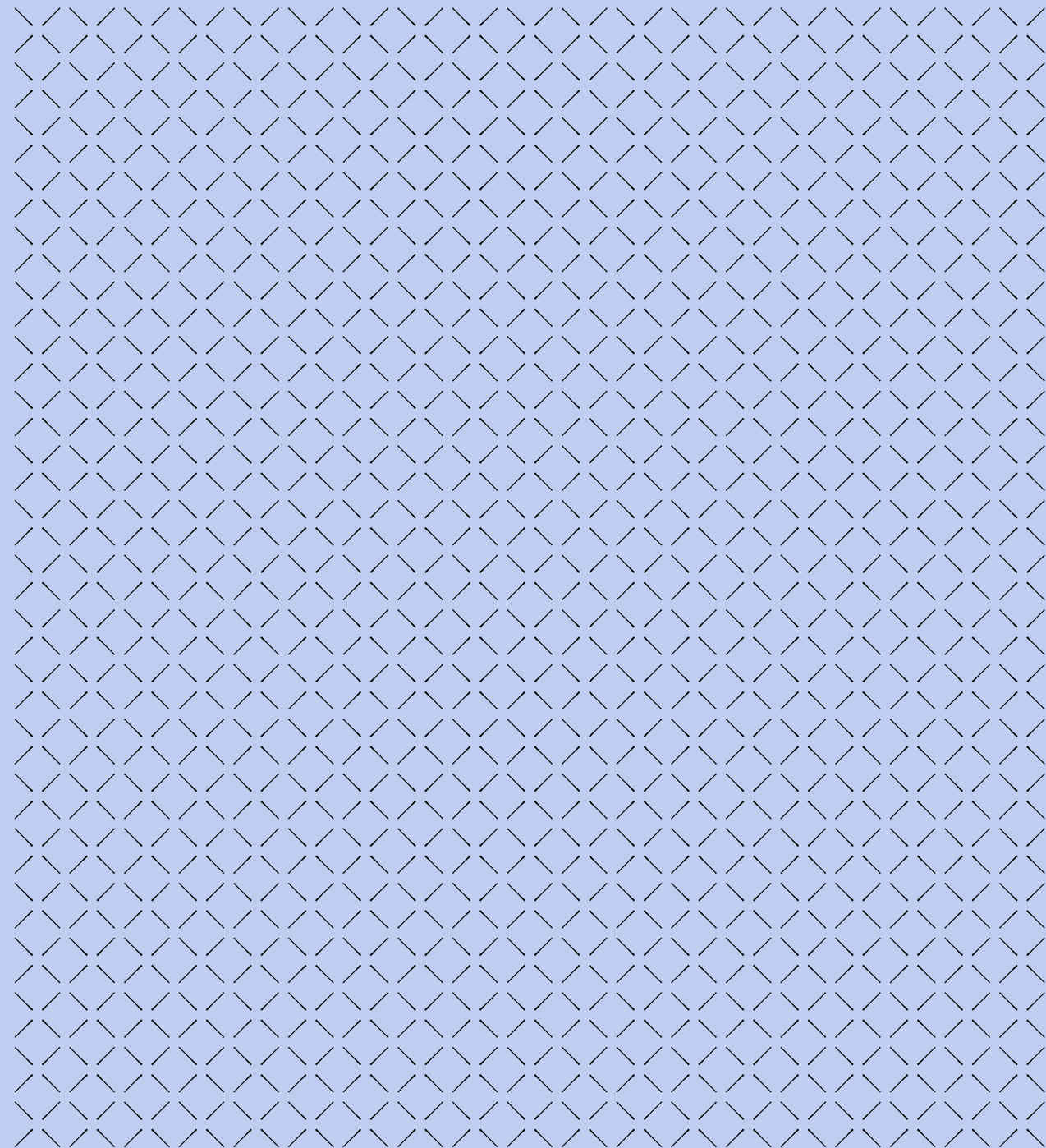


Optimal use

Less product needed to achieve optimal result with each successive re-treatment

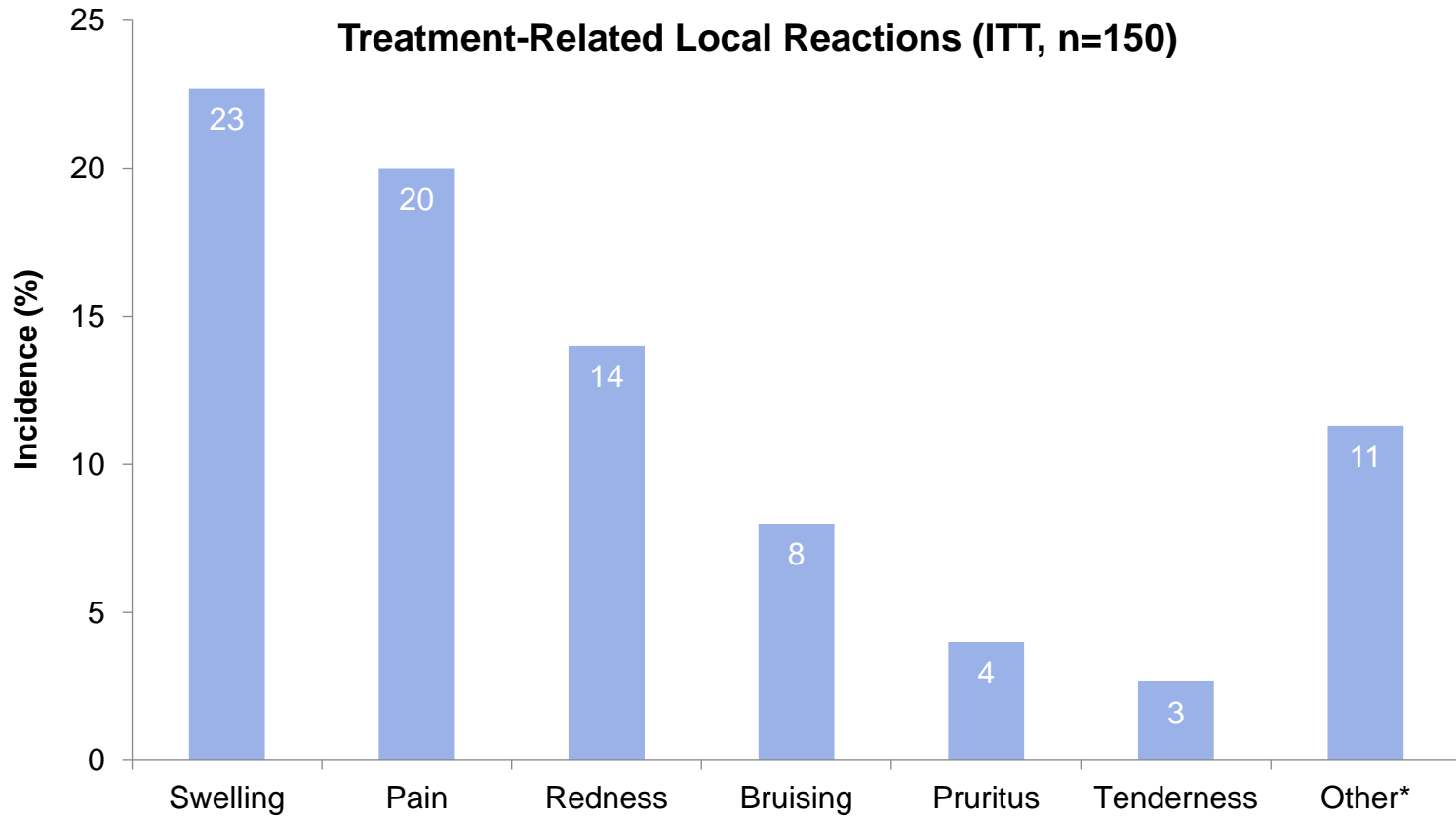
1. Yan X, et al. *Plast Reconstr Surg* 2009;124:256e-257e; 2. Taylor SC, et al. *Dermatol Surg* 2010;36:741-749; 3. Narins RS, et al. *Dermatol Surg* 2008;34:S2-S8; 4. Narins RS, et al. *Dermatol Surg* 2011;37:644-650; 5. Data on file; 6. Weiss RA, et al. *Dermatol Surg*. 2016;42(6):699-709.

Safety Data



Safety – Local Injection-Site Reactions

GAIN



*Includes injection-site induration, rash, skin discoloration, and inflammation.

ITT, intent to treat.
Carruthers J, et al. *Dermatol Surg.* 2005;31:276-280.

Study product	RESTYLANE® LYFT
Design	Evaluator-blinded, randomized, controlled study
Indication	Nasolabial folds
Main conclusions	Acceptable safety profile

Study products	RESTYLANE [®] and RESTYLANE [®] LYFT
Design	<ul style="list-style-type: none">• 2 randomized controlled trials comprising 433 patients• Skin testing, serology, and histopathology for type 1 and 4 hypersensitivity
Indications	Nasolabial folds
Main conclusions	No clinical or laboratory evidence for elicitation of humoral or cell-mediated immunity to Restylane [®] or Restylane [®] Lyft in different skin types

Adverse Events – Clinical Studies

GAIN

Study products	RESTYLANE® / RESTYLANE® LYFT
Design	Multicenter, controlled, randomized, double-blind, split-face clinical study
Indications	Moderate to severe nasolabial folds
Main conclusions	Both products were well tolerated, with few AEs

System Organ Class / Preferred Term*	Restylane® (n=81)¹	Restylane® Lyft (n=68)²
Total no. of AEs	34	31
Total no. of patients with AEs	26 (32.1%)	20 (29.4%)
Cystitis	2 (2.5%)	1 (1.5%)
Headache	3 (3.7%)	1 (1.5%)
Injection site edema	2 (2.5%)	N/A
Nasopharyngitis	4 (4.9%)	5 (7.4%)
Influenza	1 (1.2%)	2 (2.9%)
Toothache	N/A	3 (4.4%)
Related AEs	4 (4.9%)	1 (1.5%)

*With a frequency >2% in one of the studies.

1. Data on file (a); 2. Data on file (b).

Adverse Events: Postmarketing Surveillance

GAIN

- AE reporting frequencies (nonexhaustive list)
The frequency of reporting is based on the number of estimated treatments performed with the Restylane NASHA fillers

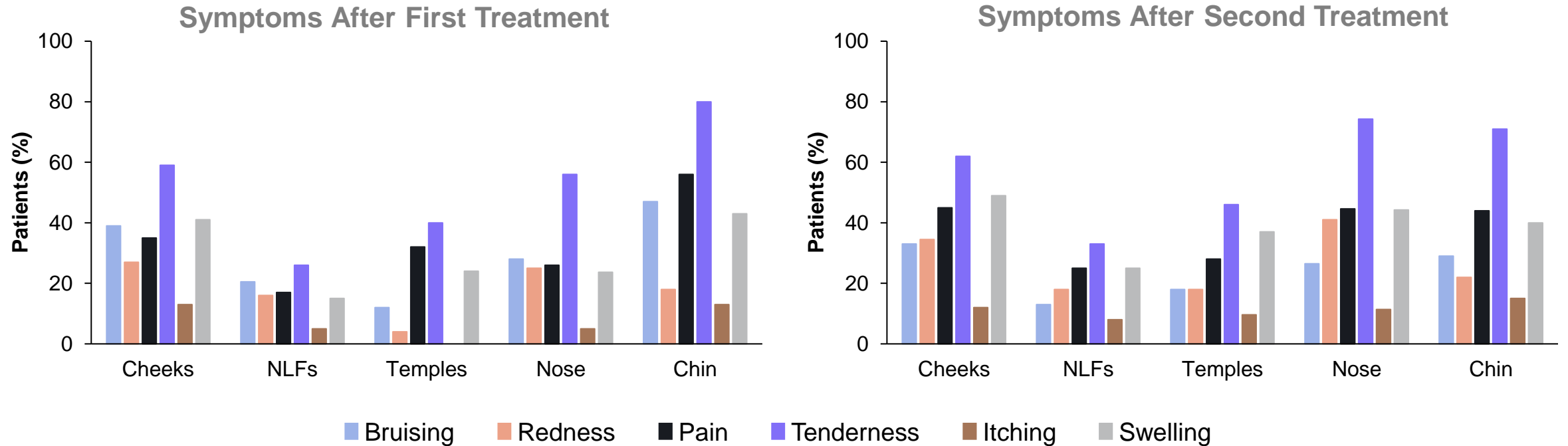
Reporting Frequency	AE
1/1000 – 1/10,000	Swelling
1/10,000 – 1/50,000	Bruising, discoloration, erythema, infection, inflammation, ischemia/necrosis, mass, pain/tenderness, papules/nodules
1/50,000 – 1/100,000	Hypersensitivity, induration, neurological symptoms such as paresthesia, pruritus, short duration of effect
<1/100,000	Abscess, acne, angioedema, atrophy/scarring, blisters, capillary disorders such as telangiectasia, dermatitis, device dislocation, fistula, granuloma, rash, reactivation of herpes infection, urticaria, visual disturbance

AE, adverse event; NASHA, nonanimal stabilized hyaluronic acid.
Instructions for Use, EU, Restylane.

Restylane and Restylane Lyft – Proven Safety Profile

GAIN

Percentage of Patients Reporting Symptoms Within 14 Days After Each Injection



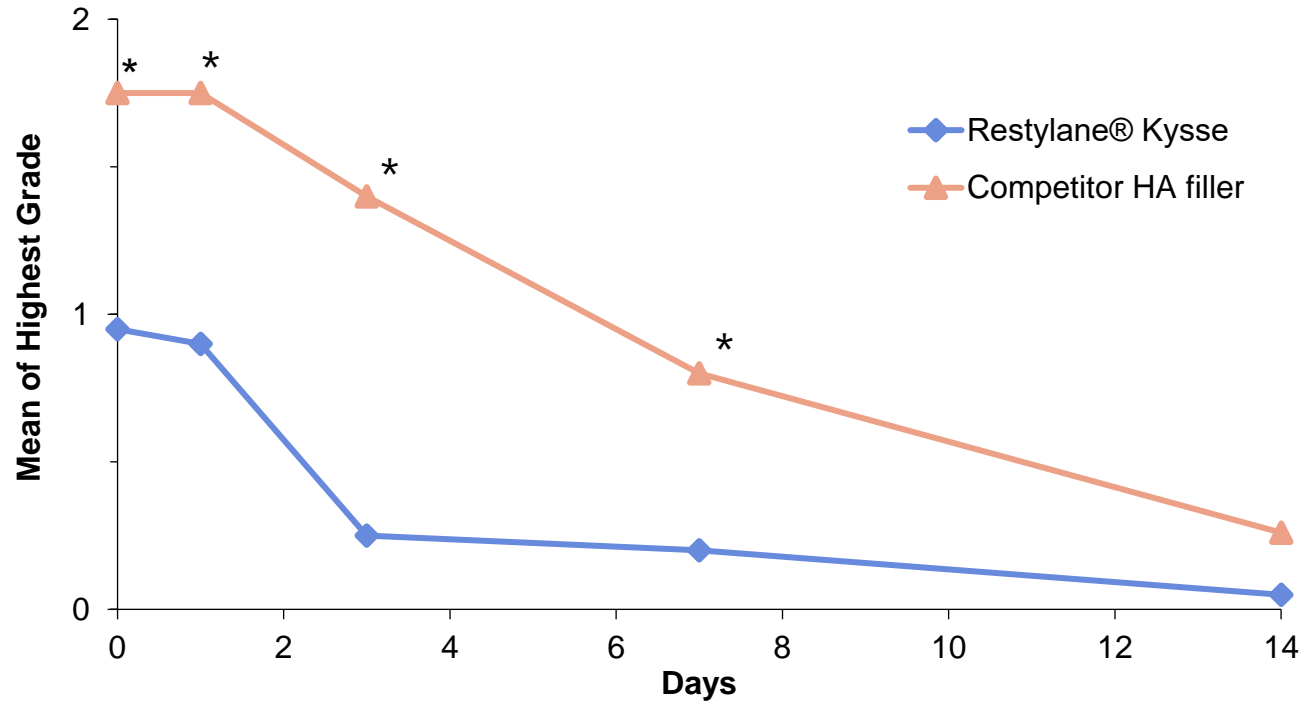
n=100	Patients, n (%)	Events, n
Adverse events related to any product and/or injection procedure	16 (16.0)	29
Serious adverse events	0	0
Nonserious adverse events	16 (16.0)	29

NLF, nasolabial fold.
Instructions for Use, EU, Restylane.

Safety – Low Swelling

GAIN

Intensity of Edema/Swelling (ITT, n=40)
(Patients' Diary Assessment Over 14 Days)



*P<0.001 exact Wilcoxon rank sum test.

GAIS, Global Aesthetic Improvement Scale; HA, hyaluronic acid; ITT, intent to treat.
Data on file (Said Hilton)

Study product	RESTYLANE® KYSSSE vs Juvéderm Ultra Smile
Design	<ul style="list-style-type: none"> • Randomized, controlled, evaluator-blinded clinical study • 24-week follow-up
Indication	Lip contour
Main conclusions	<ul style="list-style-type: none"> • Low intensity of edema/swelling, erythema and pain/tenderness • A majority of patients (90%) remained improved at week 24 (GAIS, blinded evaluator)

Adverse Events: Postmarketing Surveillance

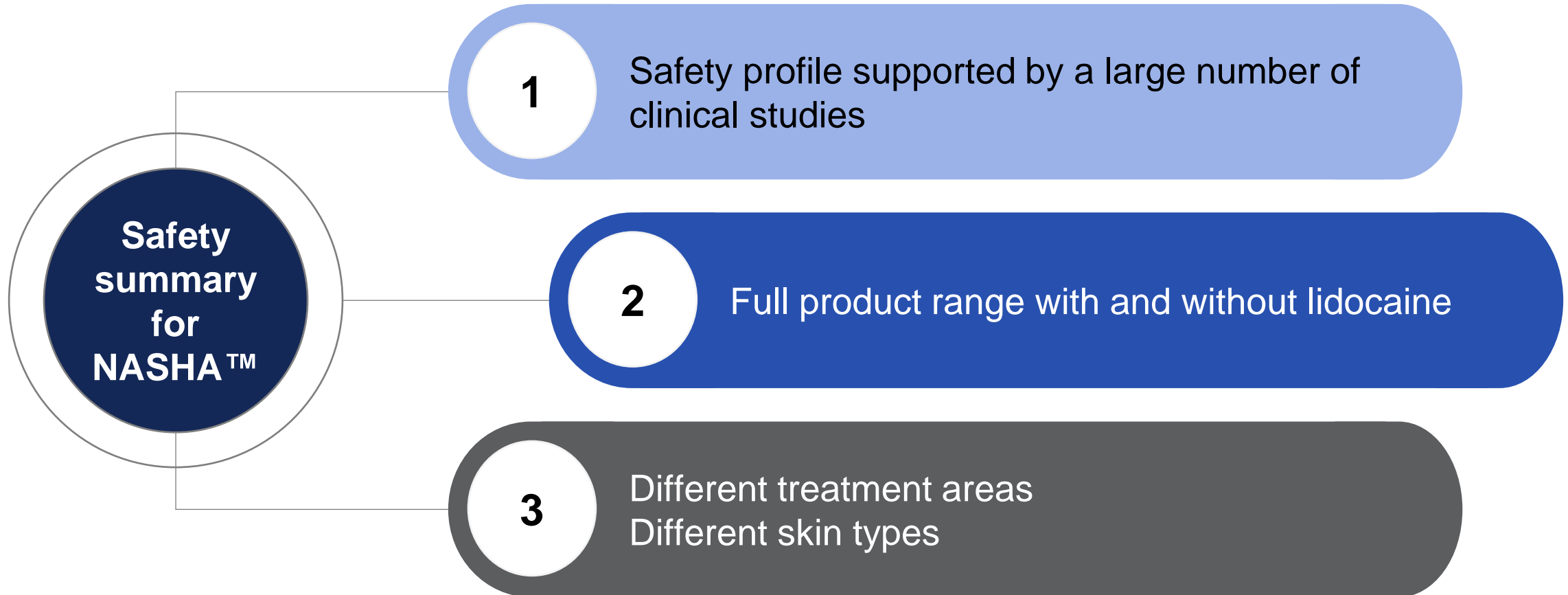
GAIN

- AE reporting frequencies (non-exhaustive list)

The frequency of reporting is based on the number of estimated treatments performed with the Restylane OBT gel products

Reporting Frequency	AE
1/1000 – 1/10,000	Swelling
1/10,000 – 1/50,000	Bruising/bleeding, erythema, infection, inflammation, mass/induration, pain/tenderness, papules/nodules, swelling face
1/50,000 – 1/100,000	Hypersensitivity/angioedema, injection site reactions, nondermatological events
<1/100,000	Blisters/vesicle, capillary disorder, dermatitis, device ineffective, discoloration, herpes, ischemia/necrosis, medical device implantation, other dermatological events, procedural complications, pruritus, scar/scab/skin atrophy

AE, adverse event; OBT, Optimal Balance Technology.
Data on file.



NASHA, nonanimal stabilized hyaluronic acid.



NASHA, nonanimal stabilized hyaluronic acid; OBT, Optimal Balance Technology.

NASHA Indications

GAIN

SKU	Injection Depth	Indication*
Restylane	<ul style="list-style-type: none"> • Mid-to-deep dermis • Submucosa 	<ul style="list-style-type: none"> • Moderate to severe facial wrinkles and folds (eg, nasolabial) • Lip augmentation
Restylane Lyft	<ul style="list-style-type: none"> • Deep dermis to superficial cutis • Subcutaneous to supraperiosteal implantation • Subcutaneous plane in the dorsal hand 	<ul style="list-style-type: none"> • Moderate to severe facial wrinkles and folds (eg, nasolabial) • Cheek augmentation, age-related midface contour deficiencies • Volume deficit in dorsal hand
Restylane Silk†	<ul style="list-style-type: none"> • Mid-to-deep dermis • Submucosa 	<ul style="list-style-type: none"> • Correction of perioral rhytids • Lip augmentation

*Specific indications vary by country/region. Refer to appropriate IFU for details.

†US and Canada only.

IFU, instructions for use; NASHA, nonanimal stabilized hyaluronic acid; SKU, stock keeping unit.

OBT Indications

GAIN

SKU	Injection Depth	Indication*
Restylane Refyne	Mid-to-deep dermis	Moderate to severe facial wrinkles and folds (eg, nasolabial)
Restylane Volyme	Supraperiostic zone or subcutis	Cheeks
Restylane Defyne	Mid-to-deep dermis	Moderate to severe facial wrinkles and folds (eg, nasolabial)
Restylane Kysse	Submucosal layer	Lip augmentation
Restylane Fynesse†	Superficial dermis	Superficial wrinkles (eg, perioral and periorbital lines)

*Specific indications vary by country/region. Refer to appropriate IFU for details.

†Product being phased out.

IFU, instructions for use; OBT, Optimal Balance Technology; SKU, stock keeping unit.

NASHA Clinical Studies, Galderma Sponsored

GAIN

By Indication

Study #	Products	Study Design	N	Follow-up	Reference(s)
Lips					
MA-1300-14	Restylane	Prospective, noncomparative, open label	21	12 weeks	Solish N and Swift A. An open-label, pilot study to assess the effectiveness and safety of hyaluronic acid gel in the restoration of soft tissue fullness of the lips. <i>J Drugs Dermatol.</i> 2011;10(2):145-149.
MA-1300-15	Restylane (n=135) vs no treatment (n=45)	RCT	180	24 weeks	Glogau RG, et al. A randomized, evaluator-blinded, controlled study of the effectiveness and safety of small gel particle hyaluronic acid for lip augmentation. <i>Dermatol Surg.</i> 2012;38(7 Pt 2):1180-1192. Smith SR, et al. Functional safety assessments used in a randomized controlled study of small gel particle hyaluronic acid for lip augmentation. <i>Dermatol Surg.</i> 2015;41(suppl 1):S137-142. Smith SR, et al. Small gel particle hyaluronic acid injection technique for lip augmentation. <i>J Drugs Dermatol.</i> 2013;12(7):764-769.
31GE1102	Restylane Lip Volume Restylane Lip Refresh	Open label, noncomparative	60	36 weeks	Samuelson U, Fagrell D, Wetter A, Kuusk S, Hamilton L, Haglund P. An open-label, multicenter, evaluator-blinded study to assess the efficacy and safety of a new hyaluronic acid-based gel product for lip enhancement. <i>Dermatol Surg.</i> 2015;41(9):1052-1059.
Midface					
43USC1633	Restylane Lyft Lidocaine	Prospective, noncomparative	60	16 weeks	Jones DH, et al. Microcannula injection of large gel particle hyaluronic acid for cheek augmentation and the correction of age-related midface contour deficiencies. <i>Dermatol Surg.</i> 2020;46(4):465-472.
MA-1400-04	Perlane-L	Prospective, open label	40	24 weeks	Bertucci V, et al. Safety and effectiveness of large gel particle hyaluronic acid with lidocaine for correction of midface volume loss. <i>Dermatol Surg.</i> 2013;39(11):1621-1629.
MA-1400-05	Restylane Lyft (n=150) vs no treatment (n=50)	RCT	200	15 months	Weiss RA, et al. Effectiveness and safety of large gel particle hyaluronic acid with lidocaine for correction of midface volume deficit or contour deficiency. <i>Dermatol Surg.</i> 2016;42(6):699-709.
43CH1507	Restylane Perlane Lidocaine vs no treatment	RCT	169	12 months	Not published
05DF1707	Restylane Volyme Restylane Defyne Restylane Lyft Lidocaine	Open label, noncomparative	90	24 weeks	Not published
Nasal Dorsum, Nasal Root					
43CH1310	Restylane Perlane vs no treatment	Randomized, open label	132	6 months + 12 months	Not published

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

NASHA Clinical Studies, Galderma Sponsored

GAIN

By Indication, cont'd

Study #	Products	Study Design	N	Follow-up	Reference(s)
Nasolabial Folds					
40072	Perlane vs Emervel Deep	RCT, split-face	68	12 months	Ascher B, et al. Efficacy and safety of a new hyaluronic acid dermal filler in the treatment of severe nasolabial lines – 6-month interim results of a randomized, evaluator-blinded, intra-individual comparison study. <i>J Cosmet Dermatol.</i> 2011;10(2):94-98. Ascher B, et al. A 12-month follow-up, randomized comparison of effectiveness and safety of two hyaluronic acid fillers for treatment of severe nasolabial folds. <i>Dermatol Surg.</i> 2017;43(3):389-395.
31GE0002	Perlane	RCT, split-face	68	1 year	Lindqvist C, et al. A randomized, evaluator-blind, multicenter comparison of the efficacy and tolerability of Perlane versus Zyplast in the correction of nasolabial folds. <i>Plast Reconstr Surg.</i> 2005;115(1):282-289.
31GE0703	Perlane vs Perlane with lidocaine	RCT, split-face	43	1 year	Hedén P, et al. Injection of stabilized hyaluronic acid-based gel of non-animal origin for the correction of nasolabial folds: comparison with and without lidocaine. <i>Dermatol Surg.</i> 2010;36(1):775-781.
43CH1408	Restylane vs Restylane Lyft	RCT, split-face	100	1 year	Li D, et al. A multi-center comparative efficacy and safety study of two different hyaluronic acid fillers for treatment of nasolabial folds in a Chinese population. <i>J Cosmet Dermatol.</i> 2019;18(3):755-761.
MA-04-003	Restylane retreatment schedule 1 (n=39), Restylane retreatment schedule 2 (n=36)	RCT, split-face	75	18 months	Narins RS, et al. Persistence and improvement of nasolabial fold correction with nonanimal-stabilized hyaluronic acid 100,000 gel particles/mL filler on two retreatment schedules: results up to 18 months on two retreatment schedules. <i>Dermatol Surg.</i> 2008;34(suppl 1):S2-8; discussion S8. Narins RS, et al. Persistence of nasolabial fold correction with a hyaluronic acid dermal filler with retreatment: results of an 18-month extension study. <i>Dermatol Surg.</i> 2011;37(5):644-650.
MA-1100-01	Restylane-L vs Restylane	RCT, split-face	60	2 weeks	Weiss R, et al. Randomized, double-blind, split-face study of small-gel-particle hyaluronic acid with and without lidocaine during correction of nasolabial folds. <i>Dermatol Surg.</i> 2010;36(1):750-759.
MA-1400-01	Restylane vs Perlane	RCT, split-face	150	24 weeks	Hamilton RG, et al. Immunogenicity studies of cosmetically administered nonanimal-stabilized hyaluronic acid particles. <i>Dermatol Surg.</i> 2007;33(suppl 2):S176-185. Taylor SC, et al. Safety of nonanimal stabilized hyaluronic acid dermal fillers in patients with skin of color: a randomized, evaluator-blinded comparative trial. <i>Dermatol Surg.</i> 2009;35(suppl 2):1653-1660. Taylor SC, Burgess CM, Callender VD. Efficacy of variable-particle hyaluronic acid dermal fillers in patients with skin of color: a randomized, evaluator-blinded comparative trial. <i>Dermatol Surg.</i> 2010;36(1):741-749.

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

NASHA Clinical Studies, Galderma Sponsored

GAIN

By Indication, cont'd

Study #	Products	Study Design	N	Follow-up	Reference(s)
Nasolabial Folds, cont'd					
MA-1400-03	Perlane vs Perlane with lidocaine	RCT, split-face	60	14 days	Brandt F, et al. A lidocaine-containing formulation of large-gel particle hyaluronic acid alleviates pain. <i>Dermatol Surg.</i> 2010;36(suppl 3):1876-1885.
31GE0003	Restylane vs Zyplast	RCT, split-face	138	6 months	Narins RS, et al. A randomized, double-blind, multicenter comparison of the efficacy and tolerability of Restylane versus Zyplast for the correction of nasolabial folds. <i>Dermatol Surg.</i> 2003;29(6):588-595.
31GE0308	Restylane	Prospective, noncomparative	86	6 months	Yan X, et al. A multicenter study of the efficacy and safety of Restylane in the treatment of nasolabial folds in China. <i>Plast Reconstr Surg.</i> 2009;124(5):256e-257e.
31GE0701	Restylane Perlane v Juvéderm Ultra Plus	RCT, split-face	60	12 months	Not published
31GE1010	Restylane Perlane vs Hylaform	RCT, split-face	150	6 + 6 months	Carruthers A, et al. Randomized, double-blind comparison of the efficacy of two hyaluronic acid derivatives, Restylane Perlane and Hylaform, in the treatment of nasolabial folds. <i>Dermatol Surg.</i> 2005;31(11 Pt 2):1591-1598; discussion 1598.
43TW1628	Restylane Perlane Lidocaine vs Restylane Perlane	RCT	70	1 month	Not published
43CH1504	Restylane Restylane Lidocaine	RCT	70	2 weeks	Not published
43CH1508	Restylane Defyne vs Restylane	RCT, split-face	175	12 months	Not published
43CH1509	Restylane	Retrospective	300	15 months	Not published
05DF1312	Restylane	Open label, noncomparative	110	12 months	Not published
40073	Restylane Emervel Classic	RCT, split-face	81	18 months	Rzany B, et al. Efficacy and safety of a new hyaluronic acid dermal filler in the treatment of moderate nasolabial folds: 6-month interim results of a randomized, evaluator-blinded, intra-individual comparison study. <i>J Cosmet Laser Ther.</i> 2011;13(3):107-112. Rzany B, et al. An 18-month follow-up, randomized comparison of effectiveness and safety of two hyaluronic acid fillers for treatment of moderate nasolabial folds. <i>Dermatol Surg.</i> 2017;43(1):58-65.

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

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Continued411

NASHA Clinical Studies, Galderma Sponsored

GAIN

By Indication, cont'd

Study #	Products	Study Design	N	Follow-up	Reference(s)
Multiple Indications					
31GD0303	Restylane SubQ	Prospective, noncomparative, open-label	57	1 year	DeLorenzi C, et al. Multicenter study of the efficacy and safety of subcutaneous non-animal-stabilized hyaluronic acid in aesthetic facial contouring: interim report. <i>Dermatol Surg.</i> 2006;32(2):205-211. DeLorenzi C, et al. The long-term efficacy and safety of a subcutaneously injected large-particle stabilized hyaluronic acid-based gel of nonanimal origin in aesthetic facial contouring. <i>Dermatol Surg.</i> 2009;35(suppl 1):313-321.
29097	Restylane Lidocaine, Perlane Lidocaine, Restylane Sub-Q Lidocaine, Restylane Lip Volume, or Restylane Lip Refresh plus Azzalure	Prospective, open-label	60	6 months	Molina B, et al. Patient satisfaction and efficacy of full-facial rejuvenation using a combination of botulinum toxin type A and hyaluronic acid filler. <i>Dermatol Surg.</i> 2015;41(suppl 1):S325-332.
05PDF1401	Restylane Refyne, Restylane Defyne, Restylane Lidocaine, or Restylane Lyft Lidocaine (n=33) vs Azzalure/Dysport (n=32) vs Azzalure/Dysport + HA filler + Restylane Skinboosters Vital Lidocaine or Restylane Skinboosters Vital (n=65)	RCT, parallel group	65	18 months	Hedén P, et al. Effective and safe repeated full-face treatments with abobotulinumtoxinA, hyaluronic acid filler, and skin boosting hyaluronic acid. <i>J Drugs Dermatol.</i> 2019;18(7):682-689. Hexsel D, et al. Efficacy, safety, and subject satisfaction after abobotulinumtoxinA treatment of upper facial lines. <i>Dermatol Surg.</i> 2018;44(12):1555-1564.
MA-1400-02	Restylane (n=142) vs Perlane (n=141)	RCT	283	24 weeks	Hamilton RG, et al. Immunogenicity studies of cosmetically administered nonanimal-stabilized hyaluronic acid particles. <i>Dermatol Surg.</i> 2007;33(suppl 2):S176-185. Glogau RG and Kane MA. Effect of injection techniques on the rate of local adverse events in patients implanted with nonanimal hyaluronic acid gel dermal fillers. <i>Dermatol Surg.</i> 2008;34(suppl 1):S105-109. Dover JS, et al. Review of the efficacy, durability, and safety data of two nonanimal stabilized hyaluronic acid fillers from a prospective, randomized, comparative, multicenter study. <i>Dermatol Surg.</i> 2009;35(suppl 1):322-330; discussion 330-331.
MA-1900-01	Restylane, Perlane	Prospective, noncomparative, open-label	20	4 weeks	Brandt F, et al. Safety and effectiveness of small and large gel-particle hyaluronic acid A23:G28in the correction of perioral wrinkles. <i>J Drugs Dermatol.</i> 2011;10(9):982-987.
MA-1900-02	Restylane Lidocaine, Restylane Perlane Lidocaine	Prospective, noncomparative, open-label	40	4 weeks	Not published

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

NASHA Clinical Studies, Galderma Sponsored

GAIN

By Indication, cont'd

Study #	Products	Study Design	N	Follow-up	Reference(s)
Multiple Indications, cont'd					
05DF1315	Restylane Lidocaine vs Restylane Perlane Lidocaine	Open label, noncomparative	100	24 months	Huang SH and Tsai TF. Safety and effectiveness of hyaluronic acid fillers with lidocaine for full-face treatment in Asian patients. <i>J Drugs Dermatol.</i> 2020;19(9):836-842.
05DF1211	Emervel Classic Lidocaine, Emervel Deep Lidocaine, Restylane Lidocaine, Restylane Perlane Lidocaine, Restylane Vital Lidocaine, Azzalure	RCT, parallel group	61	18 months	Cartier H, et al. Repeated full-face aesthetic combination treatment with abobotulinumtoxinA, hyaluronic acid filler, and skin-boosting hyaluronic acid after monotherapy with abobotulinumtoxinA or hyaluronic acid filler. <i>Dermatol Surg.</i> 2020;46(4):475-482.

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

NASHA Clinical Studies, Not Sponsored

GAIN

By Indication

Reference	Study Design	N	Products	Follow-up
Acne Scars				
Dierickx C, et al. Effectiveness and safety of acne scar treatment with nonanimal stabilized hyaluronic acid gel. <i>Dermatol Surg.</i> 2018;44(suppl 1):S10-S18.	Prospective, noncomparative	12	Restylane Skinboosters Vital Lidocaine	36 weeks
Halachmi S, et al. Treatment of acne scars with hyaluronic acid: an improved approach. <i>J Drugs Dermatol.</i> 2013;12(7):e121-123.	Prospective, noncomparative	12	Restylane Skinboosters Vital	Not specified
Arms				
Distante F, et al. Stabilized hyaluronic acid of non-animal origin for rejuvenating the skin of the upper arm. <i>Dermatol Surg.</i> 2009;35(suppl 1):389-393;discussion 394.	Prospective, noncomparative, open label	16	Restylane Skinboosters Vital	90 days
Vartanian AJ, et al. Injected hyaluronidase reduces Restylane-mediated cutaneous augmentation. <i>Arch Facial Plast Surg.</i> 2005;7(4):231-237.	Prospective, noncomparative	12	Restylane	120 days
Wang F, et al. In vivo stimulation of de novo collagen production caused by cross-linked hyaluronic acid dermal filler injections in photodamaged human skin. <i>Arch Dermatol.</i> 2007;143(2):155-163.	Prospective, comparative	11	Restylane vs no treatment	13 weeks
Cheek/Midface				
Kersch M, et al. Rejuvenating influence of a stabilized hyaluronic acid-based gel of nonanimal origin on facial skin aging. <i>Dermatol Surg.</i> 2008;34(5):720-726.	Prospective, noncomparative	19	Restylane Skinboosters Vital	12 weeks
Reuther T, et al. Effects of a three-session skin rejuvenation treatment using stabilized hyaluronic acid-based gel of non-animal origin on skin elasticity: a pilot study. <i>Arch Dermatol Res.</i> 2010;302(1):37-45.	Prospective, noncomparative	19	Restylane Skinboosters Vital	24 weeks
Roh NK, et al. A split-face study of the effects of a stabilized hyaluronic acid-based gel of nonanimal origin for facial skin rejuvenation using a stamp-type multineedle injector: a randomized clinical trial. <i>Plast Reconstr Surg.</i> 2016;137(3):809-816.	RCT, split-face	25	Restylane Skinboosters Vital and Vital Injector	12 weeks
Sito G. Transoral injection of Restylane SubQ for aesthetic contouring of the cheeks. <i>Aesthet Surg J.</i> 2006;26(1S):S22-27.	Prospective, noncomparative	52	Restylane SubQ	10 months
Taub AF. Cheek augmentation improves feelings of facial attractiveness. <i>J Drugs Dermatol.</i> 2012;11(9):1077-1080.	Prospective, comparative	10	Perlane vs no treatment	2 weeks
Nikolis A, et al. The role of clinical examination in midface volume correction using hyaluronic acid fillers: Should patients be stratified by skin thickness? <i>Aesthet Surg J Open Forum.</i> 2020;2(1):ojaa005.	Prospective, comparative, open label, phase 4	30	Restylane Lyft	4 months

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

NASHA Clinical Studies, Not Sponsored

GAIN

By Indication, cont'd

Reference	Study Design	N	Products	Follow-up
Facial Lipoatrophy				
Bugge H, et al. Hyaluronic acid treatment of facial fat atrophy in HIV-positive patients. <i>HIV Med.</i> 2007;8(8):475-482.	Prospective, noncomparative	20	Restylane SubQ	52 weeks
Denton AB and Tsaparas Y. Injectable hyaluronic acid for the correction of HIV-associated facial lipoatrophy. <i>Otolaryngol Head Neck Surg.</i> 2007;136(4):563-567.	Prospective, noncomparative	18	Perlane	1 year
Skeie L, et al. Large particle hyaluronic acid for the treatment of facial lipoatrophy in HIV-positive patients: 3-year follow-up study. <i>HIV Med.</i> 2010;11(3):170-177.	Prospective, noncomparative	20	Restylane SubQ	3 year
Glabellar Lines				
Carruthers J and Carruthers A. A prospective, randomized, parallel group study analyzing the effect of BTX-A (Botox) and nonanimal sourced hyaluronic acid (NASHA, Restylane) in combination compared with NASHA (Restylane) alone in severe glabellar rhytides in adult female subjects: treatment of severe glabellar rhytides with a hyaluronic acid derivative compared with the derivative and BTX-A. <i>Dermatol Surg.</i> 2003;29(8):802-809.	RCT	38	Restylane + Botox (n=19) vs Restylane (n=19)	32 weeks
Kono T, et al. Randomized, evaluator-blind, split-face comparison study of single cross-linked versus double cross-linked hyaluronic acid in the treatment of glabellar lines. <i>Dermatol Surg.</i> 2008;34(suppl 1):S25-30.	RCT, split-face	10	Restylane vs Puragen	1 year
Hands				
Brandt FS, et al. Long-term effectiveness and safety of small gel particle hyaluronic acid for hand rejuvenation. <i>Dermatol Surg.</i> 2012;38(7 Pt 2):1128-1135.	Prospective, noncomparative, open label	16	Restylane	1 year
Man J, et al. A double-blind, comparative study of nonanimal-stabilized hyaluronic acid versus human collagen for tissue augmentation of the dorsal hands. <i>Dermatol Surg.</i> 2008;34(8):1026-1031.	RCT	10	Restylane vs Cosmoplast	6 months
Moradi A., et al. A prospective, multicenter, randomized, evaluator-blinded, split-hand study to evaluate the effectiveness and safety of large-gel-particle hyaluronic acid with lidocaine for the correction of volume deficits in the dorsal hand. <i>Plast Reconstr Surg.</i> 2019;144(4):586e-596e.	RCT, split-hand	90	Restylane Lyft with Lidocaine	24 weeks
Wu Y, et al. A randomized study showing improved skin quality and aesthetic appearance of dorsal hands after hyaluronic acid gel treatment in a Chinese population. <i>J Cosmet Dermatol.</i> 2020;19(7):1627-1635.	RCT, split-hand	100	Restylane Skinboosters Vital	15 months

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

NASHA Clinical Studies, Not Sponsored

GAIN

By Indication, cont'd

Reference	Study Design	N	Products	Follow-up
Lips				
Downie J, et al. A double-blind, clinical evaluation of facial augmentation treatments: a comparison of PRI 1, PRI 2, Zyplast and Perlane. <i>J Plast Reconstr Aesthet Surg.</i> 2009;62(12):1636-1643.	RCT	79	Perlane (n=23) vs PRI 1 (n=19), PRI 2 (n=19), or Zyplast (n=18)	1 year
Jacono AA. A new classification of lip zones to customize injectable lip augmentation. <i>Arch Facial Plast Surg.</i> 2008;10(1):25-29.	Case series, prospective	66	Restylane	Not specified
Zazzaron M. Customized lip enhancement for clinical different lip features: an observational study. <i>J Cosmet Dermatol.</i> 2020;19(1):38-46.	Case series, retrospective	40	Restylane, Restylane Skinbooster Vital, Restylane Lidocaine, and Restylane Kysse	12 weeks
Nasolabial Folds				
Beer K. A randomized, evaluator-blinded comparison of efficacy of hyaluronic acid gel and avian-sourced hylan B plus gel for correction of nasolabial folds. <i>Dermatol Surg.</i> 2007;33(8):928-936.	RCT, split-face	15	Restylane vs Hylaform Plus	6 months
Dai X, et al. Safety and effectiveness of hyaluronic acid dermal filler in correction of moderate-to-severe nasolabial folds in Chinese subjects. <i>Clin Cosmet Investig Dermatol.</i> 2019;12:57-62.	RCT, split-face	120	Restylane vs Princess® VOLUME	52 weeks
Hong JY, et al. Randomized, patient/evaluator-blinded, intraindividual comparison study to evaluate the efficacy and safety of a novel hyaluronic acid dermal filler in the treatment of nasolabial folds. <i>Dermatol Surg.</i> 2018;44(4):542-548.	RCT, split-face	91	Restylane SubQ vs IDHF-001	48 weeks
Lupo MP, et al. The effect of lidocaine when mixed with large gel particle hyaluronic acid filler tolerability and longevity: a six-month trial. <i>J Drugs Dermatol.</i> 2010;9(9):1097-1100.	RCT, split-face	18	Perlane plus lidocaine vs Perlane	6 months
Nikolis A, et al. A randomized, split-face, double-blind, comparative study of the safety and efficacy of small- and large-particle hyaluronic acid fillers for the treatment of nasolabial folds. <i>J Cosmet Dermatol.</i> 2020;20(5):1450-1458.	Prospective, comparative, split-face, randomized	10	Restylane + Lidocaine vs Restylane Lift	1 month
Noh TK., et al. Effects of highly concentrated hyaluronic acid filler on nasolabial fold correction: a 24-month extension study. <i>J Dermatolog Treat.</i> 2016;27(6):510-514.	RCT, extension study, split-face	81	Perlane	24 months
Royo de la Torre J, et al. The evaluation of hyaluronic acid, with and without lidocaine, in the filling of nasolabial folds as measured by ultrastructural changes and pain management. <i>J Drugs Dermatol.</i> 2013;12(3):e46-52.	RCT	119	Perlane (n=62) vs Perlane plus lidocaine (n=57)	1 year
Nose				
Chen L, et al. Comparison of Artecoll, Restylane and silicone for augmentation rhinoplasty in 378 Chinese patients. <i>Clin Invest Med.</i> 2014;37(4):E203-210.	Prospective, comparative	378	Restylane (n=126) vs Artecoll (n=126) or silicone implants (n=126)	1 year
Xue K, et al. Multiplane hyaluronic acid rhinoplasty. <i>Plast Reconstr Surg.</i> 2012;129(2):371e-372e.	Case series, retrospective	50	Restylane-2	8–12 months

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

NASHA Clinical Studies, Not Sponsored

GAIN

By Indication, cont'd

Reference	Study Design	N	Products	Follow-up
Oral Commissures				
Carruthers J, et al. Safety and efficacy of nonanimal stabilized hyaluronic acid for improvement of mouth corners. <i>Dermatol Surg.</i> 2005;31(3):276-280.	Prospective, noncomparative	15	Restylane	6 months
Periorbital				
Choi HS, et al. Modifying the upper eyelid crease in Asian patients with hyaluronic acid fillers. <i>Plast Reconstr Surg.</i> 2011;127(2):844-849.	Case series, retrospective, noncomparative	7	Restylane	18 months
Goldberg RA and Fiaschetti D. Filling the periorbital hollows with hyaluronic acid gel: initial experience with 244 injections. <i>Ophthalmic Plast Reconstr Surg.</i> 2006;22(5):335-341; discussion 341-343.	Retrospective, noncomparative	155	Restylane	Varied from no follow-up to >3 months
Zamani M, et al. Adjunctive use of hyaluronic acid gel (Restylane Sub-Q) in anophthalmic volume deficient sockets and phthisical eyes. <i>Ophthalmic Plast Reconstr Surg.</i> 2010;26(4):250-253.	Case series, prospective	16	Restylane Sub-Q	12 months
Tear Trough				
Berros P, et al. Hyalurostructure treatment: superior clinical outcome through a new protocol-a 4-year comparative study of two methods for tear trough treatment. <i>Plast Reconstr Surg.</i> 2013;132(6):924e-931e.	Retrospective, comparative	176	Restylane Protocol A (n=41) vs Restylane Protocol B (n=135)	1 year
Donath AS, et al. Quantitative evaluation of volume augmentation in the tear trough with a hyaluronic acid-based filler: a three-dimensional analysis. <i>Plast Reconstr Surg.</i> 2010;125(5):1515-1522.	Prospective, noncomparative, case series	20	Restylane	23 months
Hill RH, 3rd, et al. Evolving minimally invasive techniques for tear trough enhancement. <i>Ophthalmic Plast Reconstr Surg.</i> 2015;31(4):306-309.	Prospective	12	Restylane Perlane	6 weeks
Lim HK, et al. Rejuvenation effects of hyaluronic acid injection on nasojugal groove: prospective randomized split face clinical controlled study. <i>J Cosmet Laser Ther.</i> 2014;16(1):32-36.	RCT, split-face	10	Restylane Skinboosters Vital vs no treatment	6 months
Morley, AM and Malhotra R. Use of hyaluronic acid filler for tear-trough rejuvenation as an alternative to lower eyelid surgery. <i>Ophthalmic Plast Reconstr Surg.</i> 2011;27(2):69-73.	Case series	100	Perlane	18 months
Tung R, et al. Brighter eyes: combined upper cheek and tear trough augmentation: a systematic approach utilizing two complementary hyaluronic acid fillers. <i>J Drugs Dermatol.</i> 2012;11(9):1094-1097.	Case series, comparative	21	Restylane + Perlane vs no treatment	20 weeks
Temples				
Moradi A, et al. A 12-month, prospective, evaluator-blinded study of small gel particle hyaluronic acid filler in the correction of temporal fossa volume loss. <i>J Drugs Dermatol.</i> 2013;12(4):470-475.	Prospective, noncomparative, open label	20	Restylane	12 months

NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

NASHA Clinical Studies, Not Sponsored

GAIN

By Indication, cont'd

Reference	Study Design	N	Products	Follow-up
Temples, cont'd				
Ross JJ and Malhotra R. Orbitofacial rejuvenation of temple hollowing with Perlane injectable filler. <i>Aesthet Surg J.</i> 2010;30(3):428-433.	Retrospective, interventional case series	20	Perlane	Up to 14 months
Multiple Indications				
Lowe NJ and Grover R. Injectable hyaluronic acid implant for malar and mental enhancement. <i>Dermatol Surg.</i> 2006;32(7):881-885;discussion 885.	Prospective, noncomparative	72	Restylane SubQ	64 weeks
Nikolis A and Enright KM. Evaluating the role of small particle hyaluronic acid fillers using micro-droplet technique in the face, neck and hands: a retrospective chart review. <i>Clin Cosmet Investig Dermatol.</i> 2018;11:467-475.	Retrospective, chart review, noncomparative	20	Restylane Skinbooster	12 weeks
Streker M, et al. Stabilized hyaluronic acid-based gel of non-animal origin for skin rejuvenation: face, hand, and décolletage. <i>J Drugs Dermatol.</i> 2013;12(9):990-994.	Prospective, comparative	30	Restylane Skinboosters Vital Light and micropuncture injector device	36 weeks
Biesman BS and Bowe WP. Effect of midfacial volume augmentation with non animal stabilized hyaluronic acid on the nasolabial fold and global aesthetic appearance. <i>J Drugs Dermatol.</i> 2015;14(9):943-947.	Prospective, noncomparative	20	Perlane	6 months
Cartier H, et al. Repeated full-face aesthetic combination treatment with abobotulinumtoxinA, hyaluronic acid filler, and skin-boosting hyaluronic acid after monotherapy with abobotulinumtoxinA or hyaluronic acid filler. <i>Dermatol Surg.</i> 2020;46(4):475-482.	RCT	61	Restylane Lidocaine, Restylane Lyft Lidocaine, Restylane Refyne, or Restylane Defyne (n=31), or Azzalure (n=30) monotherapy vs full-face combination treatments with Azzalure, Restylane filler, and Restylane Skinboosters Vital Lidocaine (n=61)	18 months
Oduze M, et al. Restylane and people of color. <i>Plast Reconstr Surg.</i> 2007;120(7):2011-2016.	Retrospective	60	Restylane	9 months
Morris CL, et al. Patient-preferred sites of Restylane injection in periocular and facial soft-tissue augmentation. <i>Ophthalmic Plast Reconstr Surg.</i> 2008;24(2):117-121.	Case series, retrospective	145	Restylane	Median 8 months
Kanchwala SK, et al. Reliable soft tissue augmentation: a clinical comparison of injectable soft-tissue fillers for facial-volume augmentation. <i>Ann Plast Surg.</i> 2005;55(1):30-35; discussion 35.	Retrospective	976	Restylane (n=86) vs Radiesse (n=141), Hylaform (52), or autologous fat (n=697)	1 year
McCracken MS, et al. Hyaluronic acid gel (Restylane) filler for facial rhytids: lessons learned from American Society of Ophthalmic Plastic and Reconstructive Surgery member treatment of 286 patients. <i>Ophthalmic Plast Reconstr Surg.</i> 2006;22(3):188-191.	Retrospective	286	Restylane	Not specified
Beer KR, et al. Remodeling of periorbital, temporal, glabellar, and crow's feet areas with hyaluronic acid and botulinum toxin. <i>J Cosmet Dermatol.</i> 2014;13(2):143-150.	Prospective, noncomparative, open label	20	Perlane + Dysport vs Dysport	9 months

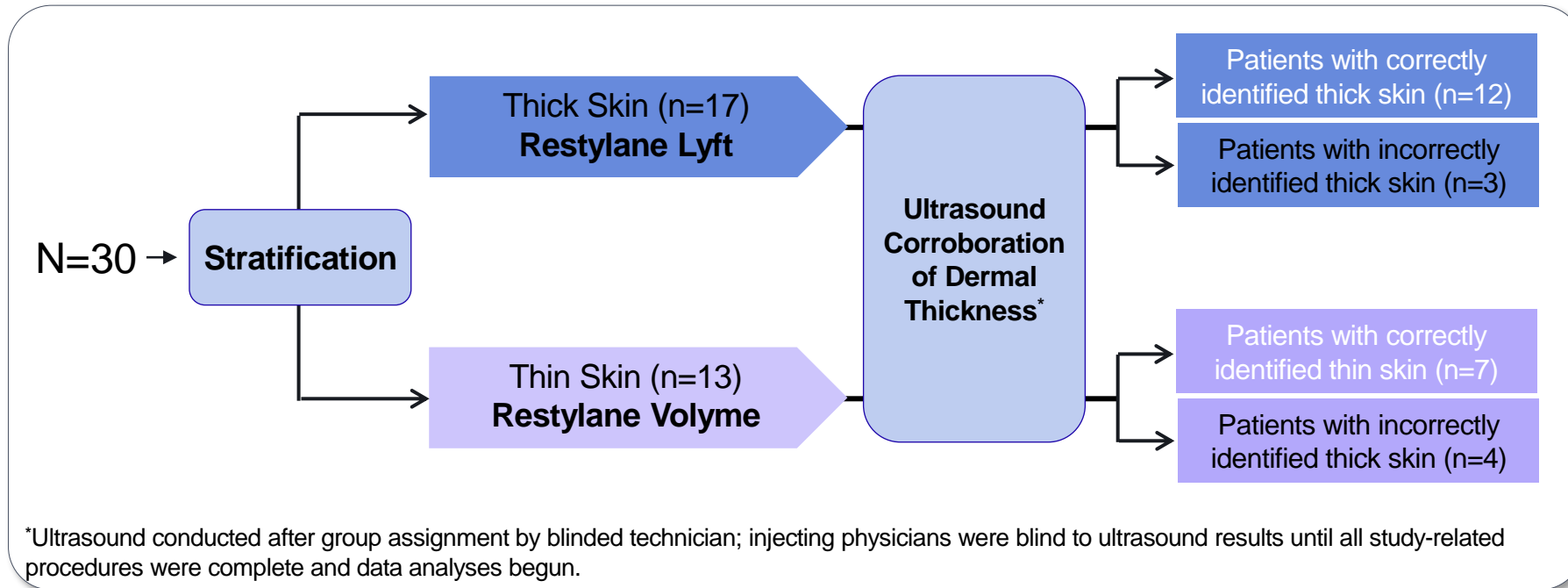
NASHA, nonanimal stabilized hyaluronic acid, RCT, randomized controlled trial.

Should Patients Be Stratified Based on Skin Thickness?

GAIN

16-Week, Prospective, Single-Center Trial in Patients Treated for Midface Volume Loss or Contour Deficiency (N=30)¹

Patients were stratified based on skin thickness and assigned to receive either Restylane Lyft (patients with thick skin) or Restylane Volyme (patients with thin skin)



Primary Efficacy Measure

- Change from baseline at week 16 in physician-assessed GAIS score

Secondary Efficacy Measures

- Between-group comparisons of
- Physician-assessed GAIS scores
 - MMVS scores (blinded review)
 - PSQ results

GAIS, Global Aesthetic Improvement Scale; MMVS, Medicis Midface Volume Scale; PSQ, Patient Satisfaction Questionnaire.

1. Nikolis A, et al. *Aesthet Surg J Open Forum*. 2020;2(1):0jaa005.

Should Patients Be Stratified Based on Skin Thickness?

GAIN

PSQ, GAIS, and MMVS response rates per subgroup at week 16

Treatment Group, n (%)	PSQ, n (%)		GAIS score, n (%)				MMVS (Right Side), n (%)		MMVS (Left Side), n (%)	
	Extremely Satisfied	Satisfied	Very Much Improved	Much Improved	Improved	No Change	0	1	0	1
Restylane Lyft										
Correctly identified with thick skin, 12 (46.15)	8 (66.66)	4 (33.33)	2 (16.66)	7 (58.33)	3 (25.0)	0	3 (30.0)	7 (70.0)	2 (20.0)	8 (80.0)
Incorrectly identified with thick skin, 3 (11.53)	1 (33.33)	2 (66.66)	0	1 (33.33)	1 (33.33)	1 (33.33)	0	3 (100.0)	3 (50.0)	3 (50.0)
Restylane Volyme										
Correctly identified with thin skin, 7 (26.92)	3 (42.85)	4 (57.14)	0	2 (28.57)	5 (71.42)	0	1 (16.66)	5 (83.33)	1 (16.66)	5 (83.33)
Incorrectly identified with thin skin, 4 (15.38)	3 (75.0)	1 (25.0)	3 (75.0)	1 (25.0)	0	0	0	4 (100.0)	1 (25.0)	3 (75.0)

MMVS response rate was defined as an at least 1-point improvement.

GAIS, Global Aesthetic Improvement Scale; MMVS, Medicis Midface Volume Scale; PSQ, Patient Satisfaction Questionnaire.

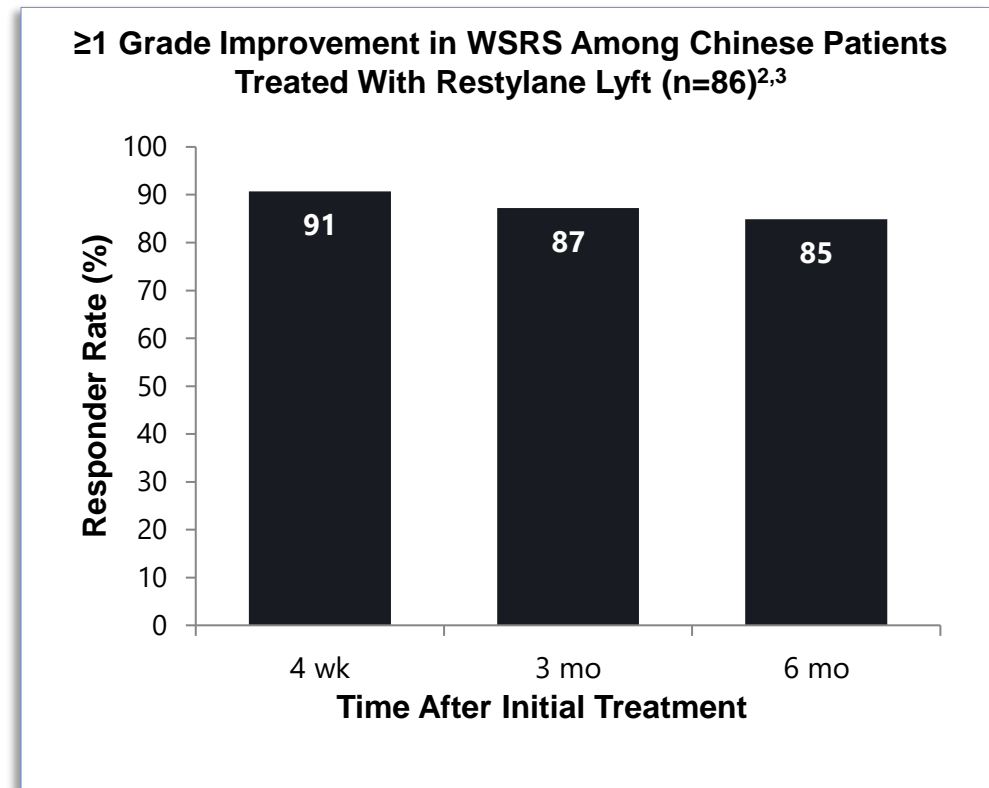
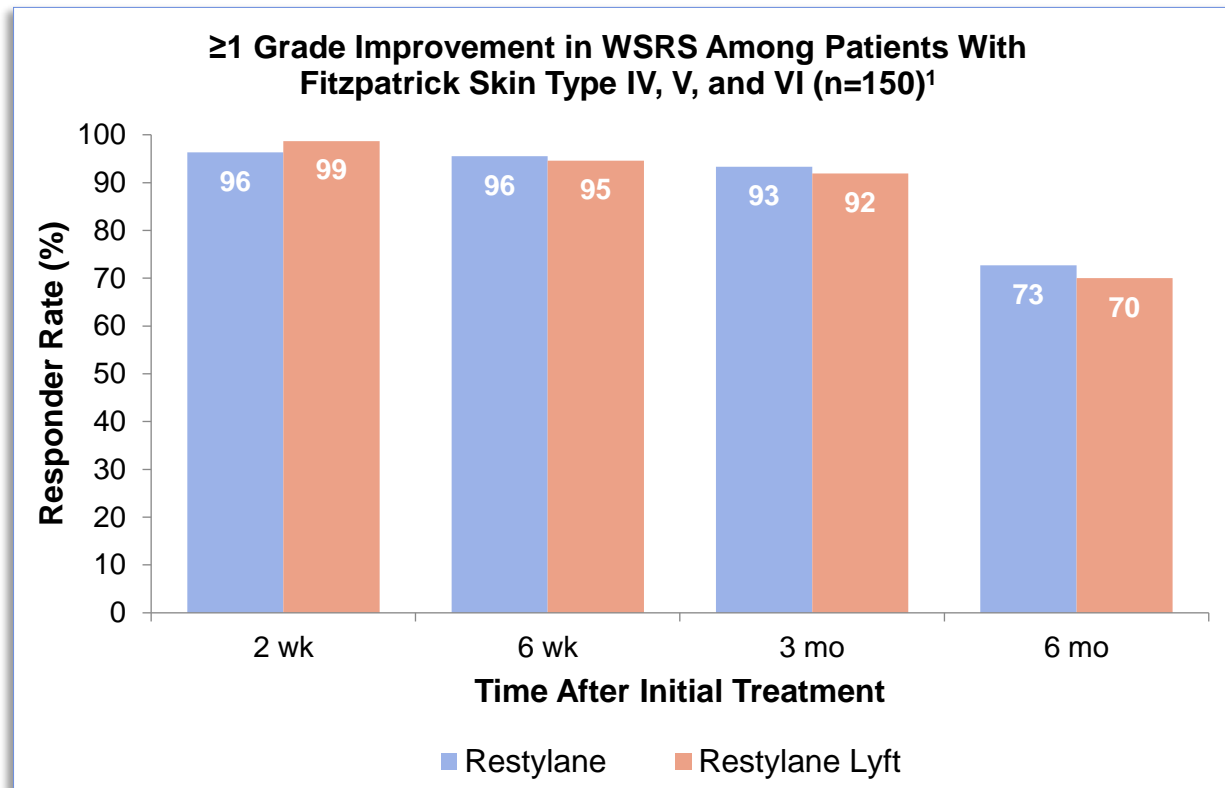
Nikolis A, et al. *Aesthet Surg J Open Forum*. 2020;2(1):0jaa005

Efficacy in Persons of Color

GAIN

Restylane and Restylane Lyft Are Effective in Patients With a Wide Variety of Skin Types

≥70% of patients with Type IV, V, and VI skin types showed sustained reductions in NLF severity following treatment with Restylane or Restylane Lyft,¹ as did 85% of Chinese patients treated with Restylane Lyft²

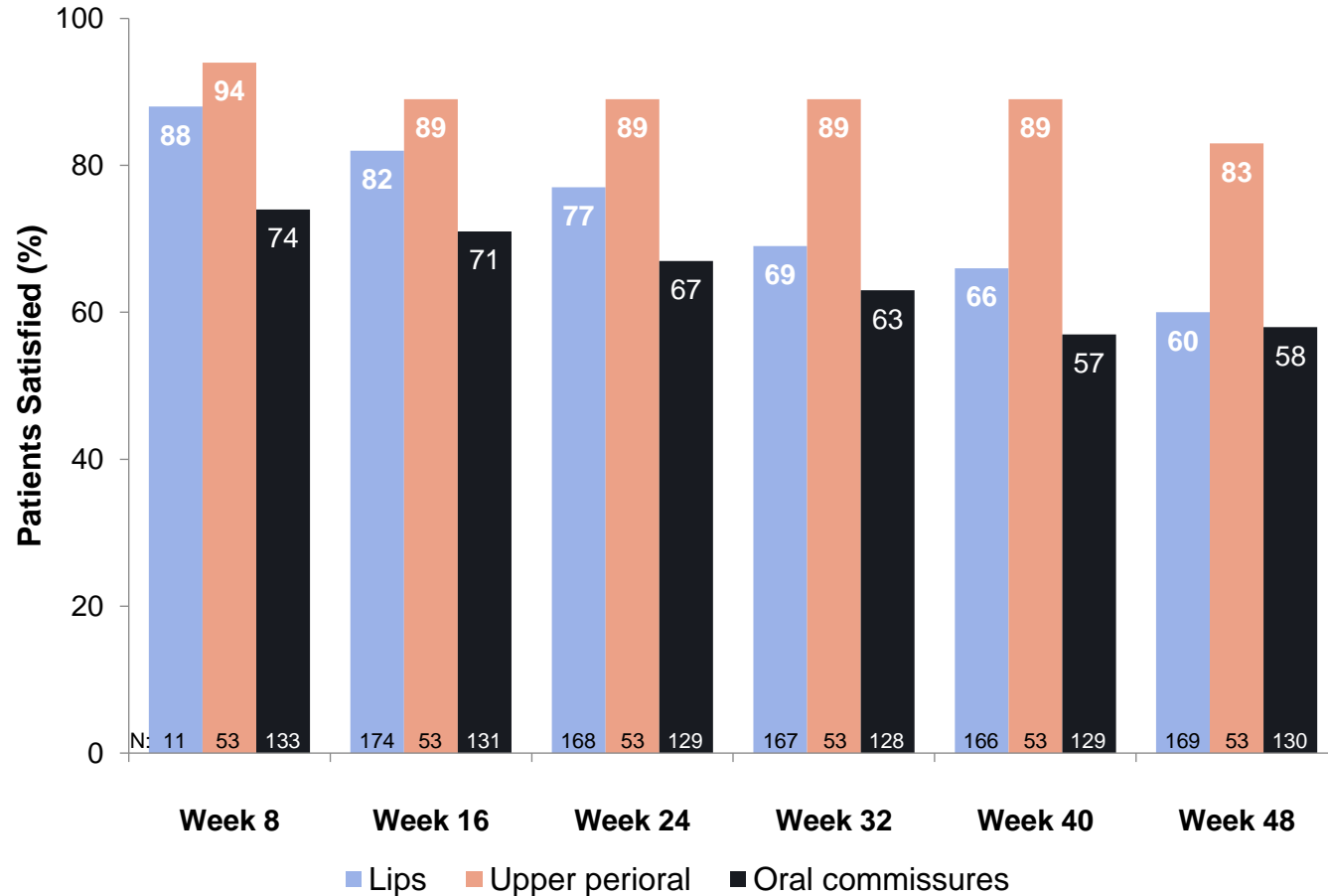


NLF, nasolabial fold; WSRS, Wrinkle Severity Rating Scale.

1. Taylor SC, et al. *Dermatol Surg.* 2010;36:741-749; 2. Yan X, et al. *Plast Reconstr Surg.* 2009;24(5):256; 3. Data on file. Galderma Laboratories, L.P.

Efficacy and Safety - Restylane® KYSSE - Lip Fullness Augmentation

GAIN



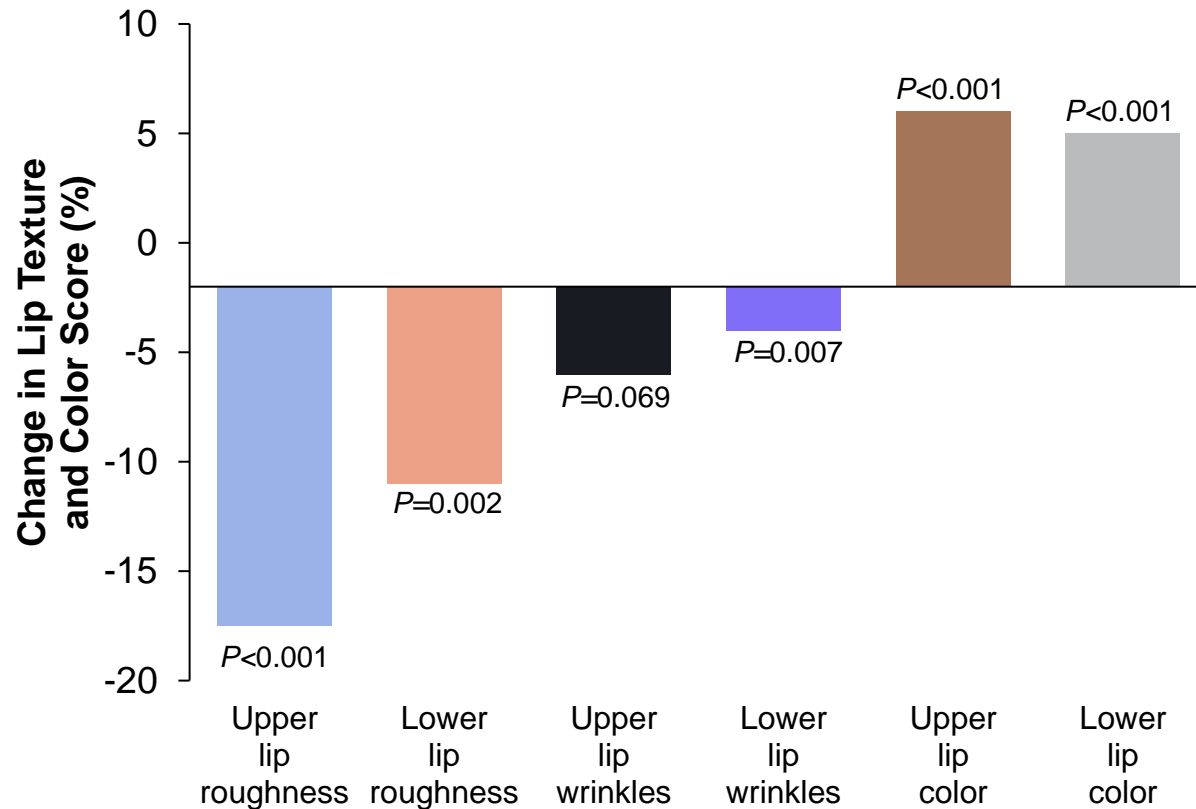
- This graph shows the responder rates from week 8 till week 48
- The average patients' satisfaction score peaked at week 8 after treatment with Restylane® KYSSE and remained higher than the baseline score through week 48
- There were no treatment-emergent adverse events reported for most patients after the treatment

Study product	RESTYLANE® KYSSE
Design	A randomized, controlled, evaluator-blinded, multicenter study
Indication	Lip fullness augmentation
Main conclusions	<ul style="list-style-type: none"> • Restylane® KYSSE was noninferior in lip fullness augmentation at week 8 • Well tolerated and effective throughout the 48-week study

Weiss R, et al. *Dermatol Surg.* 2021;00:527-532.

Efficacy: Quantitative Assessment - Restylane® KYSSE

GAIN

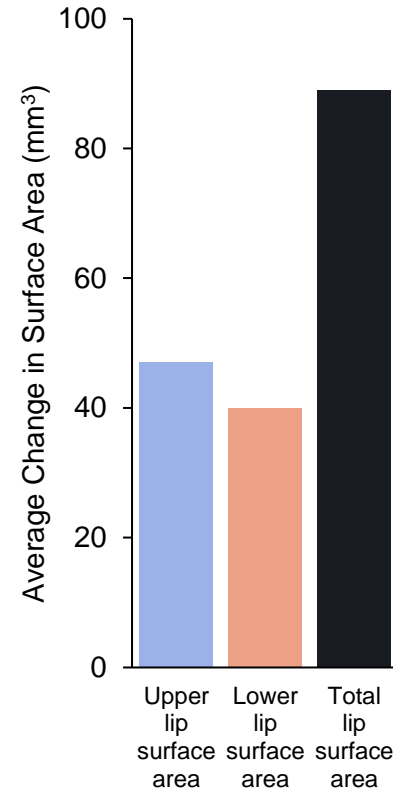
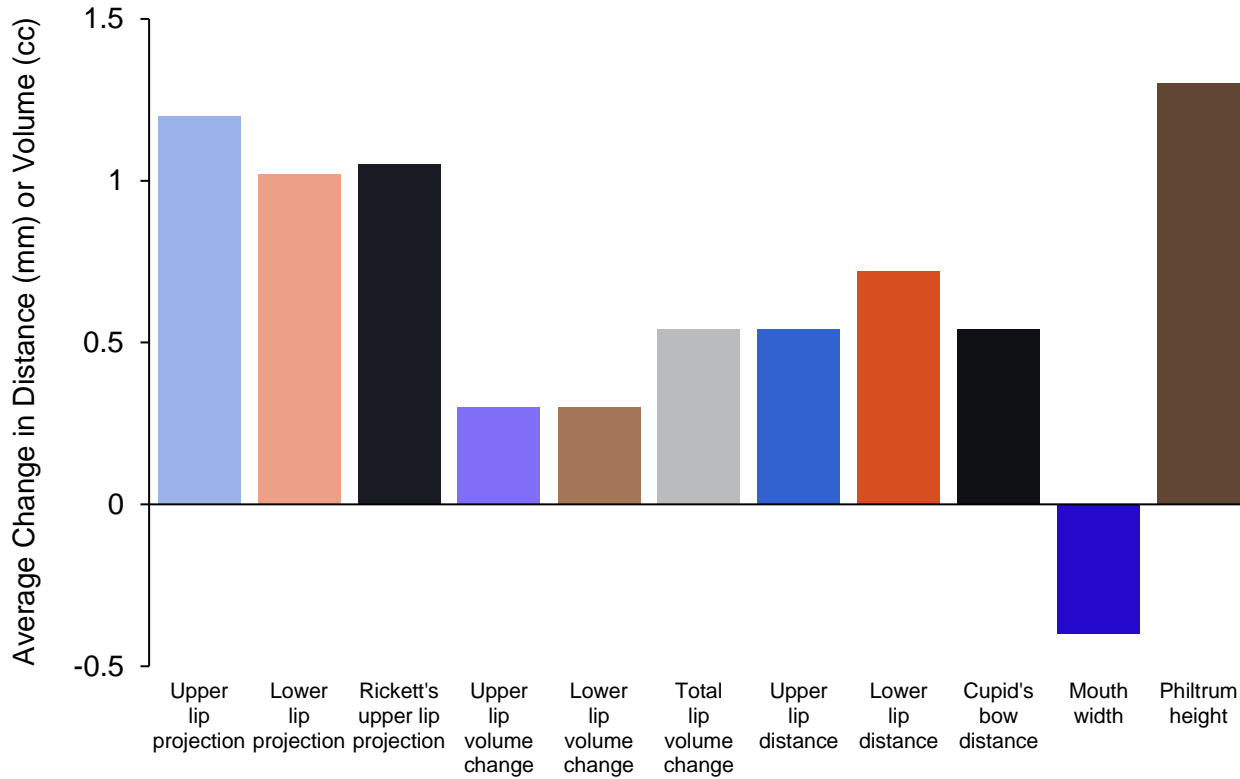


- This graph shows improvement in lip texture and lip colour, that is, redness following the treatment at week 8
- It shows a decrease in the mean values of upper lip and lower lip roughness and wrinkles and an increase in the mean values for upper and lower lip color

Study product	RESTYLANE® KYSSE
Design	8-week open-label, phase IV multicenter study 2D and 3D photographic assessments
Indications	Lip texture, color (redness), lip fullness, and lip and perioral surface stretch (dynamic strain)
Main conclusions	<ul style="list-style-type: none"> • A significant improvement in lip texture, lip color and fullness • A significant increase in dynamic strain

Efficacy: Quantitative Assessment - Restylane® KYSSE

GAIN



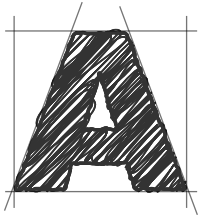
- The graph here shows the average change in lip enhancement and surface area at week 8
- The total lip volume and surface area increased significantly following treatment with Restylane® KYSSE

Study product	RESTYLANE® KYSSE
Design	8-week open-label, phase IV multicenter study 2D and 3D photographic assessments
Indications	Lip texture, color (redness), lip fullness, and lip and perioral surface stretch (dynamic strain)
Main conclusions	<ul style="list-style-type: none"> • A significant improvement in lip texture, lip color, and fullness • A significant increase in dynamic strain

The background features a collage of faces, with a prominent grid pattern of small white squares on the right side. The overall color palette is muted, with shades of blue, purple, and grey.

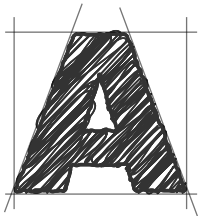
HIT & AART

AART is a methodology to create individualized treatment in facial aesthetics



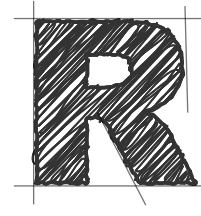
ASSESSMENT

Identify patients' needs and define improvement areas



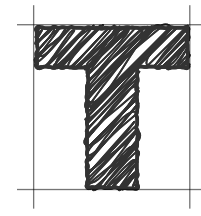
ANATOMY

Understand the underlying anatomy



RANGE

Understanding the properties, uses, and science behind each product

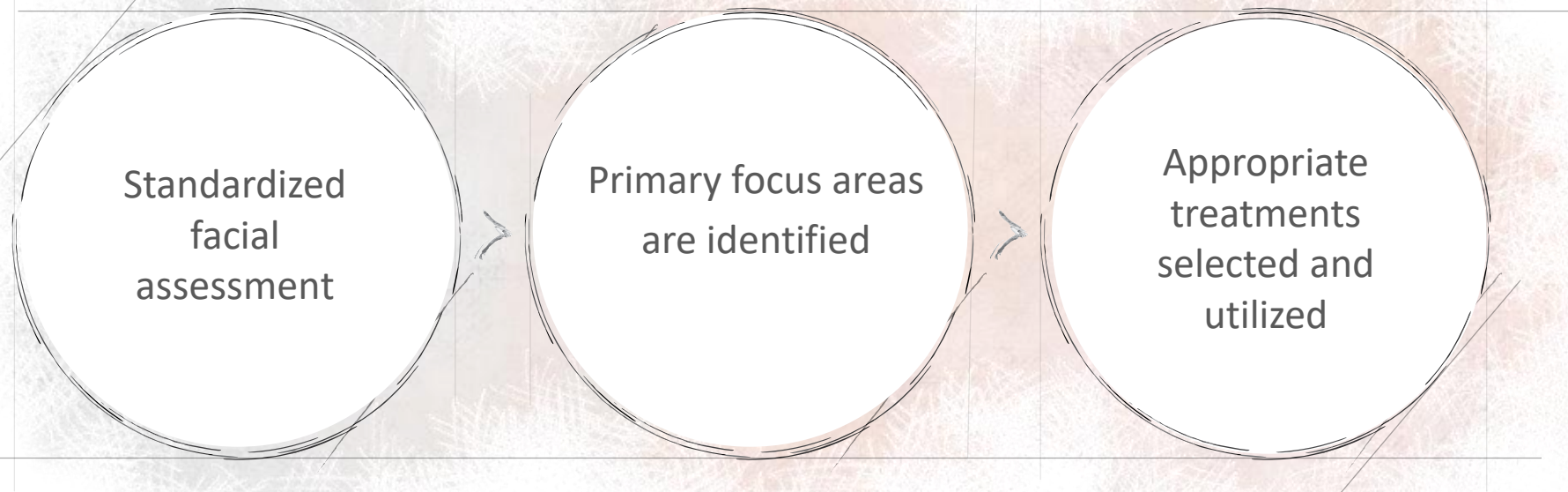


TREATMENT

Proper product selection for holistic individualized treatment



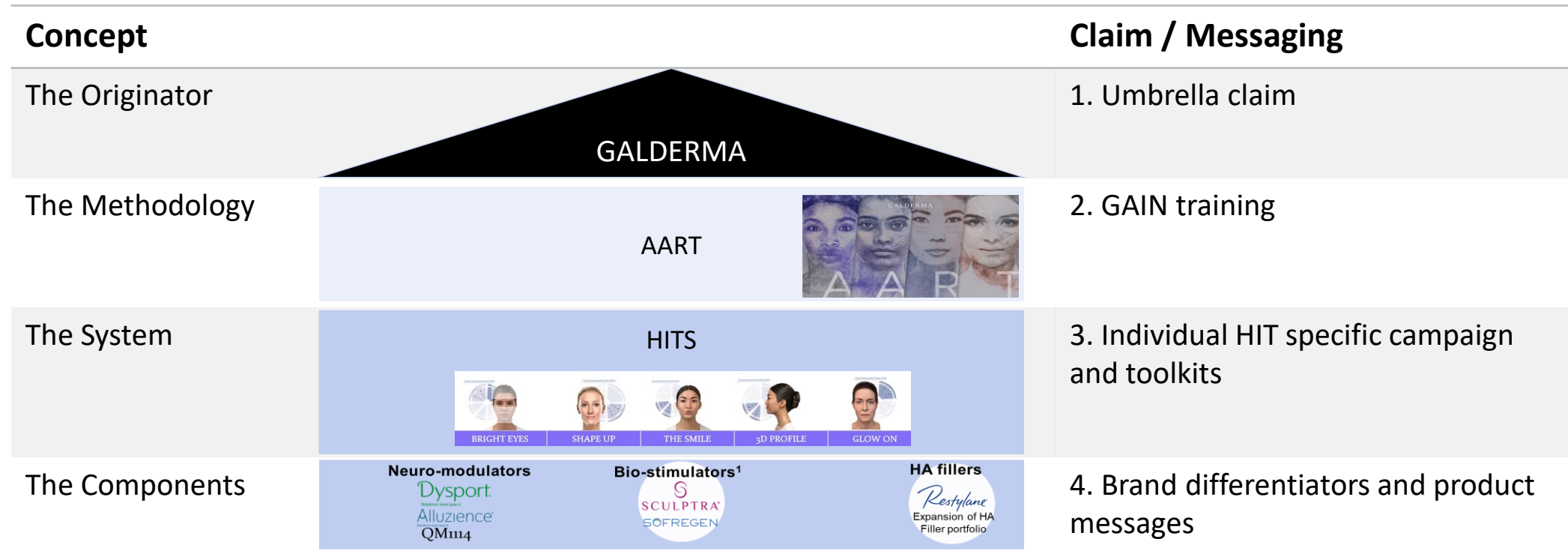
AART is not paint by numbers; it is built on underlying patients' anatomy, proper facial assessment, and product selection paired with the right injection skills



HITs Communication Architecture

GAIN

Galderma helps you deliver holistic & individualized results for our consumer satisfaction, through our Holistic Individualized Treatment Strategies (HITS), using our unique approach to Facial Aesthetics and our differentiated range of premium products.



GALDERMA

ASSESSMENT



A

A

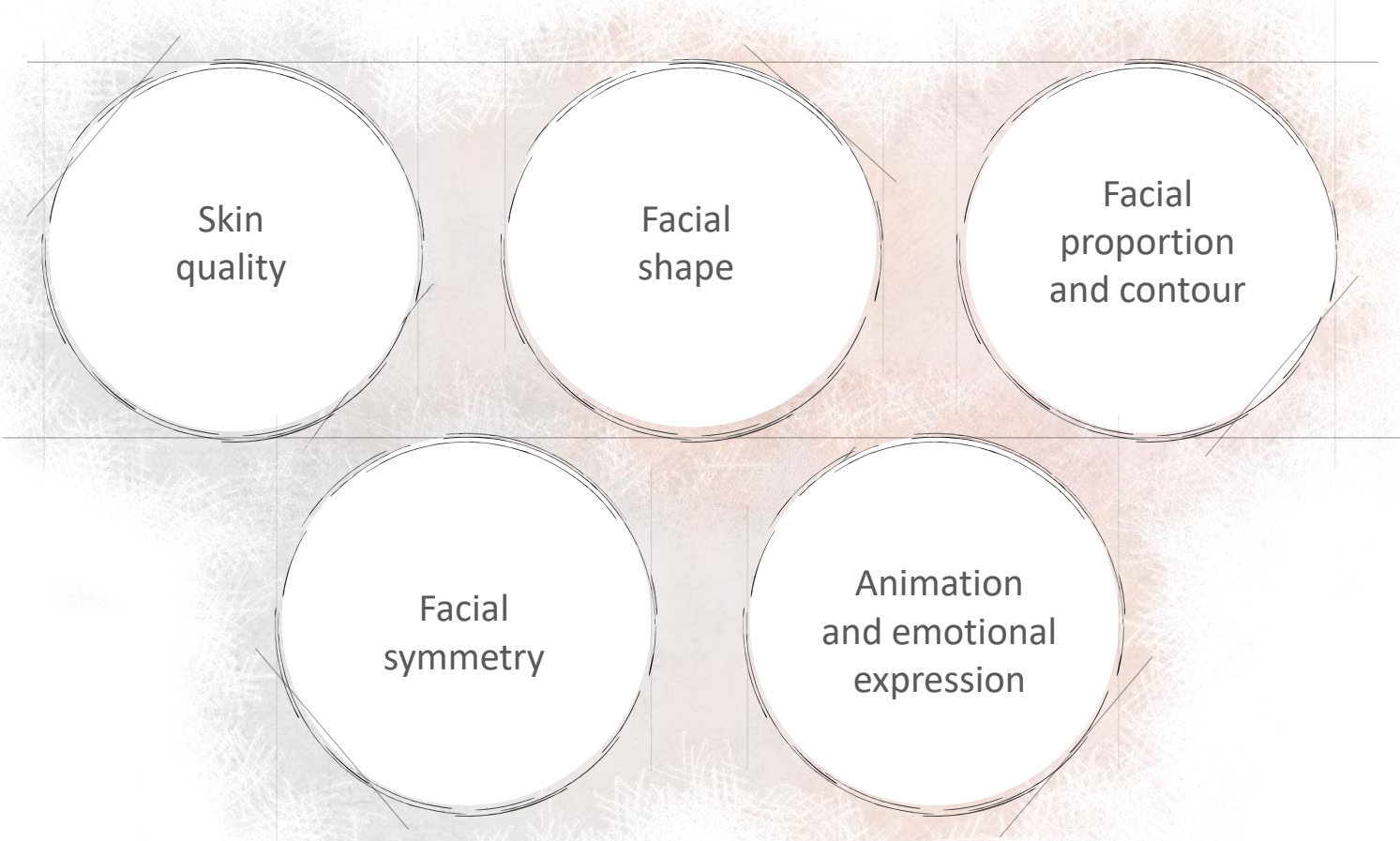
B

C

The Galderma
Facial Assessment Scale

The facets of facial assessment are universally recognized

The facets can guide a structured facial assessment, which ensures that all aspects of the patient's face are evaluated during the consultation



The five facets of facial assessment drive treatment priorities

Knowledge of the five facets and a more structured facial assessment allows an identification of:

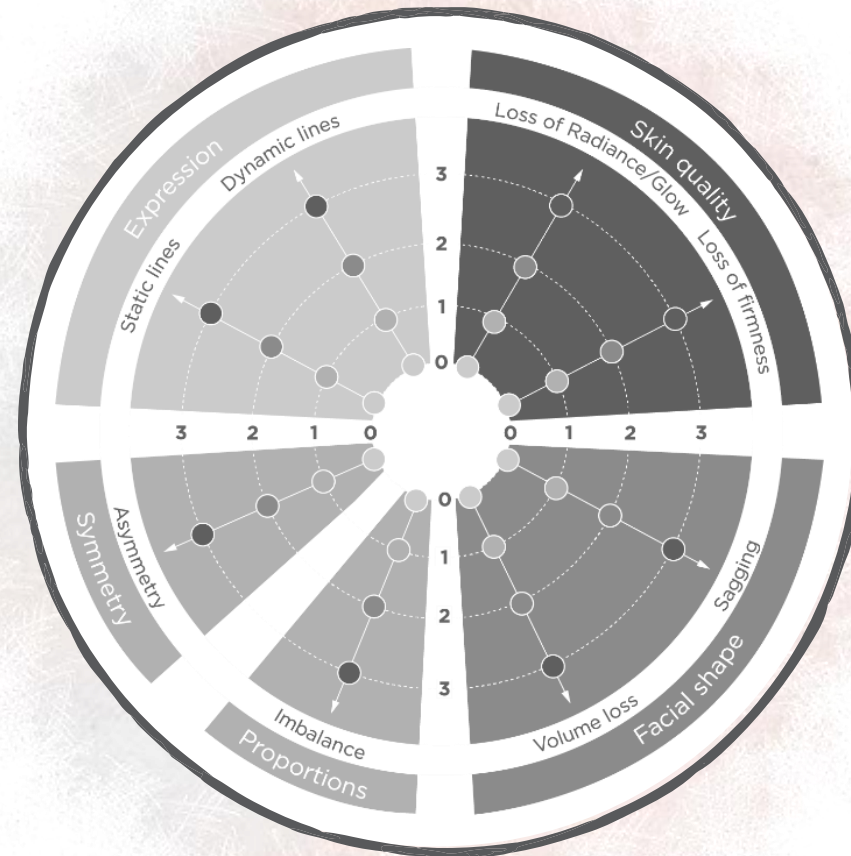


The Galderma Facial Assessment Scale (FAS) has been developed to help guide aesthetic consultations

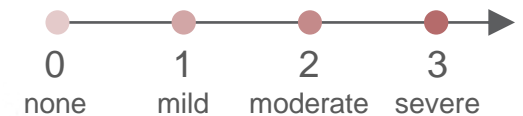
GAIN

The facets can be graded on the Galderma FAS during the consultation to ensure:

- Facial assessment is systematic and standardized
- The evaluation covers the entire face
- The patient is engaged and feels involved in the process
- Treatment priorities can be visualized by both the patient and the practitioner

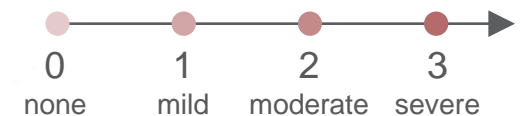


SEVERITY EVALUATION SCALE



ADDITIONAL SKIN EVALUATION

Skin color unevenness



Scars



FAS, Facial Assessment Scale.

Adapted from Jain R, et al. J Cosmet Dermatol 2016;16(1):132-143.

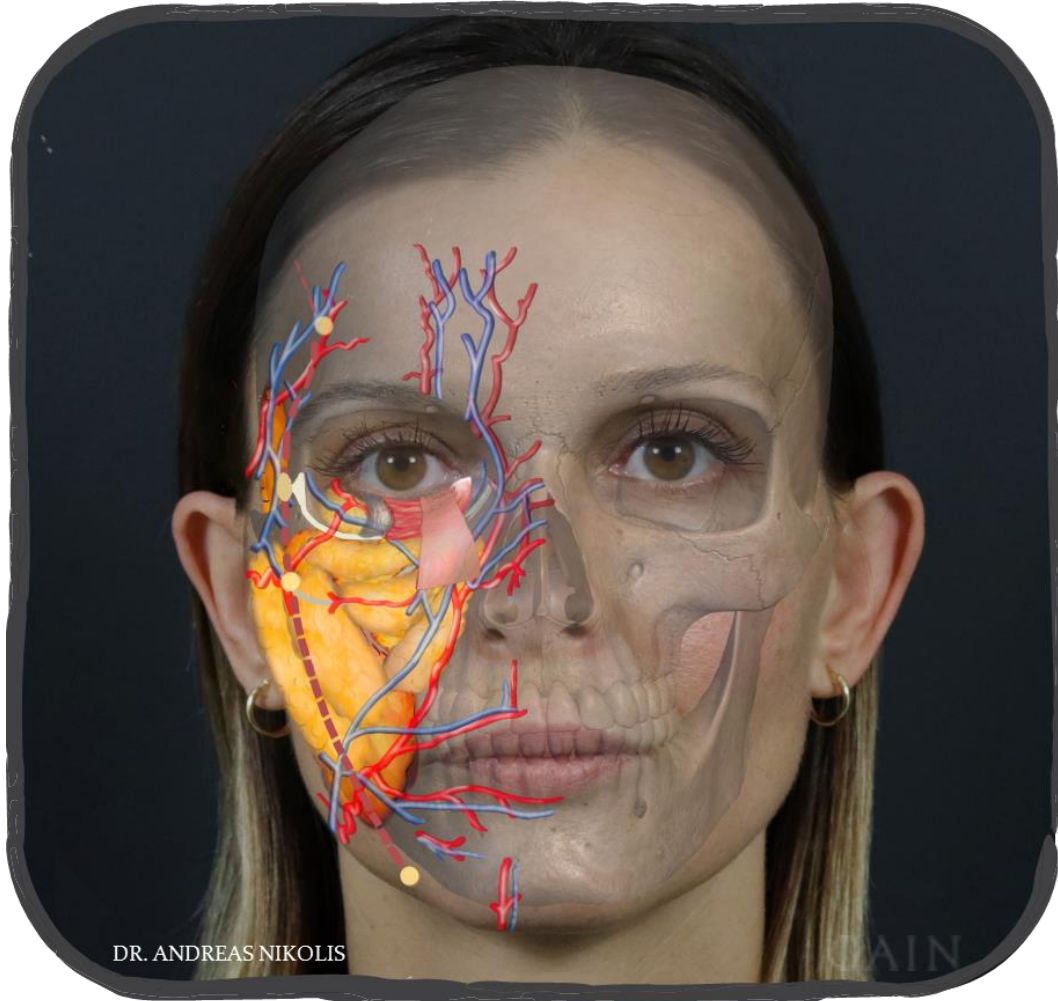
GALDERMA

The image features a vertical sequence of four anatomical illustrations of a human face. The top illustration shows the skin and facial features in a realistic style. The second illustration shows the underlying muscle layers in a reddish-brown color. The third illustration shows the underlying bone structure in a light blue color. The bottom illustration shows the underlying soft tissue and connective tissue in a light brown color. The word 'ANATOMY' is written in white capital letters inside a white rectangular box at the top center. The word 'ANATOMY' is also written in large, white, semi-transparent capital letters at the bottom of the image, with the 'A' on the left and the 'Y' on the right.

ANATOMY

The Layered Anatomy
and Aging Face

The face is generally organized in five different layers



GALDERMA

The face is generally organized in five different layers



S	SKIN
C	CONNECTIVE TISSUE
A	APONEUROSIS
L	LOOSE CONNECTIVE TISSUE
P	PERIOSTEUM

This is the general alignment, and there are facial regions where this differs:

- > 3 layers in the infraorbital region
- > 9 layers in the temporal region



RANGE

A

A

R

T

The Galderma Aesthetics
Collection

Galderma Aesthetics Collection



RELAX

Relax the muscles involved in the formation of dynamic wrinkles

Azzalure[®]
Botulinum toxin type A

Dysport.
Botulinum toxin type A



REFINE

Refine the look for a healthy more youthful appearance by providing shape and contours through lift, by filling lines and wrinkles or by adding volume

Restylane

Lift	Fill	Volumize
Restylane LYFT	Restylane	Restylane KYSSE [™]
Restylane DEFYNE [™]	Restylane REFYNE [™]	Restylane VOLYME [™]
		Restylane RELIGHT



REFRESH

Refresh the look for radiant and hydrated skin

Restylane
SKINBOOSTERS[™]

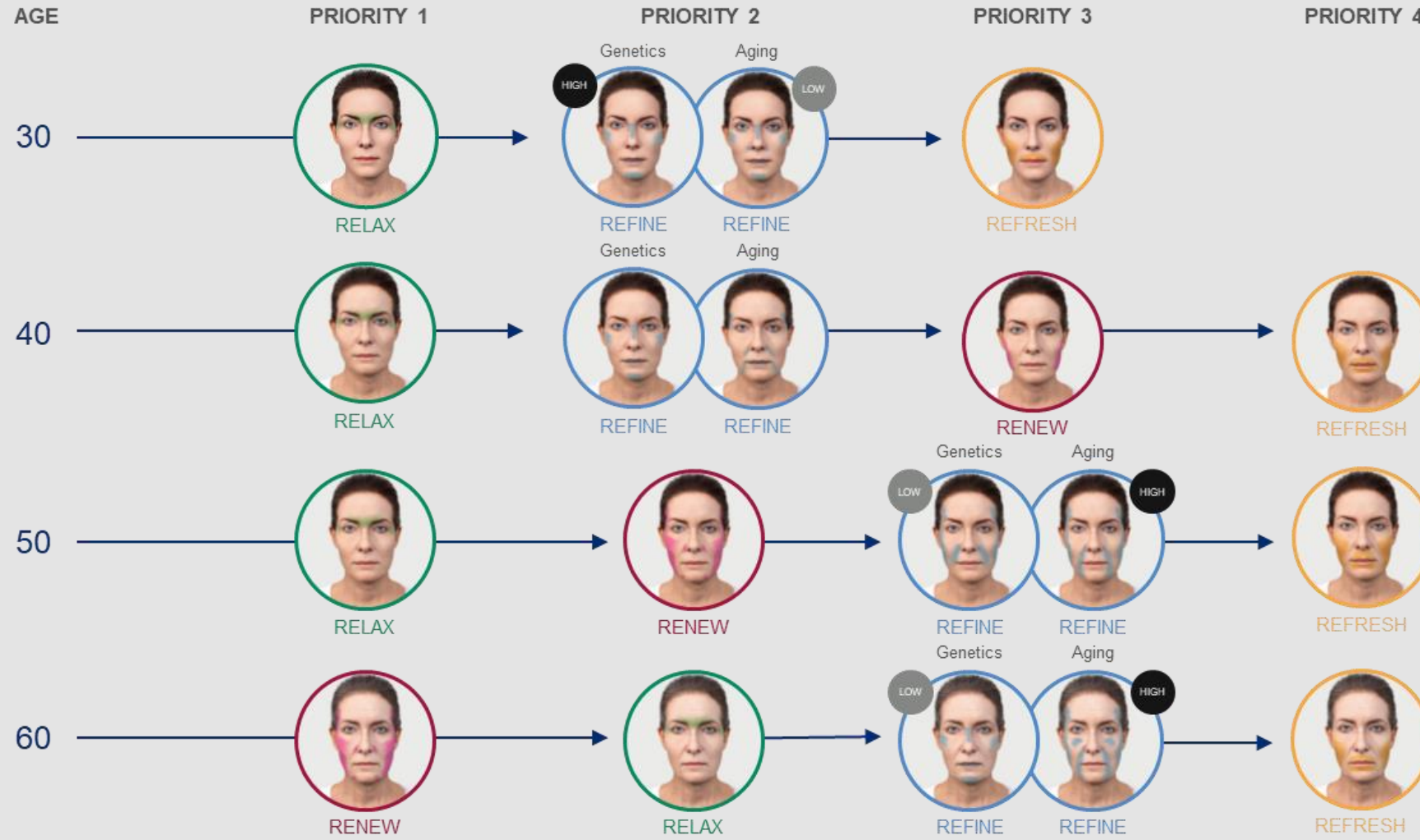


RENEW

Restore a youthful foundation (face or body) by stimulating the skin's natural collagen production

Sculptra[®]

The anatomy of the aging face supports treatment priorities



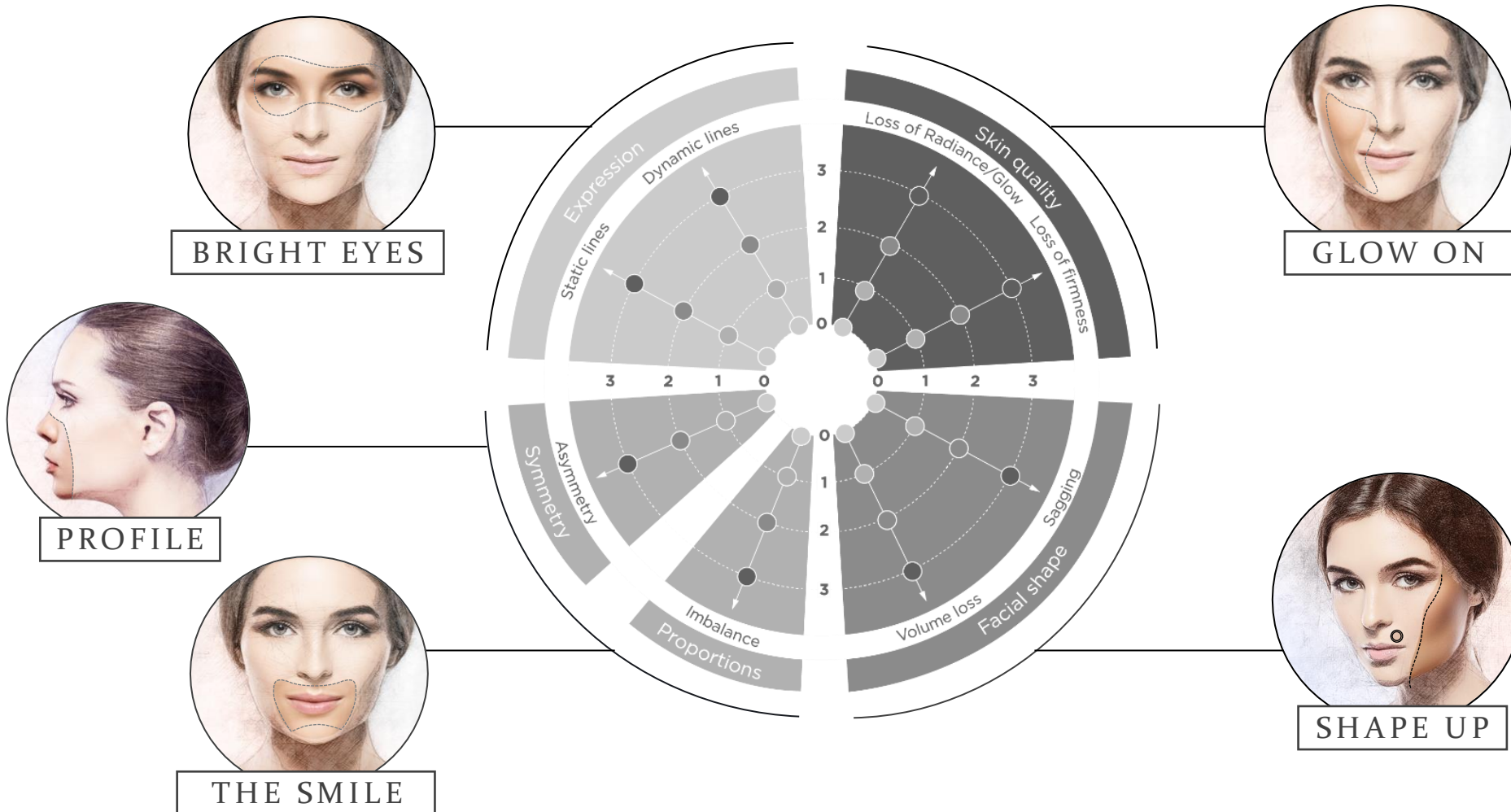
Modified from: Haddad A, et al. J Drugs Dermatol 2019;18(1):92-102



TREATMENT

Treatment with Galderma:
Holistic Individualized Treatments

Accelerating growth with a simplified, holistic, and consumer need-based portfolio



GALDERMA

BRIGHT EYES



TIRED LOOK

TT indication^{1,2}segma



GRUMPY LOOK

TT indication^{1,2}



+
Crow's-feet³
and/or moderate to
severe glabellar
lines³⁻⁵



AGING

TT indication^{1,2}



+
Crow's-feet³
and/or moderate to severe
glabellar lines³⁻⁵
+
Temple & mid-face^{6,7}



TT, tear trough.
 1. Galderma. Restylane Eyelight Instructions for Use, December 2020. 2. Galderma. Restylane-L Instructions for Use, April 2016. 3. Galderma. Azzalure SmPC, February 2021.
 4. Schlessinger J, et al. Dermatol Surg 2021;47(4):504-509. 5. Galderma. Alluzience SmPC, September 2021. 6. Galderma. Restylane Volyme Instructions for Use, November 2016. 7. Talarico S, et al. Dermatol Surg 2015;41(12):1361-1369.

Overview of Bright Eyes™

3 CORE PROFILES ENCAPSULATING PATIENTS NEEDS

FROM TIRED LOOK

FROM GRUMPY LOOK

FROM AGING

EXPRESSION OF PATIENT'S CONCERN

"It is a defect that I've always had and that I'd like not to have."

"People ask me if I am feeling OK all the time..."

"When looking in the mirror, my tired eyes do not correspond to me feeling good."

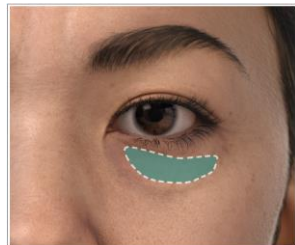
OBSERVATION

Mild to severe periorbital hollows

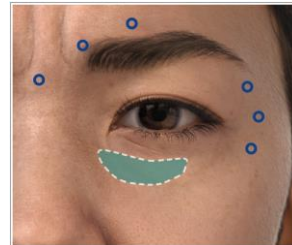
Mild to severe periorbital hollows
 Presence of crow's feet and glabellar lines

Mild to severe periorbital hollows
 Presence of crow's feet and glabellar lines
 Lack of volume in the midface and temples

AART™ METHODOLOGY : ASSESSMENT, ANATOMY, RANGE, TREATMENT



● TT indication
Restylane
EYELIGHT



● TT indication
Restylane
EYELIGHT

○ Glabellar lines & crow's feet
Alluzience® or *Azzalure*
Botulinum toxin type A



● TT indication
Restylane
EYELIGHT

● Temple & midface
Restylane
VOLYME

○ Glabellar lines & crow's feet
Alluzience® or *Azzalure*
Botulinum toxin type A

TO LUMINOUS LOOK

TO RELAXED LOOK

TO YOUTHFUL LOOK

Alluzience® is indicated for the temporary improvement in the appearance of moderate to severe glabellar lines (vertical lines between the eyebrows) seen at maximum frown in adult patients under 65 years, when the severity of these lines has an important psychological impact on the patient.

Azzalure® is indicated for the temporary improvement in the appearance of moderate to severe glabellar lines (vertical lines between the eyebrows) seen at maximum frown and/or lateral canthal lines (crow's feet lines) seen at maximum smile in adult patients under 65 years, when the severity of these lines has an important psychological impact on the patient.

SHAPE UP

Restylane
LYFT™

SCULPTRA®



THE SMILE

A HIT for the Lips and the Perioral Area



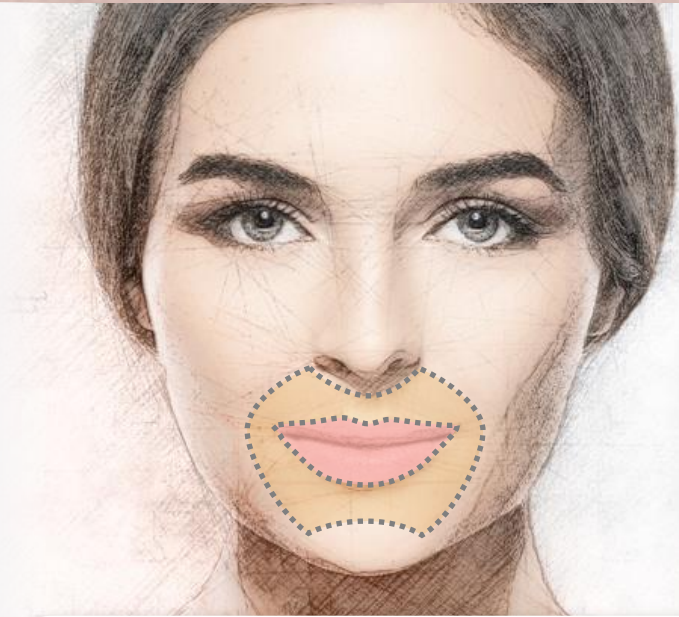
IDEAL LIPS

Lips indications

Restylane
KYSSE[™] Restylane



LIP ASSESSMENT
TOOL



FRAMING YOUR LIPS

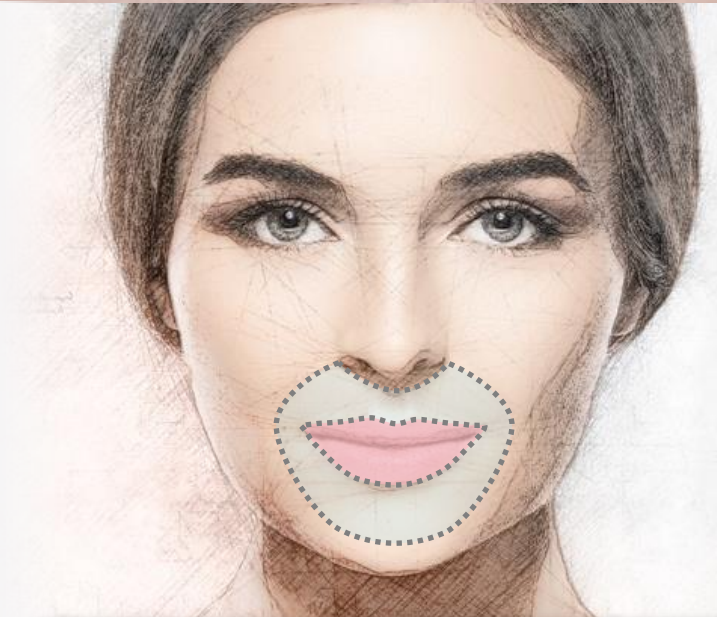
Lips indications

Restylane
KYSSE[™] Restylane

Perioral indications

Restylane
LYFT[™] Restylane
REFYNE[™]

Restylane
DEFYNE[™] Restylane
SKINBOOSTERS



CONFIDENT SMILE

Lips indications

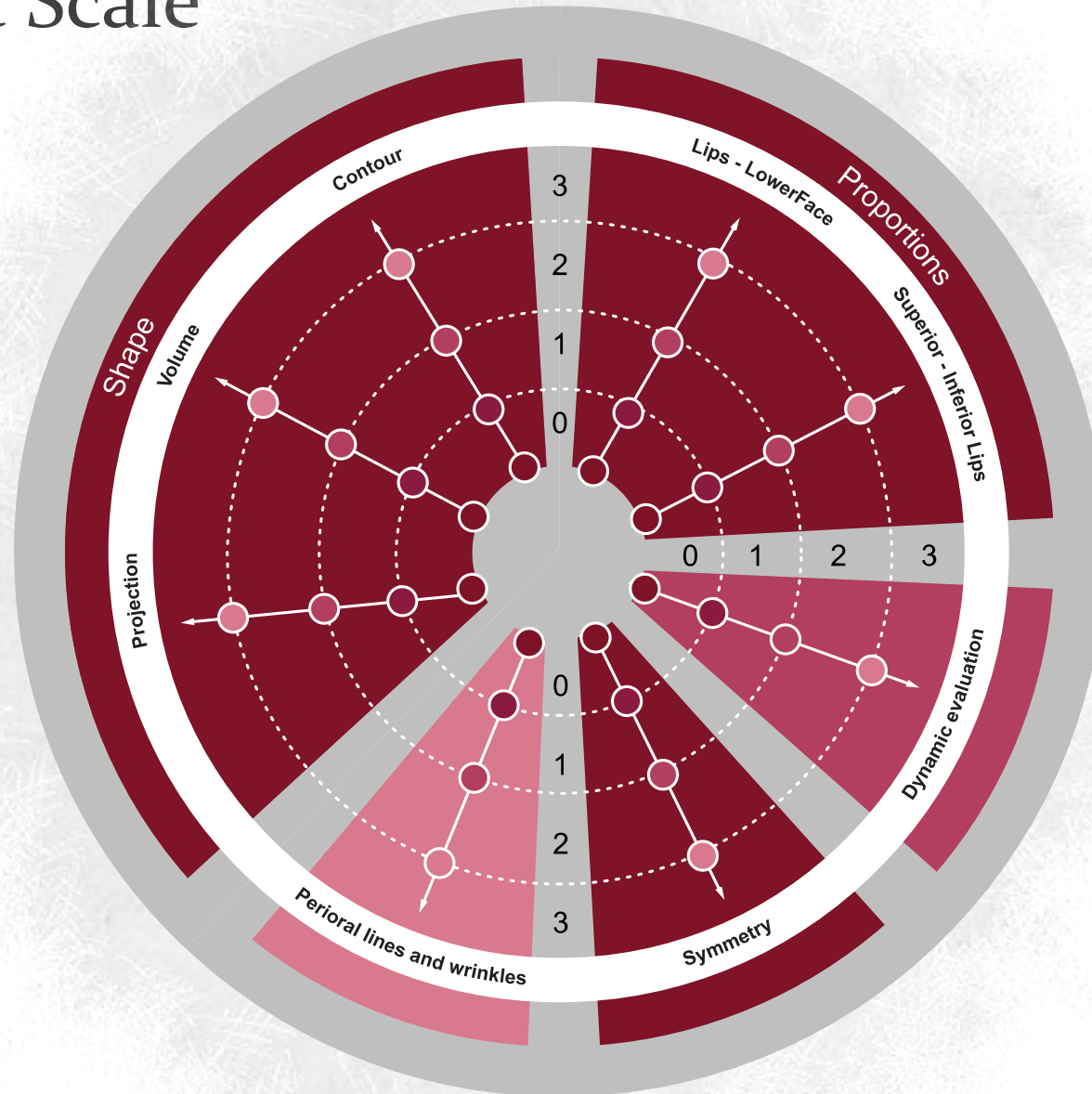
Restylane
KYSSE[™] Restylane

Perioral indications

Restylane
LYFT[™] Restylane
DEFYNE[™] Restylane
REFYNE[™]

LIP Assessment Scale

LIPS



SURROUNDINGS

GALDERMA

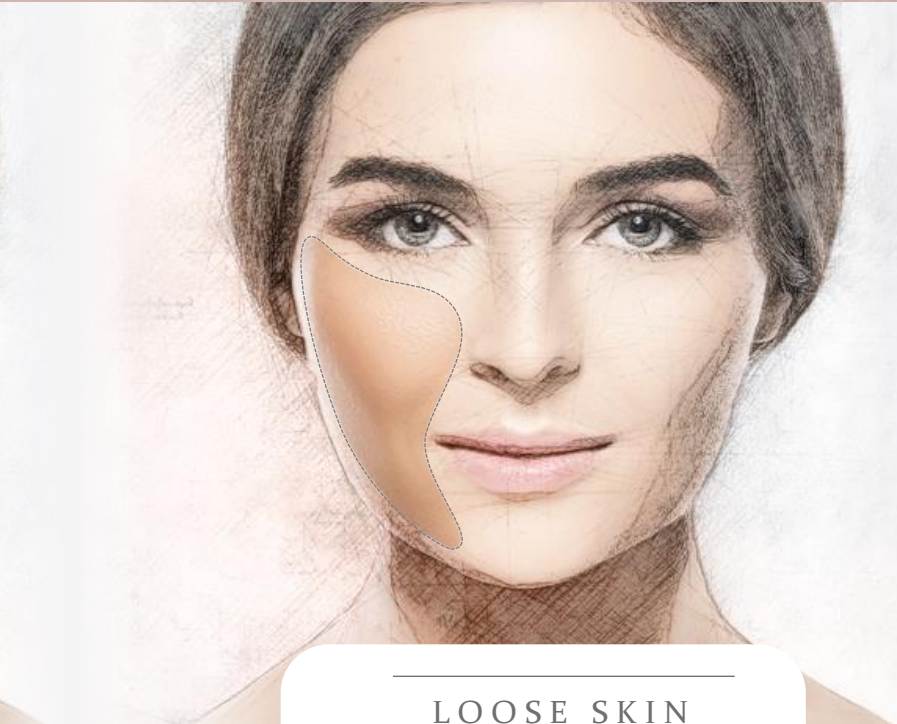
GLOW ON

A HIT for Dull Skin



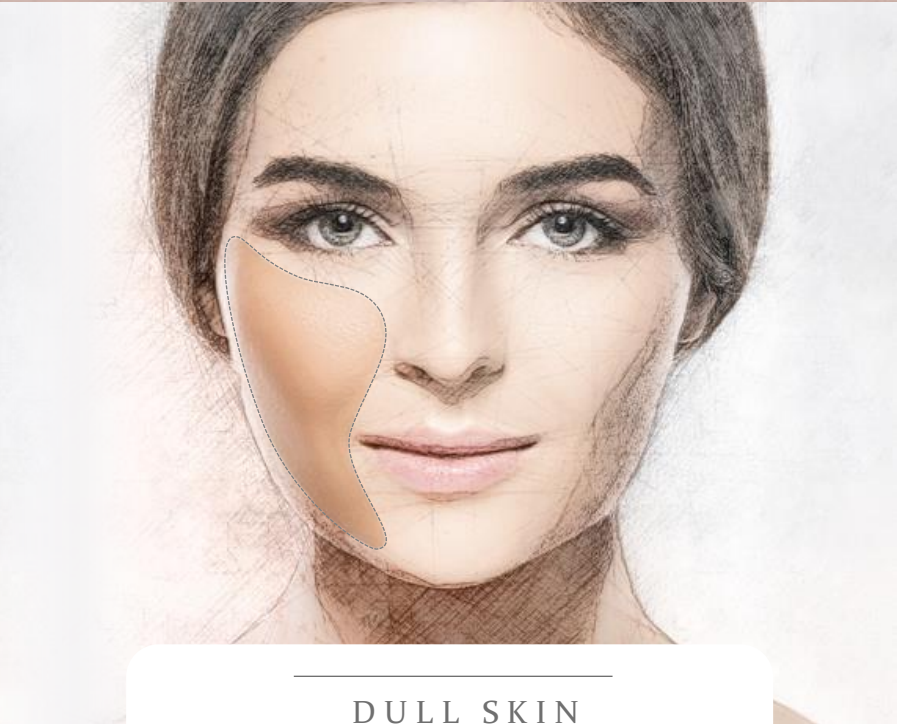
THIRSTY SKIN

Restylane
SKINBOOSTERS™



LOOSE SKIN


SCULPTRA®



DULL SKIN

 SCULPTRA® *Restylane*
SKINBOOSTERS™

PROFILE

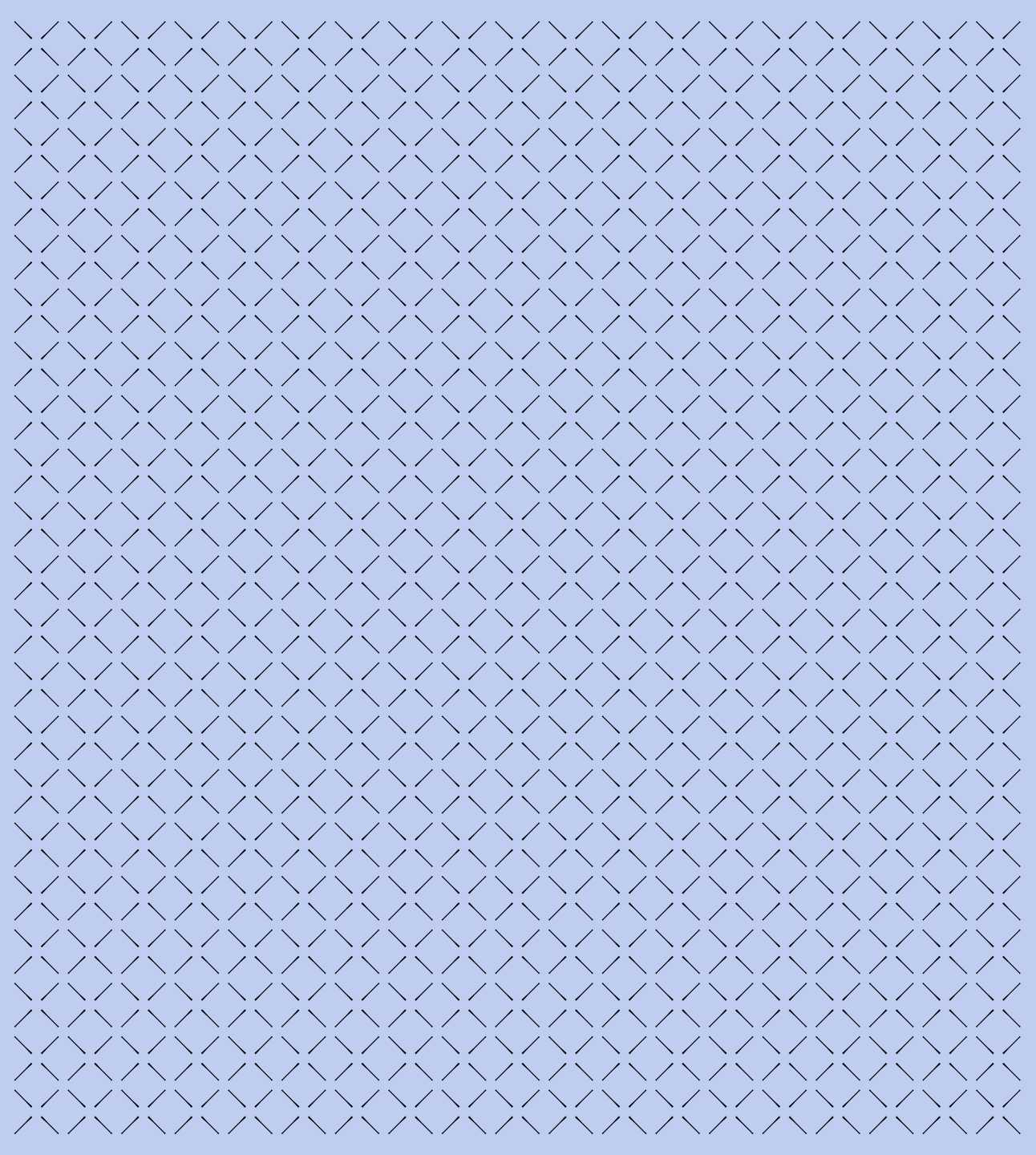
Restylane
LYFT™

Restylane
KYSSE™

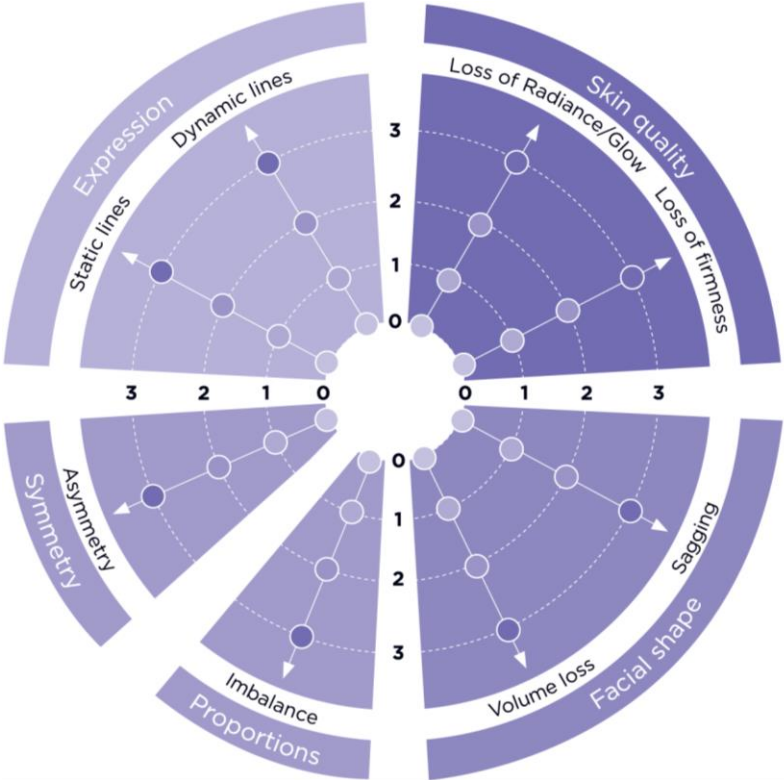
Restylane
DEFYNE™



Facial Assessment



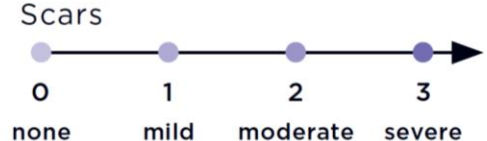
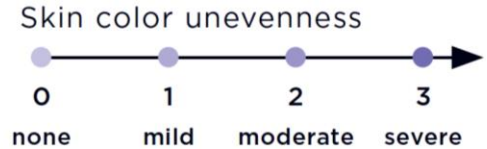
The Galderma FAS guides aesthetic consultations and helps identify treatment priorities



SEVERITY EVALUATION SCALE



ADDITIONAL SKIN EVALUATION

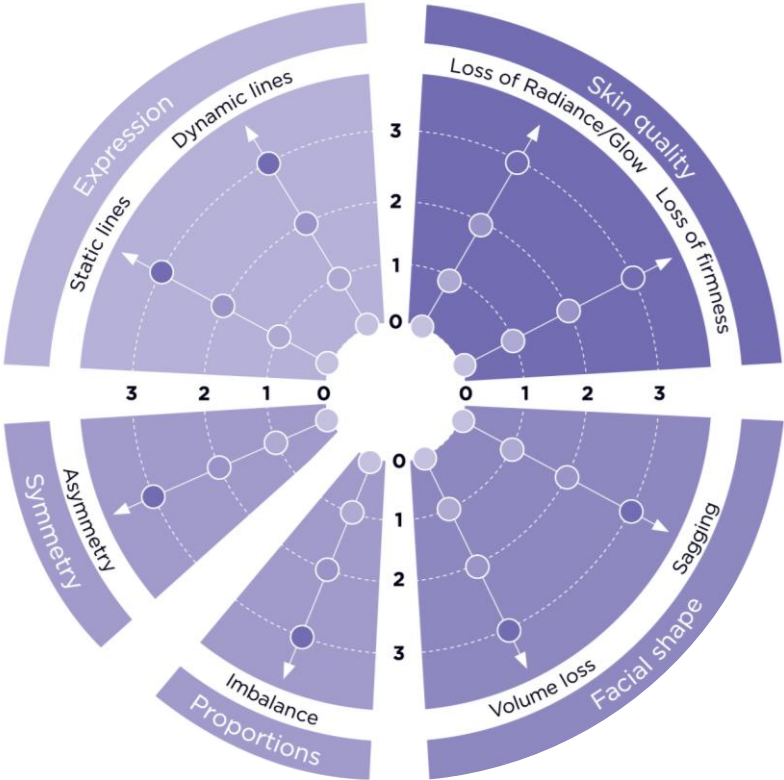


The Galderma FAS¹

- Ensures facial assessment is systematic and standardized
- Engages and involves the patient
- Visualizes treatment priorities for both the patient and practitioner
- Aids development of an individualized treatment plan using treatment combinations

FAS, Facial Assessment Scale.
1. Jain R, et al. J Cosmet Dermatol 2016;16(1):132-143.

The Galderma FAS five facets of facial aesthetics¹



1 Skin quality

3 Proportions

5 Symmetry

2 Facial Shape

4 Expression

FAS, Facial Assessment Scale.
Adapted from Jain R, et al. J Cosmet Dermatol 2016;16(1):132-143.

GAIN

1. Skin quality

GALDERMA

The importance of skin quality

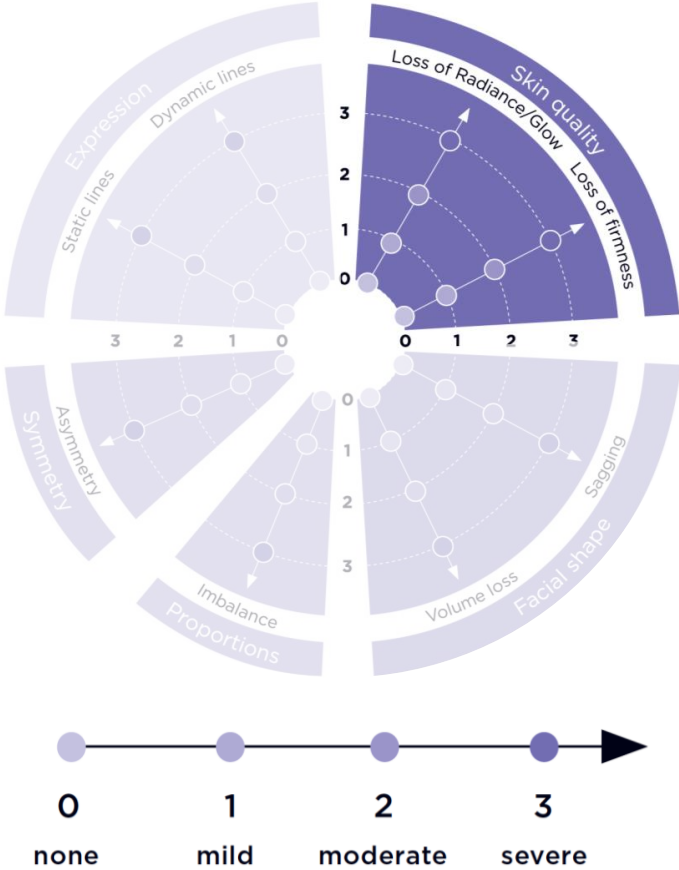
For physicians and patients

- The condition of the skin influences the perception of age and health¹
- Uniformity and evenness (lack of flaws) are critical factors in determining good skin quality²
- 1 in 2 women are not satisfied with their facial skin³
- Face powder has been used since ancient times to improve the appearance of skin quality⁴



1. Fink B, Matts PJ. J Eur Acad Dermatol Venereol 2008;22(4):493–498. 2. Vashi NA. Beauty and Body Dysmorphic Disorder. Springer International Publishing Switzerland 2015. 3. Galderma U&A Skin Nutrition Cross-Country Report, December 2016. 4. Hurst S. Pucher's Perfumes, Cosmetics and Soaps. Chapman & Hall 1993.

The Galderma FAS — skin quality is graded 0-3 for radiance/glow



0 (none)



1 (mild)

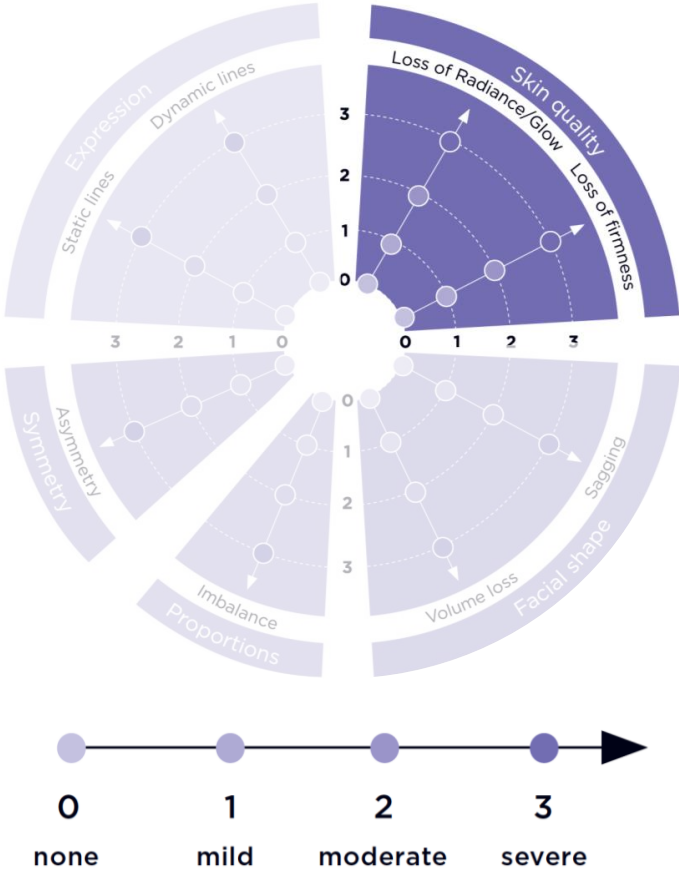


2 (moderate)

Skin radiance/glow depends on contrast (defined by luminosity, brightness, and transparency), color (mainly affected by the skin microcirculation), and imperfections (homogeneity, dark circles, or spots)¹

FAS, Facial Assessment Scale.
 1. Dumoulin M, et al. Clin Cosmet Investig Dermatol 2016;9:315–324.

The Galderma FAS — skin quality is graded 0–3 for firmness



0 (none)

1 (mild)

2 (moderate)

3 (severe)

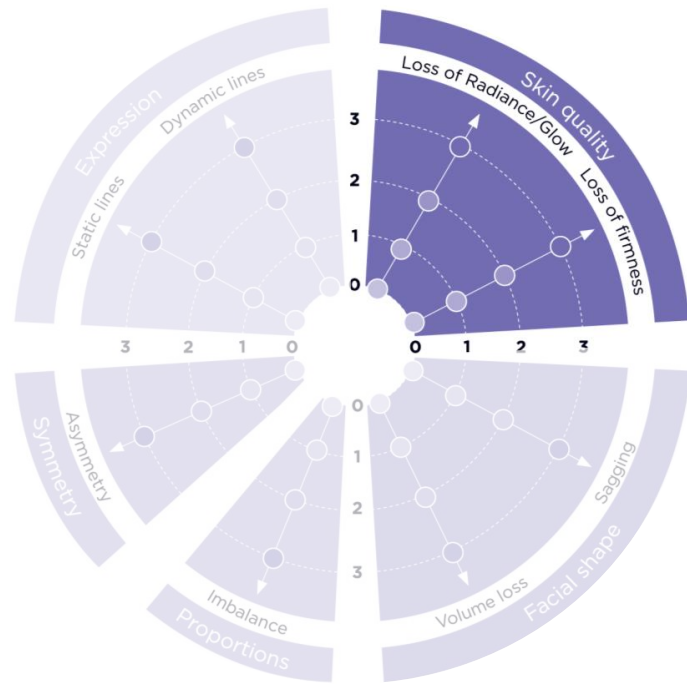
Skin firmness depends on its elasticity (ability to return to its original position), tautness/tightness (resistance against mechanical force) and hydration¹

FAS, Facial Assessment Scale.

1. Goldie K, et al. Clin Cosmet Investig Dermatol 2021;14:643–654.

The Galderma FAS — unevenness of skin color lies in the ‘additional skin evaluation’ section

GAIN

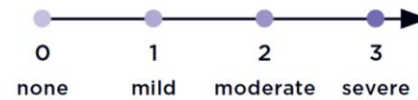


SEVERITY EVALUATION SCALE

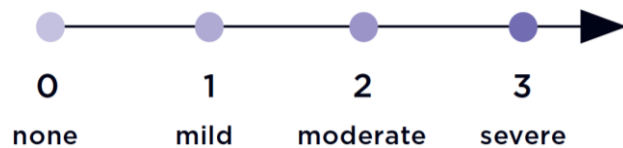
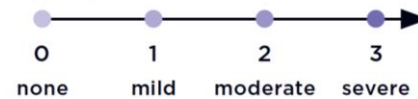


ADDITIONAL SKIN EVALUATION

Skin color unevenness



Scars



3 (severe skin color unevenness)



GAIN

2. Facial shape

GALDERMA

Facial shapes and outlines

GAIN

Facial shape may be oval, round, triangular, heart-shaped, or square



Oval



Round



Triangle

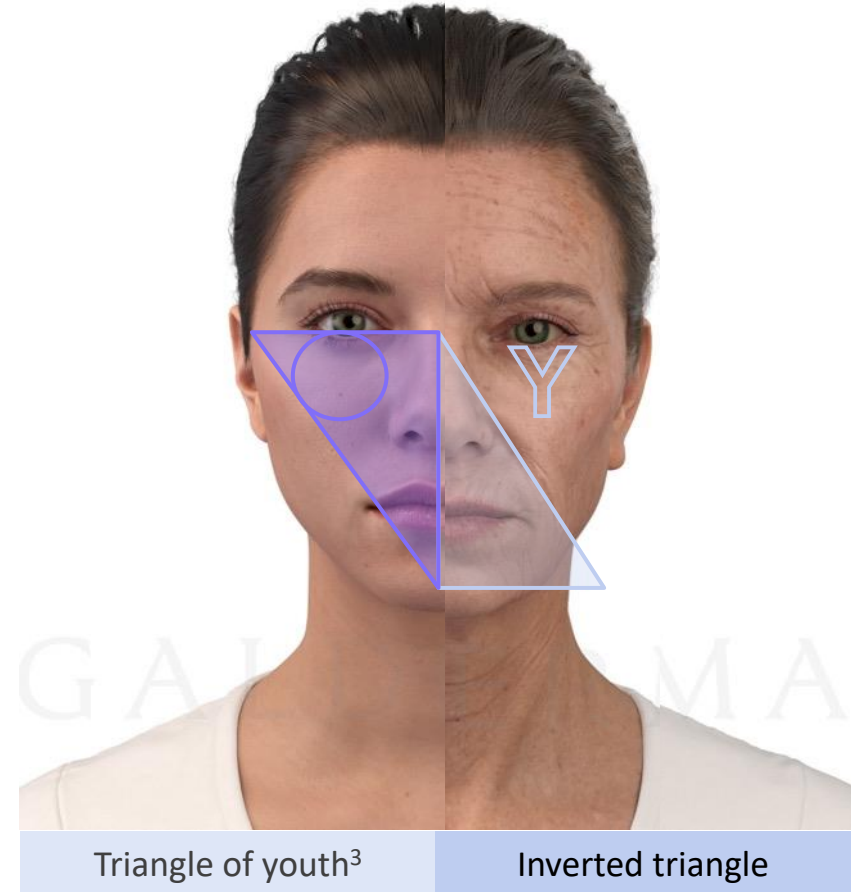


Heart

Age-related volume loss and sagging changes facial shape¹

Age-related volume loss and sagging results from:

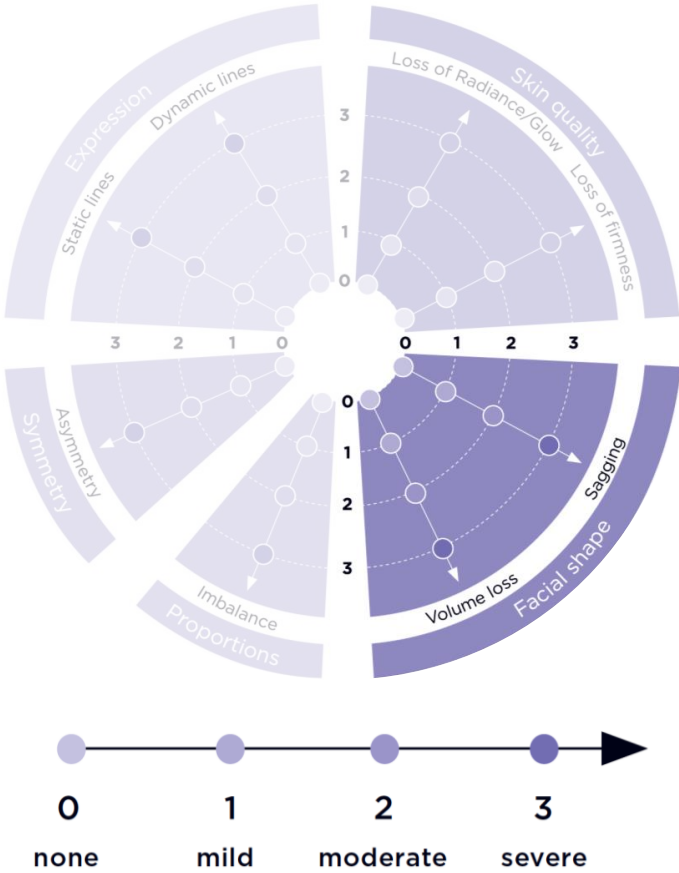
- Degradation of the skeleton and soft tissues¹
- Descent of cheek fat²
- Depletion of cheek fullness²



1. Cohen AJ, et al. Mid face facelift. Medscape, 2012.
2. Coleman SR, Grover R. Aesthetic Surg J 2006;26(suppl):S4-S9.
3. Thomas MK, et al. Indian J Plast Surg 2012;45(1):122-127.

The Galderma FAS — facial shape is graded 0-3 for skin sagging

Sagging is assessed in key areas

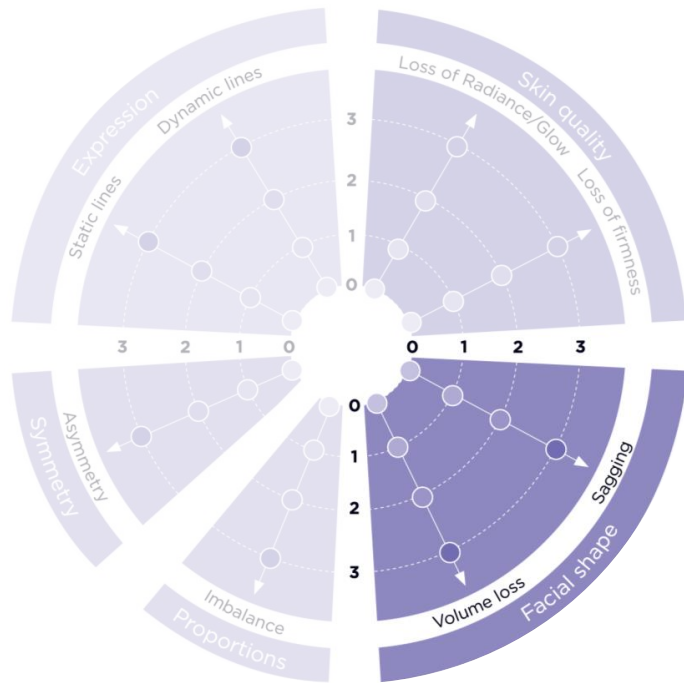


- Brow position (height)
- Malar mound
- Mouth corners
- Jawline

FAS, Facial Assessment Scale.

The Galderma FAS — facial shape is graded 0–3 for skin sagging

GAIN

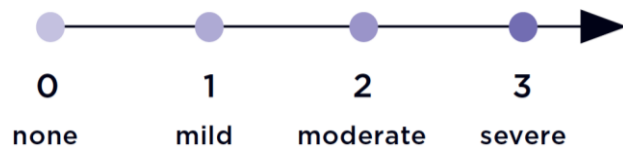


0 (none)

1 (mild)

2 (moderate)

3 (severe)

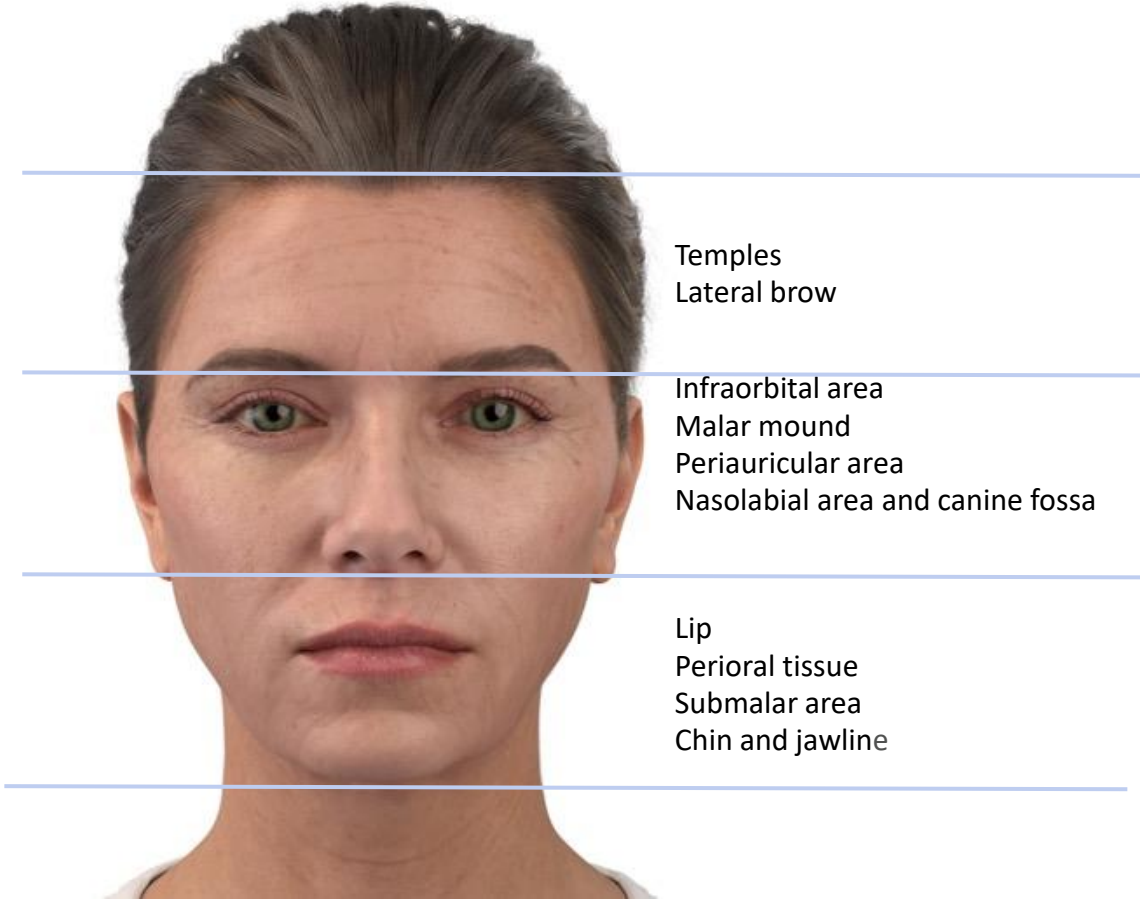
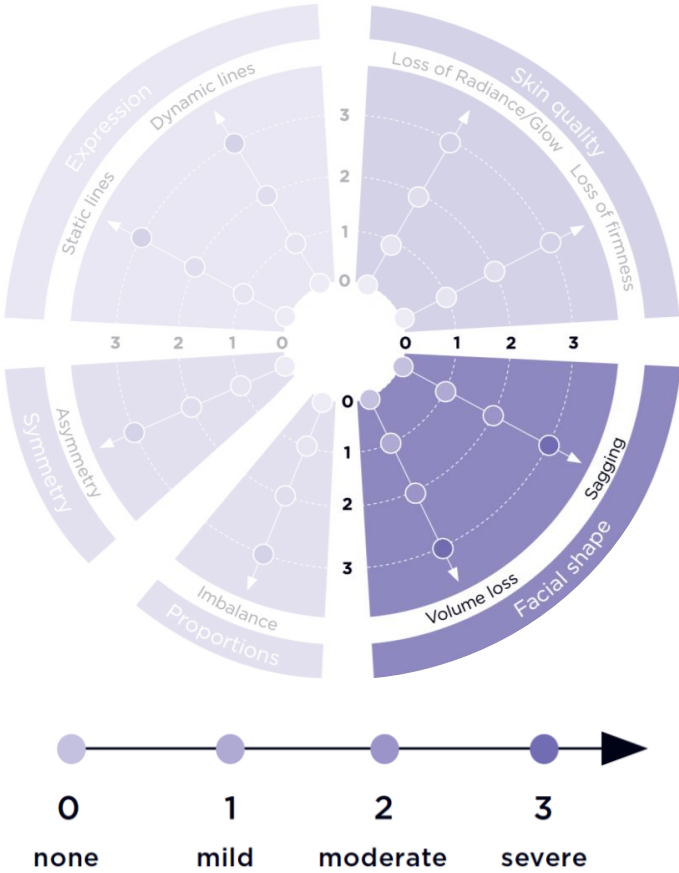


FAS, Facial Assessment Scale.

GALDERMA

The Galderma FAS — facial shape is graded 0-3 for volume loss

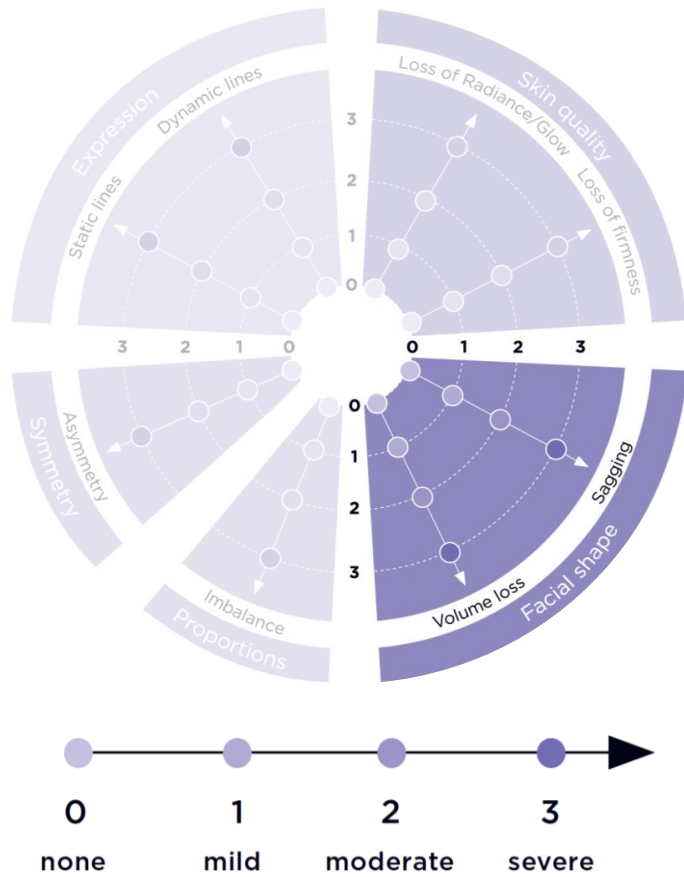
Volume loss is assessed in key areas



FAS, Facial Assessment Scale.

The Galderma FAS — facial shape is graded 0–3 for volume loss

GAIN



0 (none)

1 (mild)

2 (moderate)

3 (severe)

FAS, Facial Assessment Scale.

GALDERMA

GAIN

3. Proportions

GALDERMA

Division of the face into horizontal thirds*1

GAIN



Horizontal thirds

- In attractive faces, the midface is often longer than the forehead and lower face²
- Horizontal thirds can be easily measured using your hand and applying the lengths to your patient's face

*Please note that horizontal thirds are used only for proportions assessment, while upper, middle and lower face for treatment purposes include other anatomical landmarks.

1. Milutinovic J, et al. Sci World J 2014; DOI: 10.1155/2014/428250. 2. Rhee SC. Skin Res Technol 2017;1-7.

The face can be divided vertically into fifths¹



Vertical fifths

- Vertical fifths are equal in attractive Caucasian females¹

1. Milutinovic J, et al. Sci World J 2014; DOI: 10.1155/2014/428250.

The relationship between the nose, chin and lips contributes to facial balance (the Ricketts' line)



Ricketts' line

- The Ricketts' line is drawn from the tip of the nose to the chin¹
- Upper and lower lip projection can be assessed in relation to this line² by holding a pen/ruler or similar up to the patient's face

1. Umale VV, et al. J Oral Health Craniofacial Science 2017;2:9-16.

2. Saad A, et al. Pak Oral Dental J 2011;31(1):84-87.

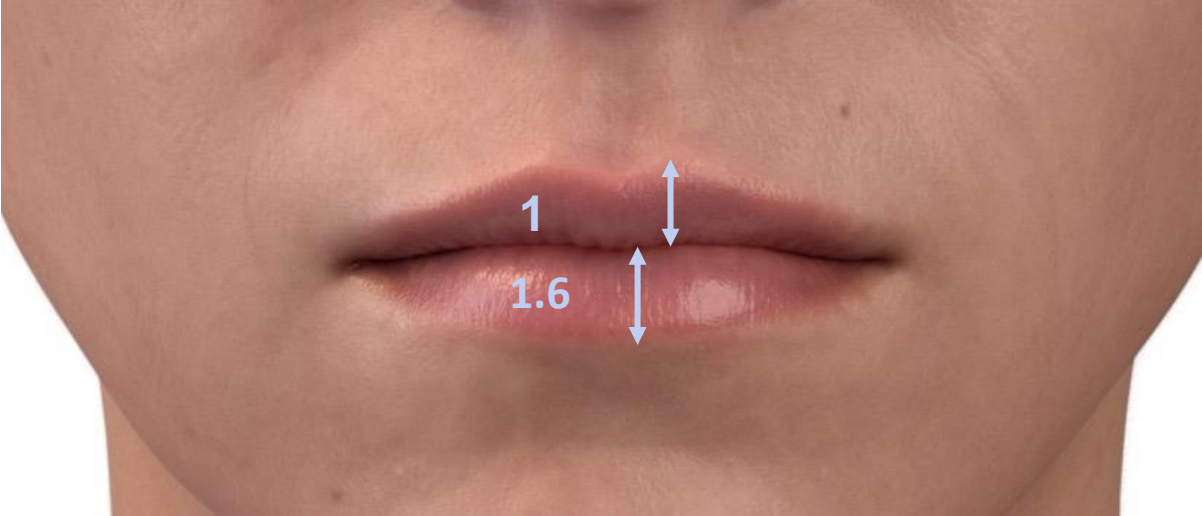
The Ogee curve gives the face contour, projection and dimension



Ogee curve

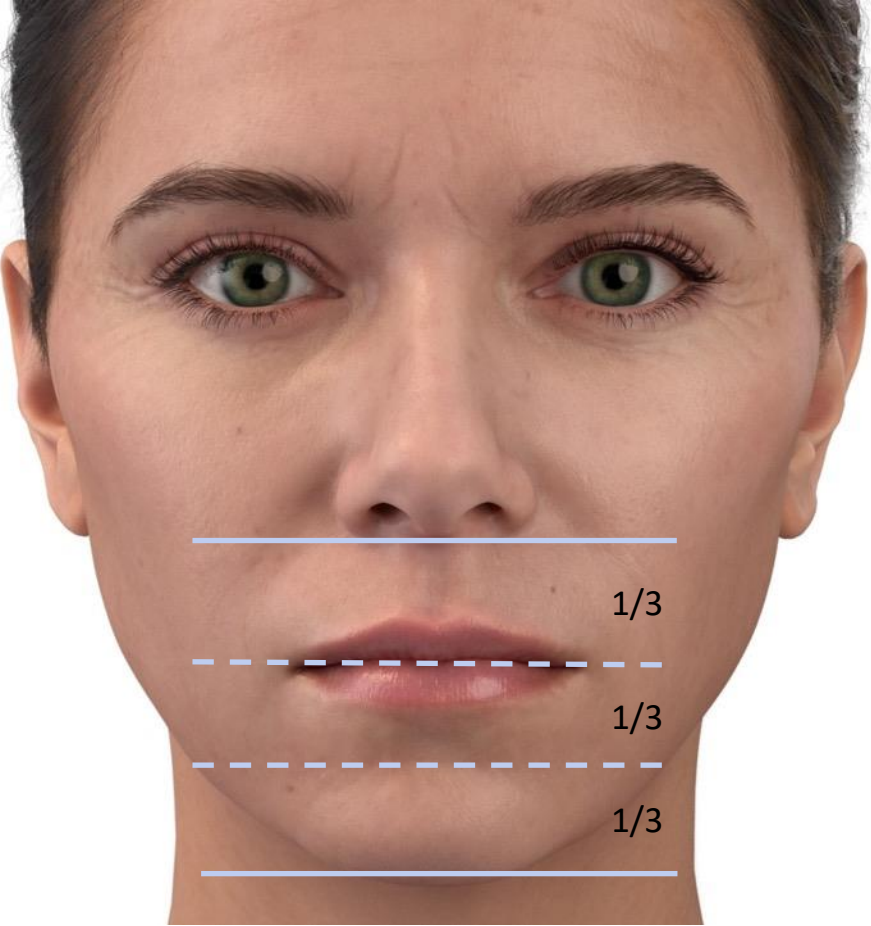
- A youthful cheek exhibits a smooth convexity from the lower eyelid to the lower face resembling an ogee curve¹
- Aging results in volume loss and unfavourable shadowing¹
- The Ogee curve can be examined by assessing the face in the $\frac{3}{4}$ view

Certain features of the lips contribute to the attractiveness of the lower third of the face



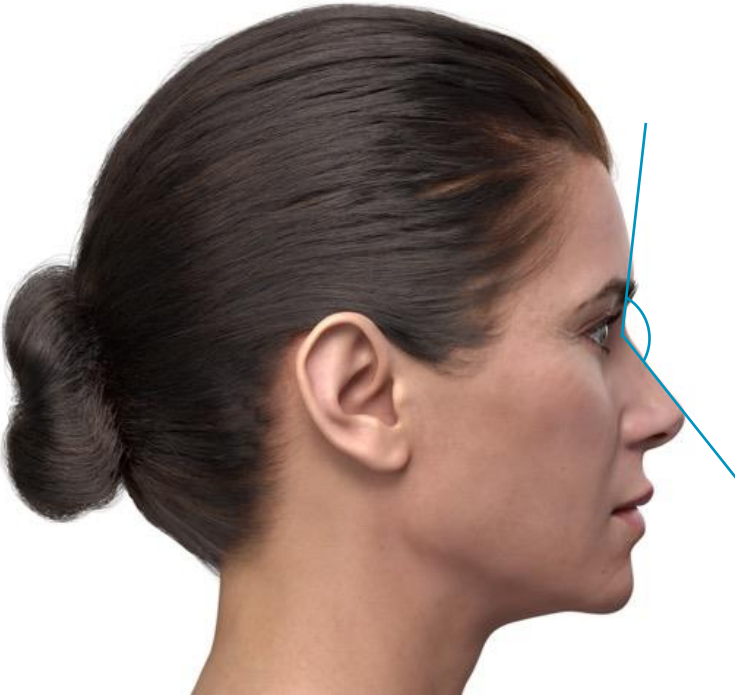
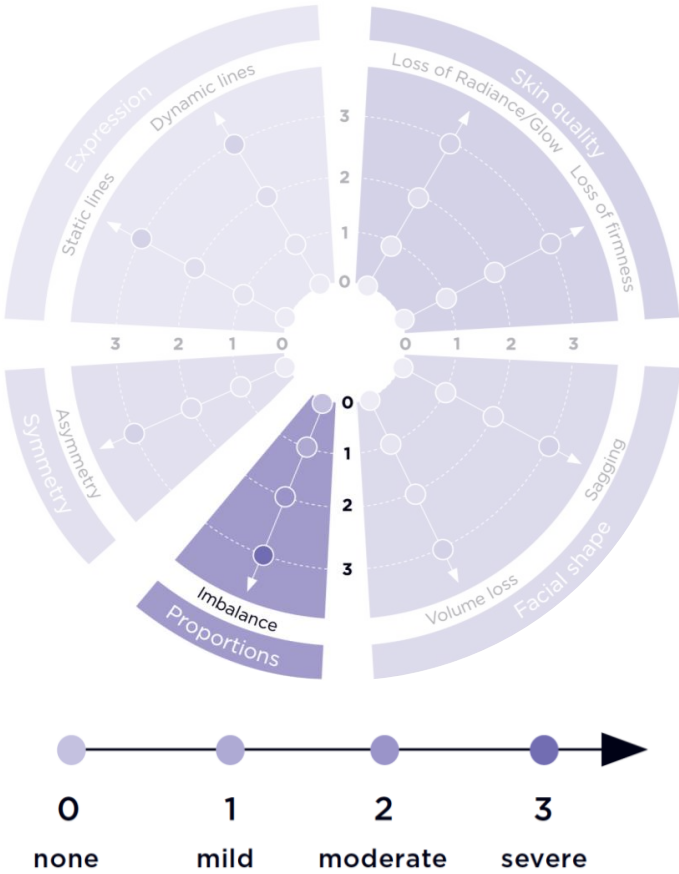
In Caucasians, the ideal vertical height ratio of upper to lower lip is 1:1.6¹

The lower third of the face is divided into unequal thirds to define the upper lip, the lower lip, and the chin²



1. Kollipara R, et al. J Clin Aesthet Dermatol 2017;10(11):19–21.
2. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

The Galderma FAS proportions — the ideal range for the nasofrontal angle is 115–130°¹



The nasofrontal angle

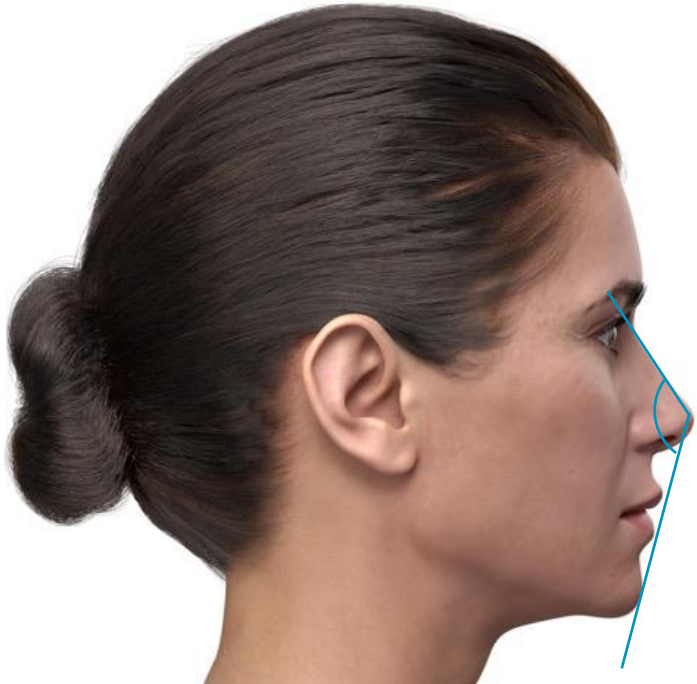
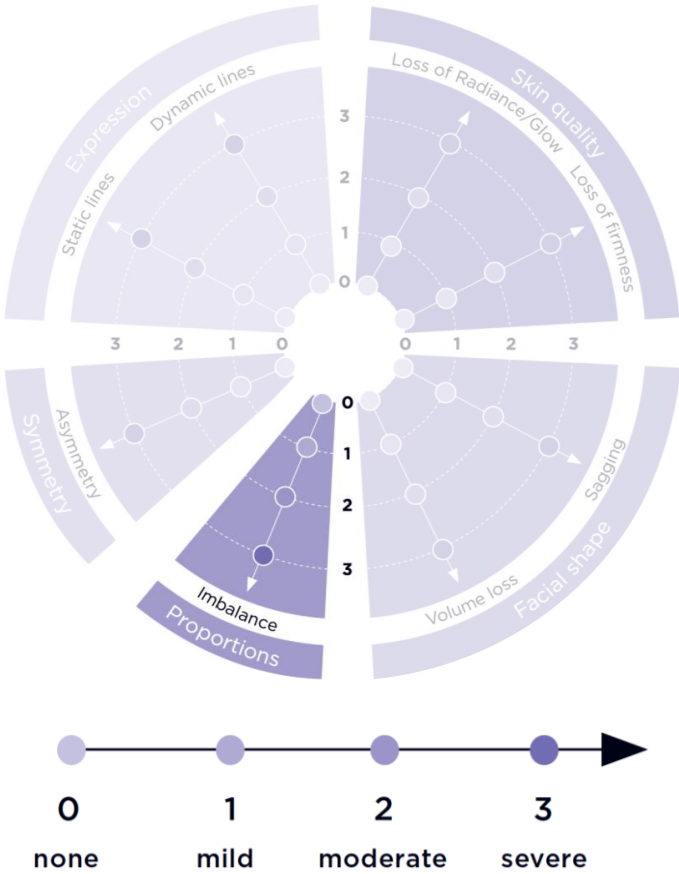
The angle between lines drawn from:

1. The nasion to the glabella
2. The nasion to the nasal tip¹

FAS, Facial Assessment Scale.

1. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

The Galderma FAS proportions — the ideal range for the nasofrontal angle is 120–130°⁰¹



The nasomental angle

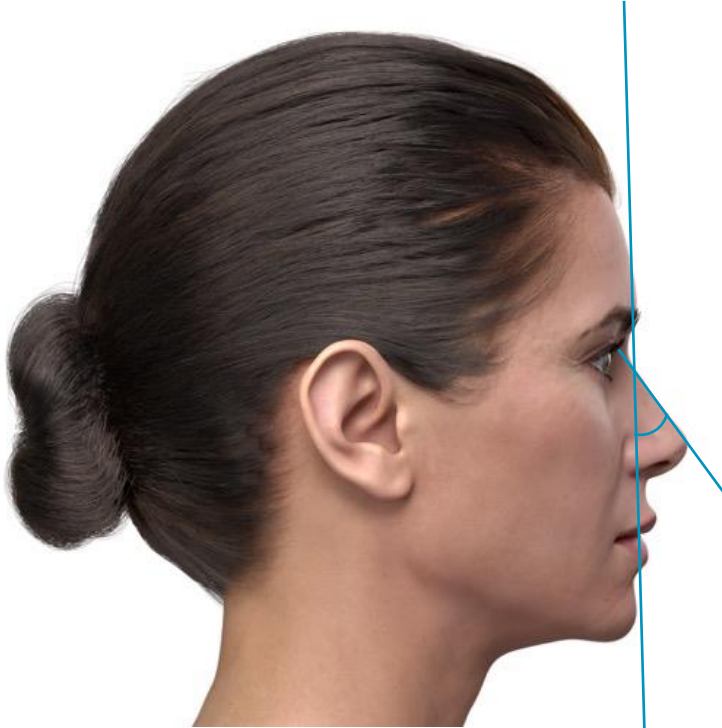
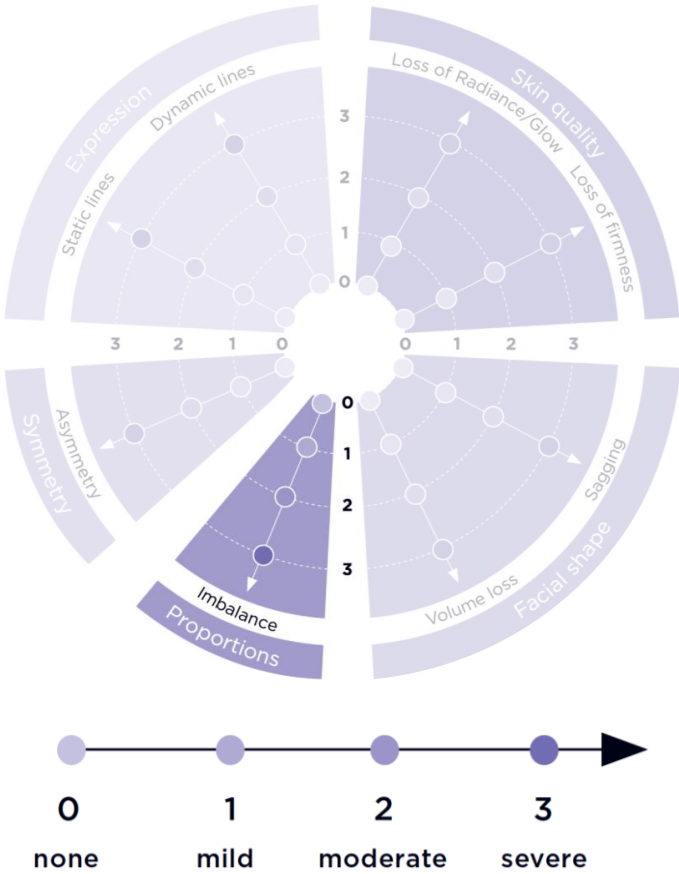
The angle between lines drawn:

1. Along the dorsum to the nasion
2. From the nasal tip to the the pogonion (the most projecting point on the anterior surface of the chin)

FAS, Facial Assessment Scale.

1. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

The Galderma FAS proportions — the nasofacial angle in Caucasians is 30–40°¹



The nasofacial angle

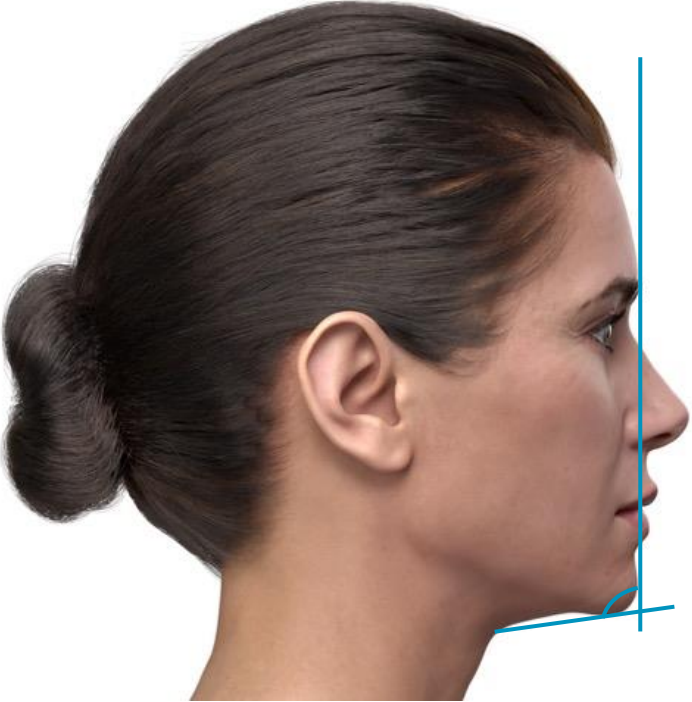
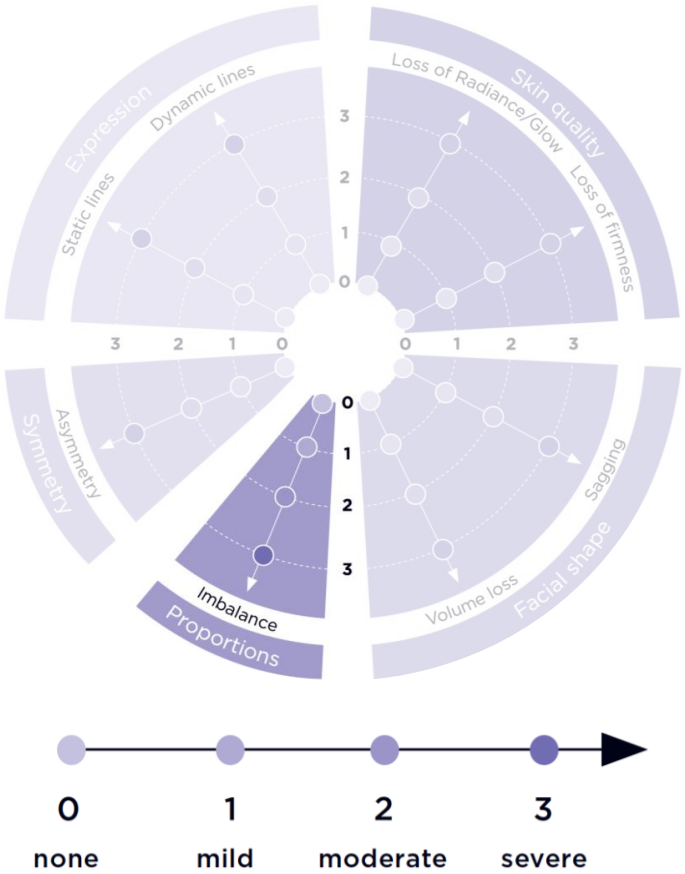
The angle between:

1. The anterior facial plane (the line from the glabella to the pogonion)
2. The line tangent to the dorsum of the nose (the line drawn from the nasion to the nasal tip)¹

FAS, Facial Assessment Scale.

1. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

The Galderma FAS — the ideal range for the mentocervical angle in Caucasians is 80–95°¹



The mentocervical angle

The angle between:

1. A line drawn from the cervical point to the menton¹
2. The anterior facial plane¹

FAS, Facial Assessment Scale.

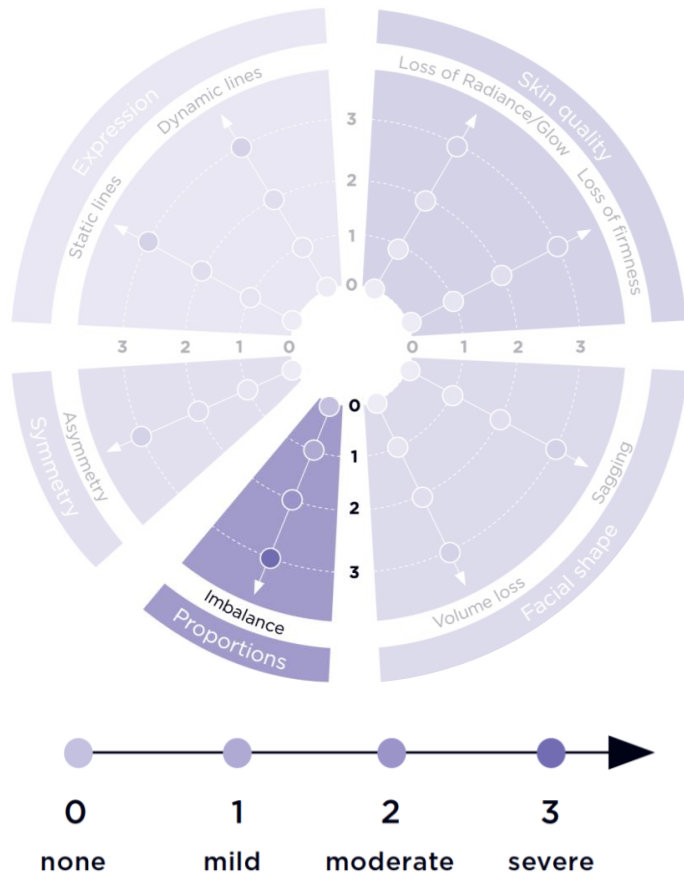
1. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

GAIN

Assessment should include frontal, profile and $\frac{3}{4}$ views to examine the angles of the face and the relationship between features

The Galderma FAS — facial proportions and contours are graded 0–3

GAIN



1 (mild imbalance)



2 (moderate imbalance)



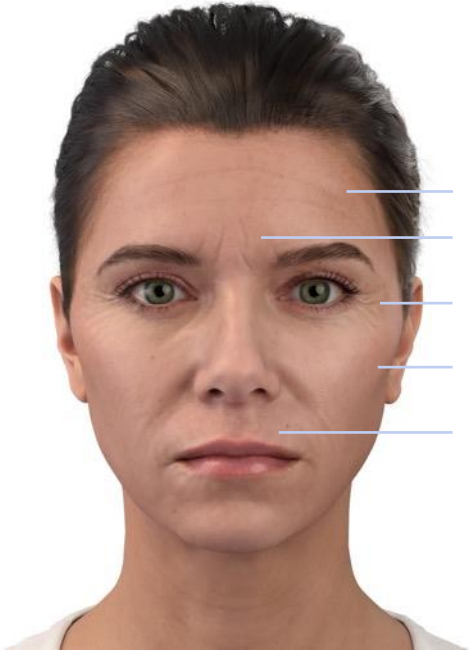
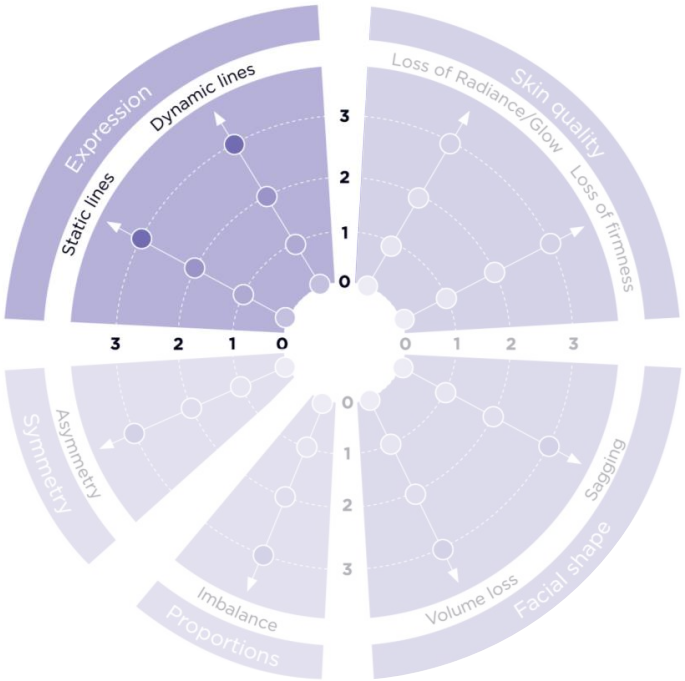
3 (severe imbalance)

GAIN

4. Expression

GALDERMA

The Galderma FAS — static and dynamic lines are graded 0–3

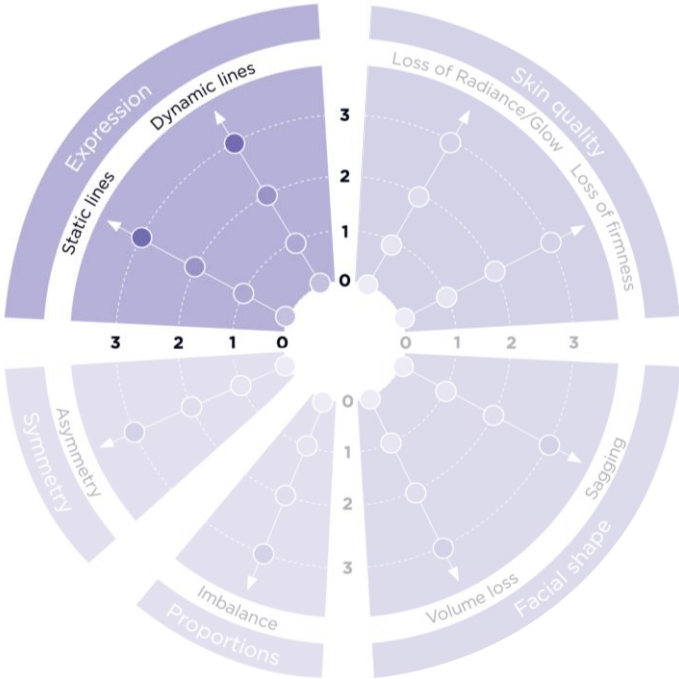


Forehead lines
Glabellar lines
Crow's feet lines
Cheek lines
Perioral lines

- Static lines are assessed at rest, dynamic lines are assessed in animation
- Dynamic assessment should include gesturing when smiling, frowning, and raising eyebrows

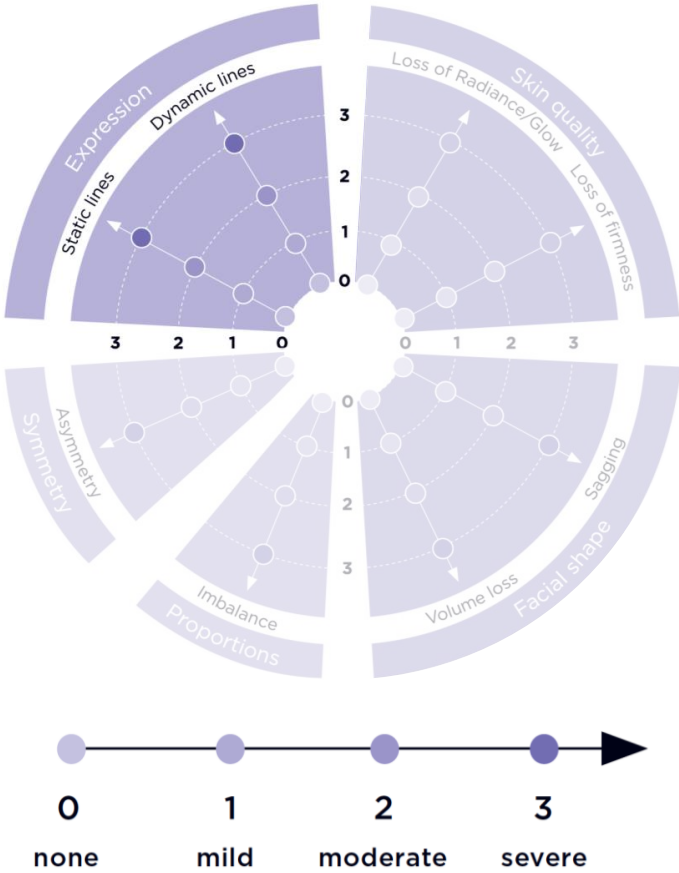


The Galderma FAS — static lines are graded 0–3



0 (none) 1 (mild) 2 (moderate) 3 (severe)

The Galderma FAS — dynamic lines are graded 0-3



0 (none)



1 (mild)



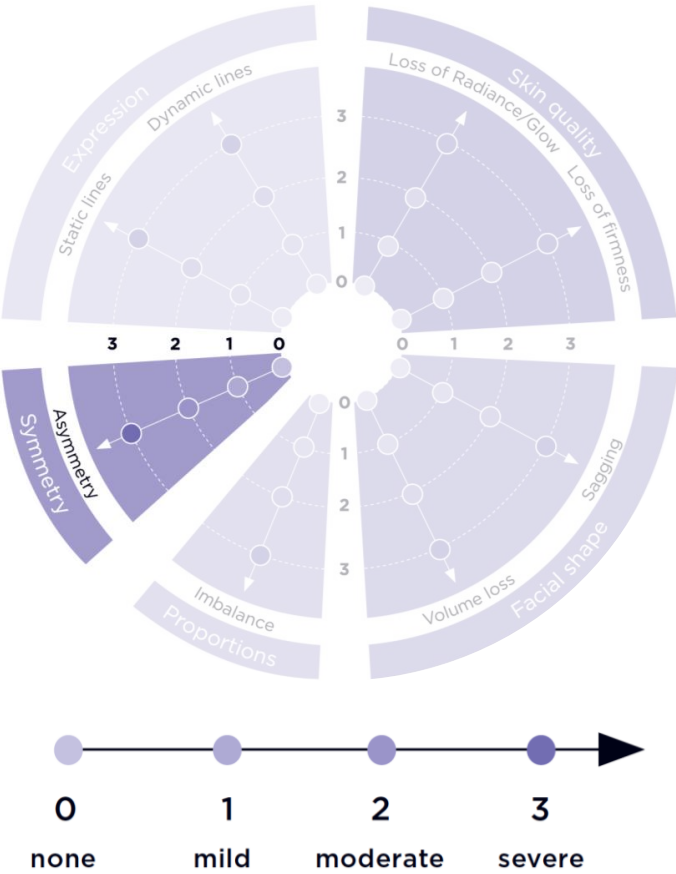
3 (severe)

GAIN

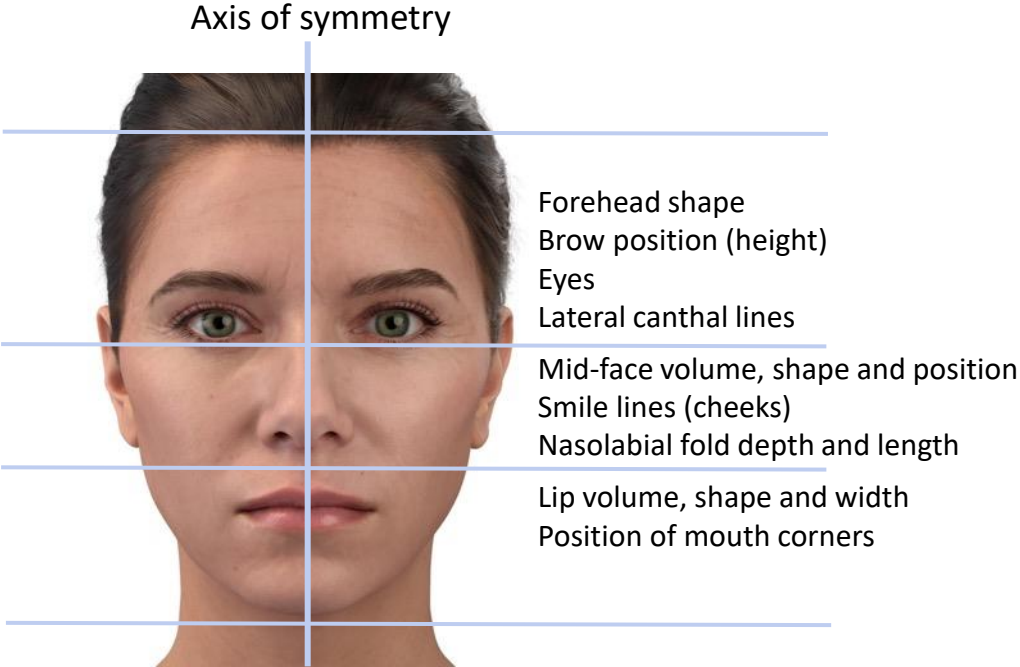
5. Symmetry

GALDERMA

The Galderma FAS — facial symmetry is evaluated separately in the upper, middle and lower thirds

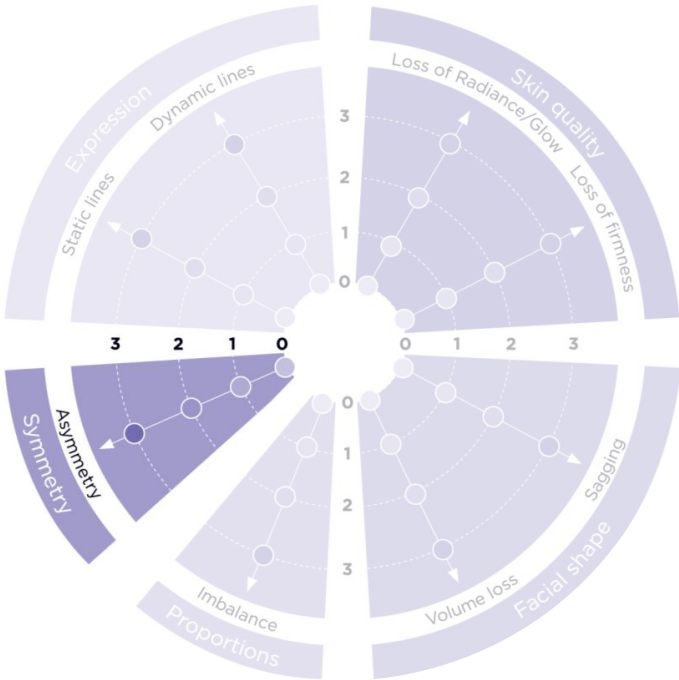


Facial symmetry is assessed at rest and in animation



Use a black card to mask parts of the face and focus on one area

The Galderma FAS — aesthetic asymmetry severity is graded 0–3



0 (none)

1 (mild)

2 (moderate)

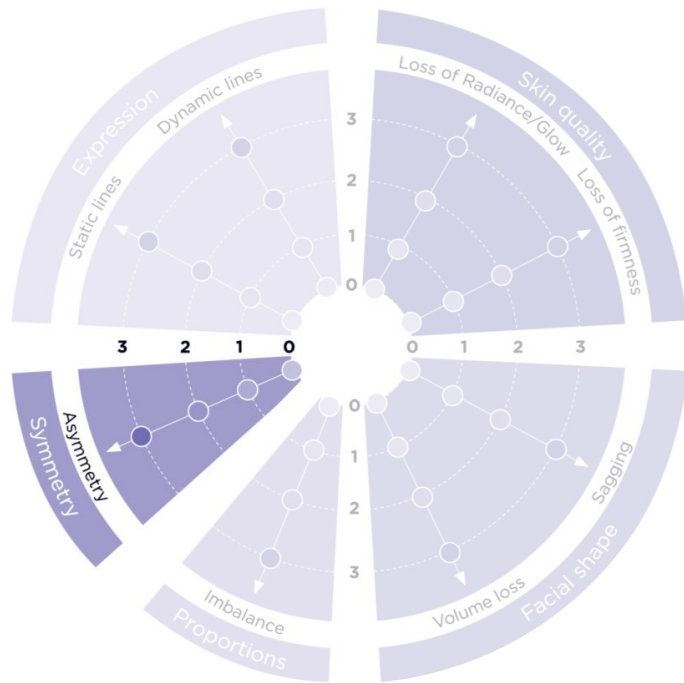
3 (severe)

Facial asymmetry is common. Causes include congenital and acquired diseases, and traumatic and developmental deformities¹

FAS, Facial Assessment Scale.
1. Cheong YW, Lo LJ. Chang Gung Med J 2011;34(4):341–351.

The Galderma FAS — aesthetic asymmetry severity is graded 0–3

GAIN



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GALDERMA

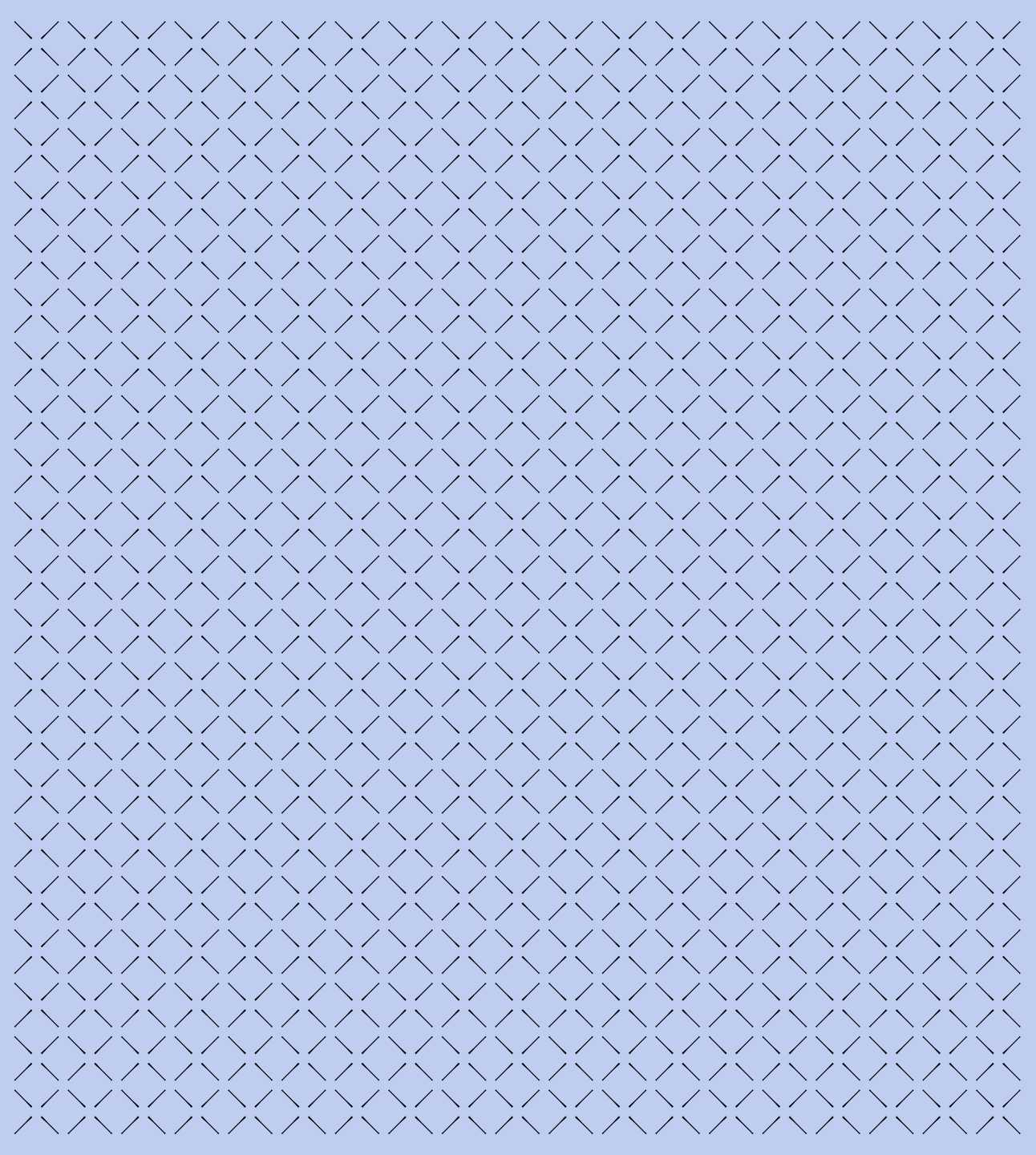
EST. 1981

GAIN⁺

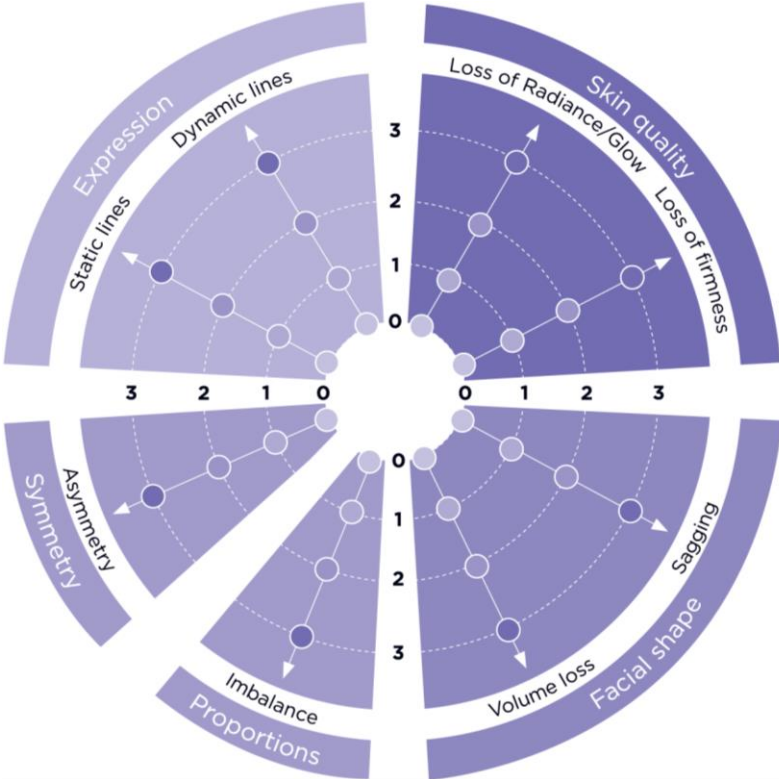
Ami Technologies

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Facial Assessment



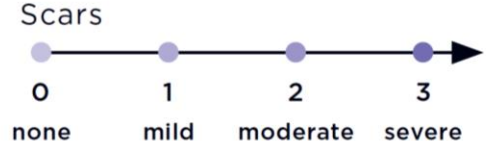
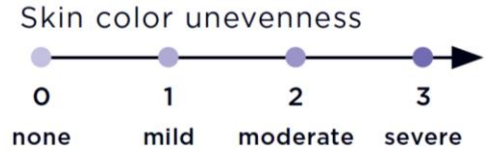
The Galderma FAS guides aesthetic consultations and helps identify treatment priorities



SEVERITY EVALUATION SCALE



ADDITIONAL SKIN EVALUATION

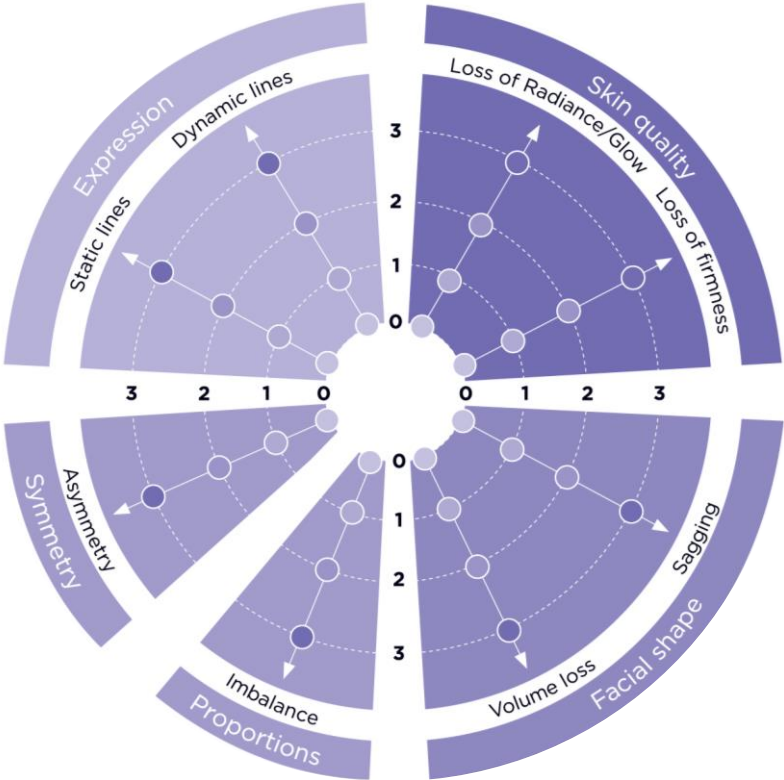


The Galderma FAS¹

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- Engages and involves the patient
- Visualizes treatment priorities for both the patient and practitioner
- Aids development of an individualized treatment plan using treatment combinations

FAS, Facial Assessment Scale.
1. Jain R, et al. J Cosmet Dermatol 2016;16(1):132-143.

The Galderma FAS five facets of facial aesthetics¹



1 Skin quality

3 Proportions

5 Symmetry

2 Facial Shape

4 Expression

FAS, Facial Assessment Scale.
Adapted from Jain R, et al. J Cosmet Dermatol 2016;16(1):132-143.

GAIN

1. Skin quality

GALDERMA

The importance of skin quality

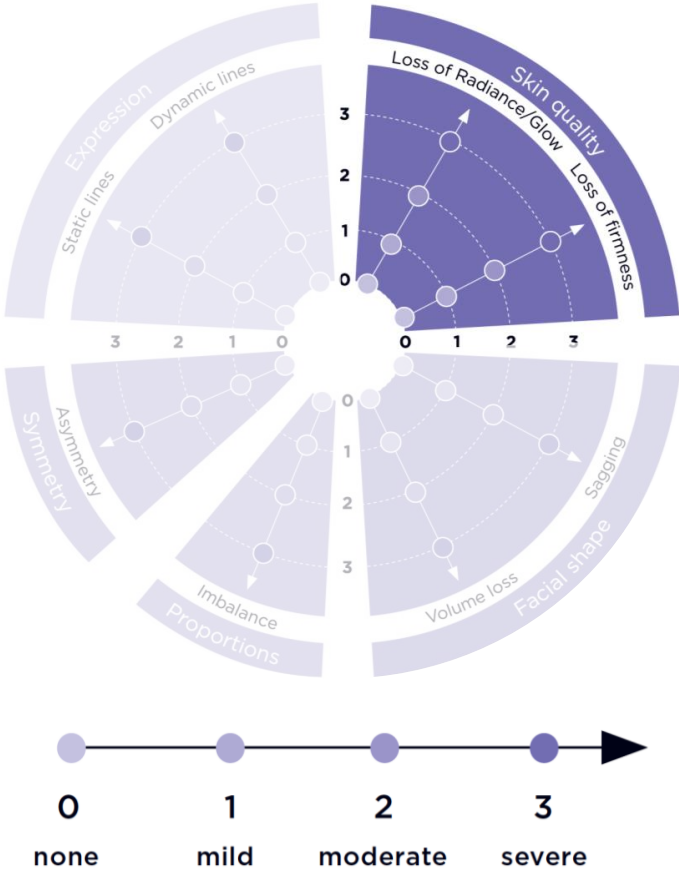
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- Face powder has been used since ancient times to improve the appearance of skin quality⁴



1. Fink B, Matts PJ. J Eur Acad Dermatol Venereol 2008;22(4):493–498. 2. Vashi NA. Beauty and Body Dysmorphic Disorder. Springer International Publishing Switzerland 2015. 3. Galderma U&A Skin Nutrition Cross-Country Report, December 2016. 4. Hurst S. Pucher's Perfumes, Cosmetics and Soaps. Chapman & Hall 1993.

The Galderma FAS — skin quality is graded 0-3 for radiance/glow



0 (none)



1 (mild)



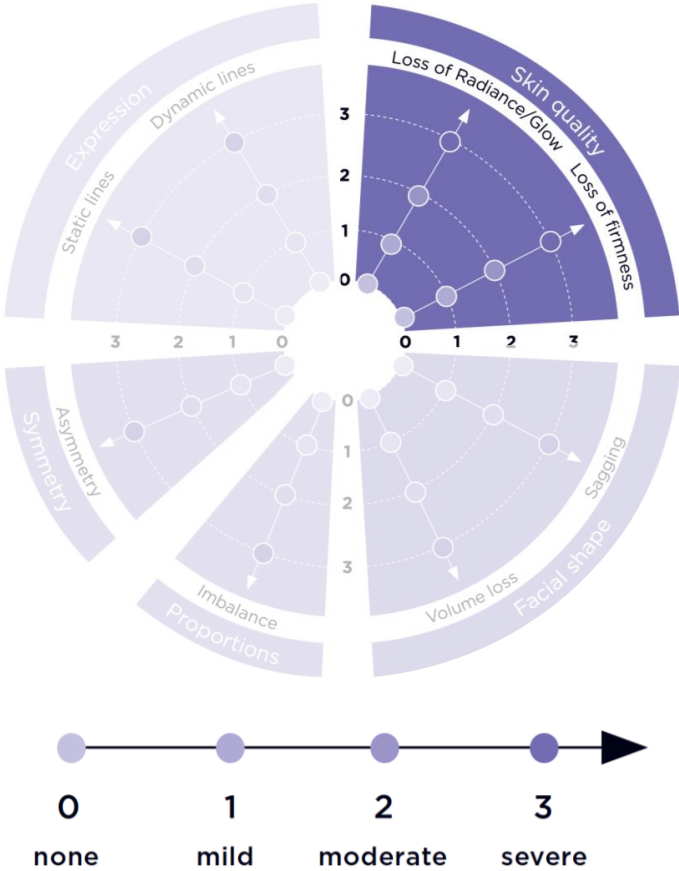
2 (moderate)

Skin radiance/glow depends on contrast (defined by luminosity, brightness, and transparency), color (mainly affected by the skin microcirculation), and imperfections (homogeneity, dark circles, or spots)¹

FAS, Facial Assessment Scale.

1. Dumoulin M, et al. Clin Cosmet Investig Dermatol 2016;9:315–324.

The Galderma FAS — skin quality is graded 0–3 for firmness



0 (none)

1 (mild)

2 (moderate)

3 (severe)

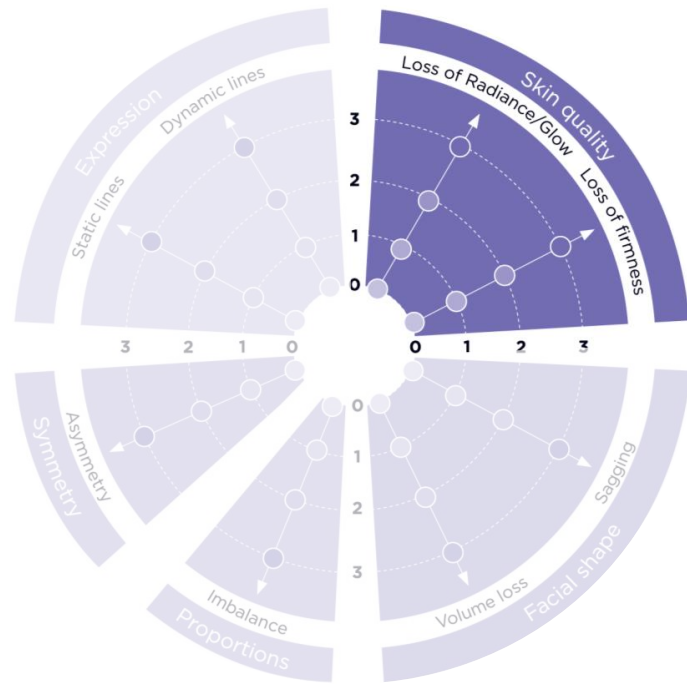
Skin firmness depends on its elasticity (ability to return to its original position), tautness/tightness (resistance against mechanical force) and hydration¹

FAS, Facial Assessment Scale.

1. Goldie K, et al. Clin Cosmet Investig Dermatol 2021;14:643–654.

The Galderma FAS — unevenness of skin color lies in the ‘additional skin evaluation’ section

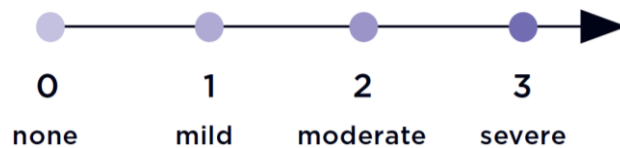
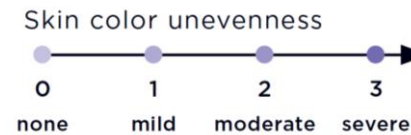
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SEVERITY EVALUATION SCALE



ADDITIONAL SKIN EVALUATION



3 (severe skin color unevenness)



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2. Facial shape

GALDERMA

Facial shapes and outlines

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Facial shape may be oval, round, triangular, heart-shaped, or square



Oval



Round



Triangle



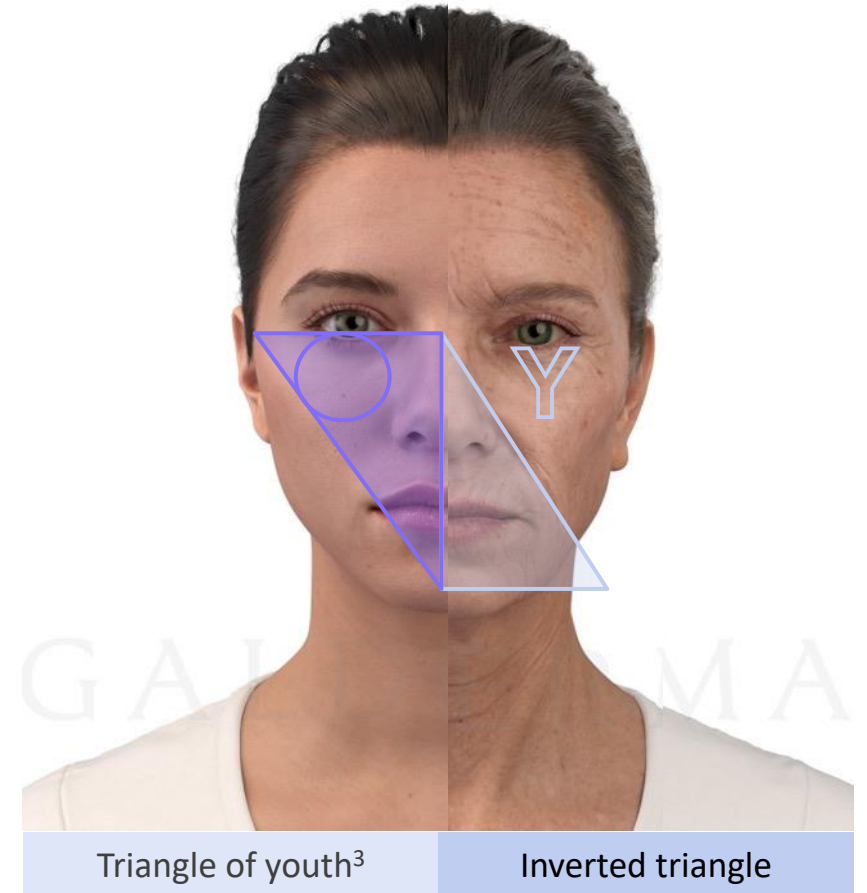
Heart

Age-related volume loss and sagging changes facial shape¹

Age-related volume loss and sagging results from:

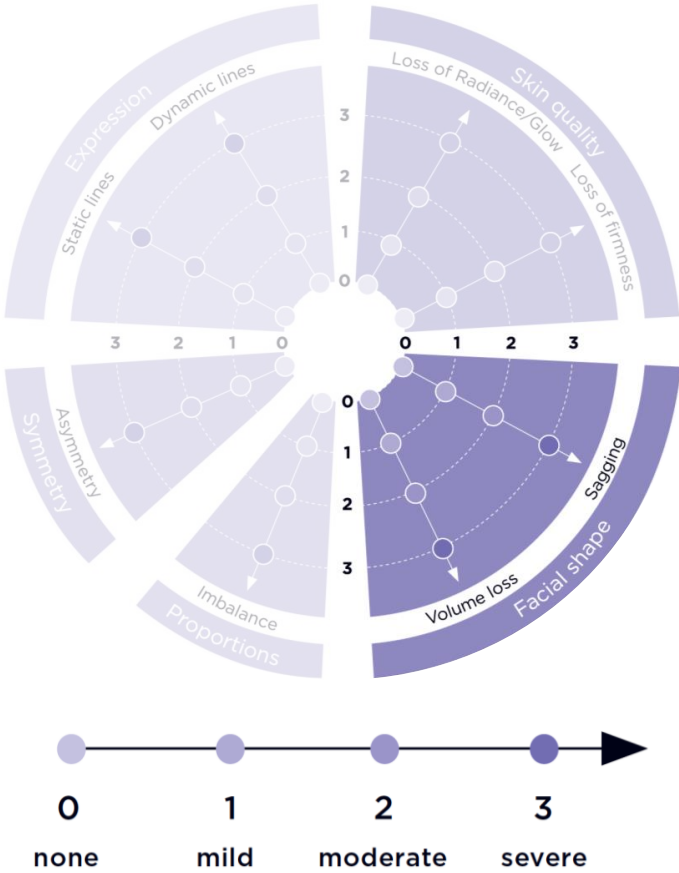
- Degradation of the skeleton and soft tissues¹
- Descent of cheek fat²
- Depletion of cheek fullness²

1. Cohen AJ, et al. Mid face facelift. Medscape, 2012.
2. Coleman SR, Grover R. Aesthetic Surg J 2006;26(suppl):S4-S9.
3. Thomas MK, et al. Indian J Plast Surg 2012;45(1):122-127.



The Galderma FAS — facial shape is graded 0-3 for skin sagging

Sagging is assessed in key areas

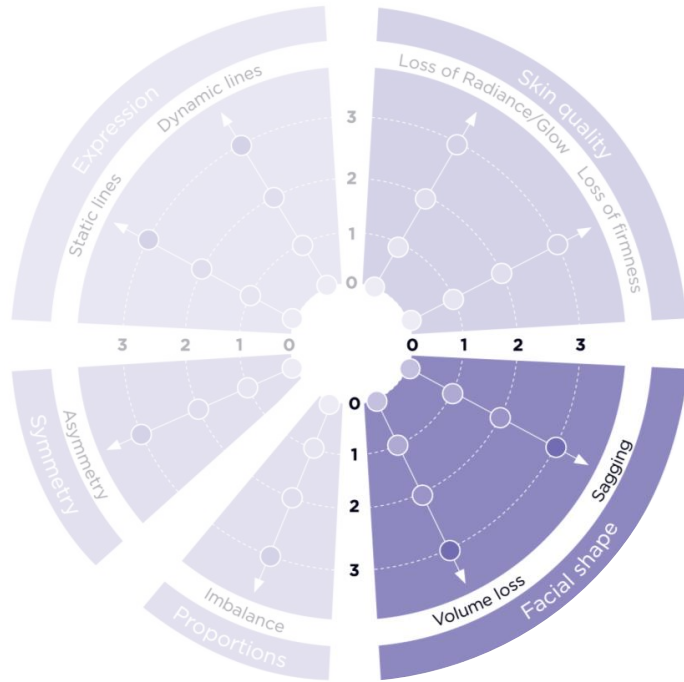


- Brow position (height)
- Malar mound
- Mouth corners
- Jawline

FAS, Facial Assessment Scale.

The Galderma FAS — facial shape is graded 0–3 for skin sagging

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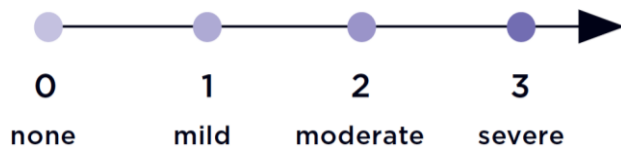


0 (none)

1 (mild)

2 (moderate)

3 (severe)

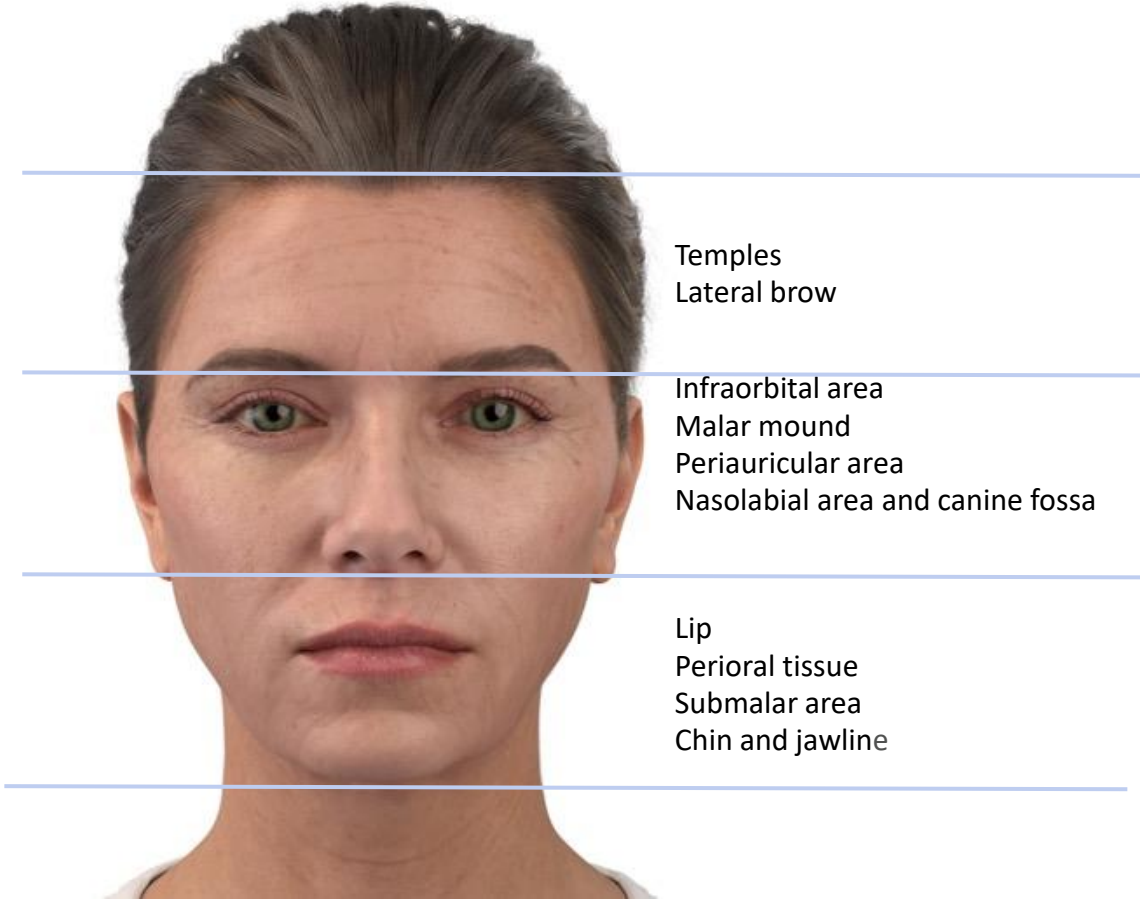
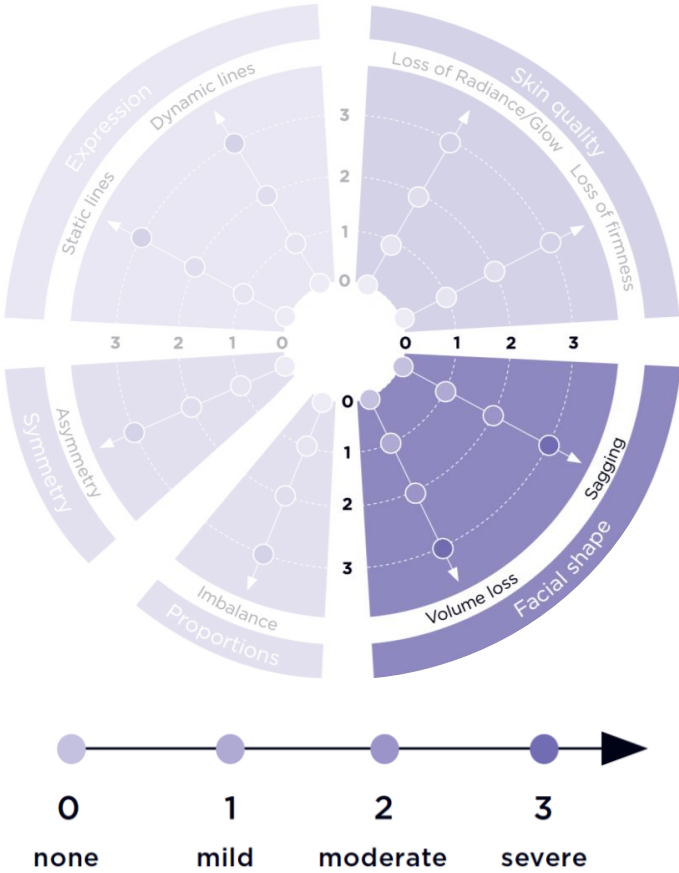


FAS, Facial Assessment Scale.

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The Galderma FAS — facial shape is graded 0-3 for volume loss

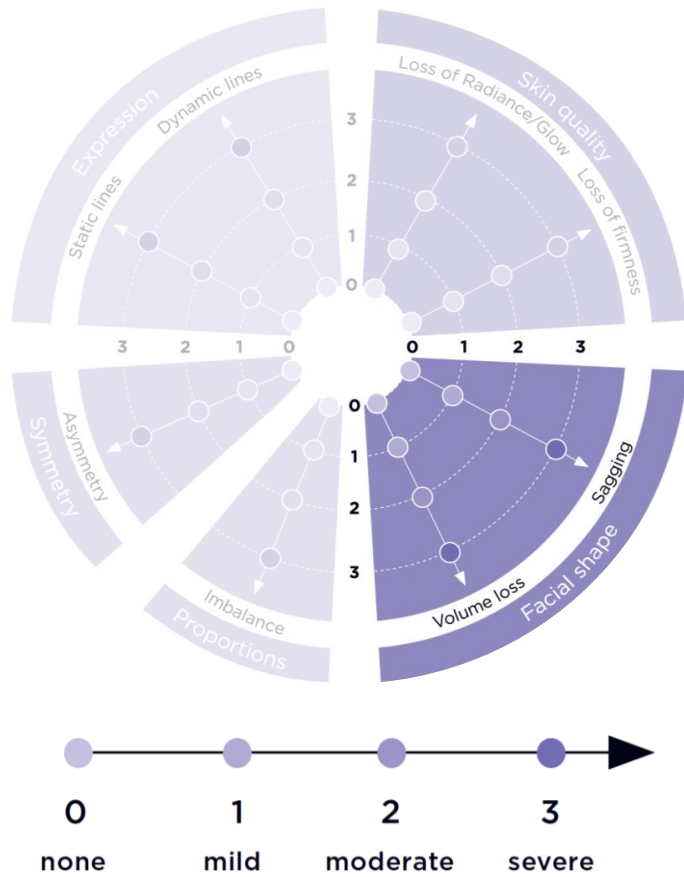
Volume loss is assessed in key areas



FAS, Facial Assessment Scale.

The Galderma FAS — facial shape is graded 0–3 for volume loss

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0 (none)

1 (mild)

2 (moderate)

3 (severe)

FAS, Facial Assessment Scale.

GALDERMA

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3. Proportions

GALDERMA

Division of the face into horizontal thirds*¹

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Horizontal thirds

- In attractive faces, the midface is often longer than the forehead and lower face²
- Horizontal thirds can be easily measured using your hand and applying the lengths to your patient's face

*Please note that horizontal thirds are used only for proportions assessment, while upper, middle and lower face for treatment purposes include other anatomical landmarks.

1. Milutinovic J, et al. Sci World J 2014; DOI: 10.1155/2014/428250. 2. Rhee SC. Skin Res Technol 2017;1-7.

The face can be divided vertically into fifths¹



Vertical fifths

- Vertical fifths are equal in attractive Caucasian females¹

1. Milutinovic J, et al. Sci World J 2014; DOI: 10.1155/2014/428250.

The relationship between the nose, chin and lips contributes to facial balance (the Ricketts' line)



Ricketts' line

- The Ricketts' line is drawn from the tip of the nose to the chin¹
- Upper and lower lip projection can be assessed in relation to this line² by holding a pen/ruler or similar up to the patient's face

1. Umale VV, et al. J Oral Health Craniofacial Science 2017;2:9-16.

2. Saad A, et al. Pak Oral Dental J 2011;31(1):84-87.

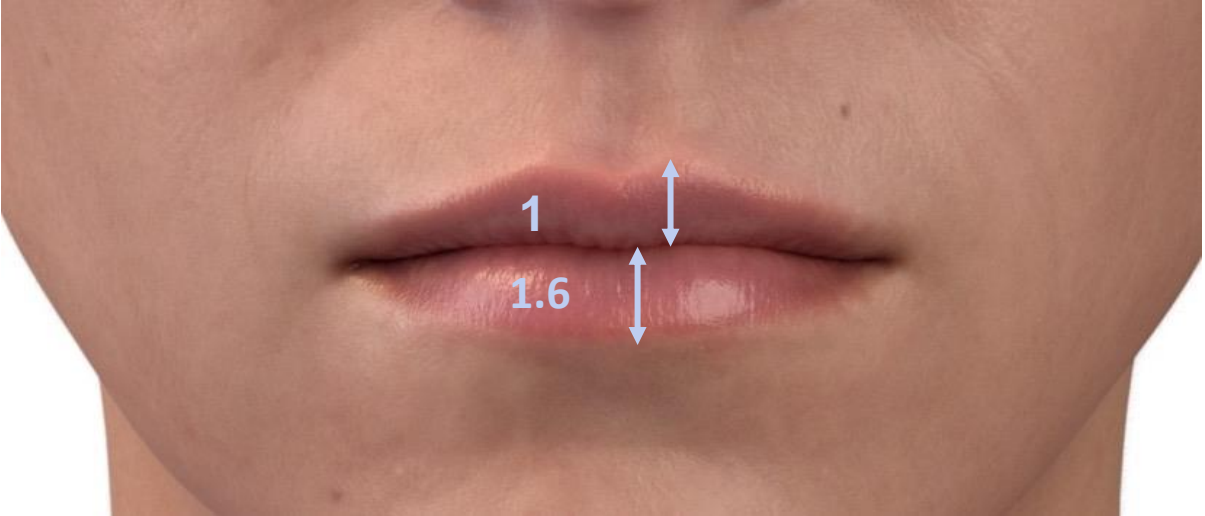
The Ogee curve gives the face contour, projection and dimension



Ogee curve

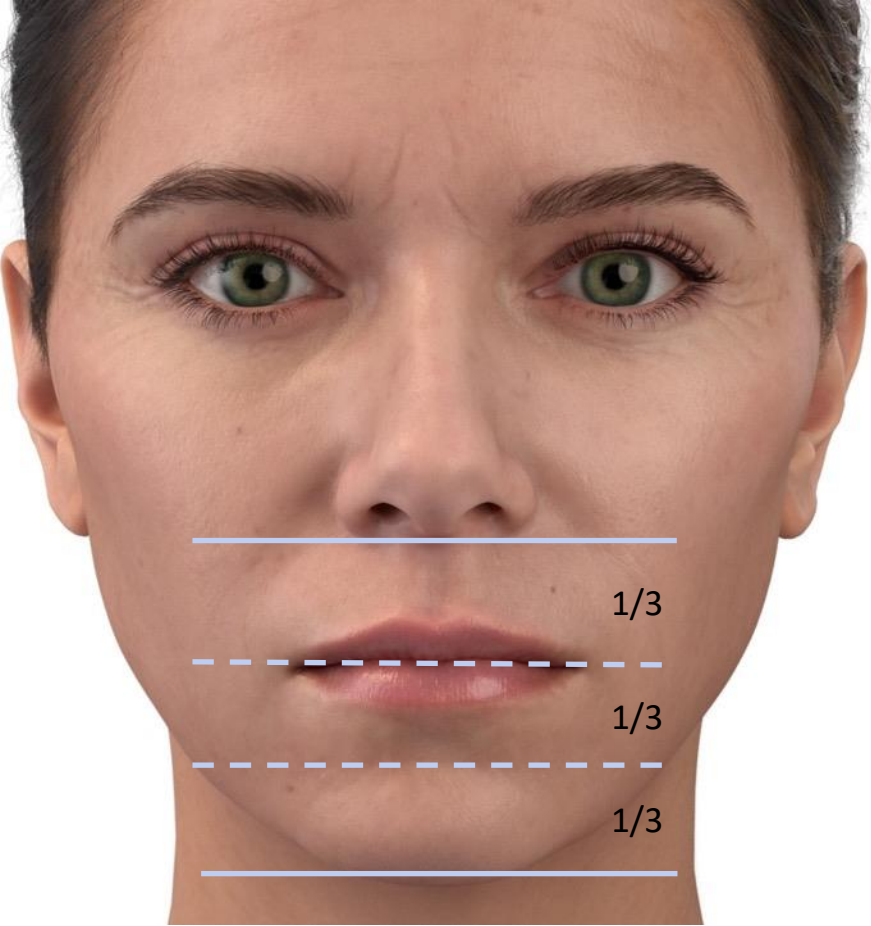
- A youthful cheek exhibits a smooth convexity from the lower eyelid to the lower face resembling an ogee curve¹
- Aging results in volume loss and unfavourable shadowing¹
- The Ogee curve can be examined by assessing the face in the $\frac{3}{4}$ view

Certain features of the lips contribute to the attractiveness of the lower third of the face



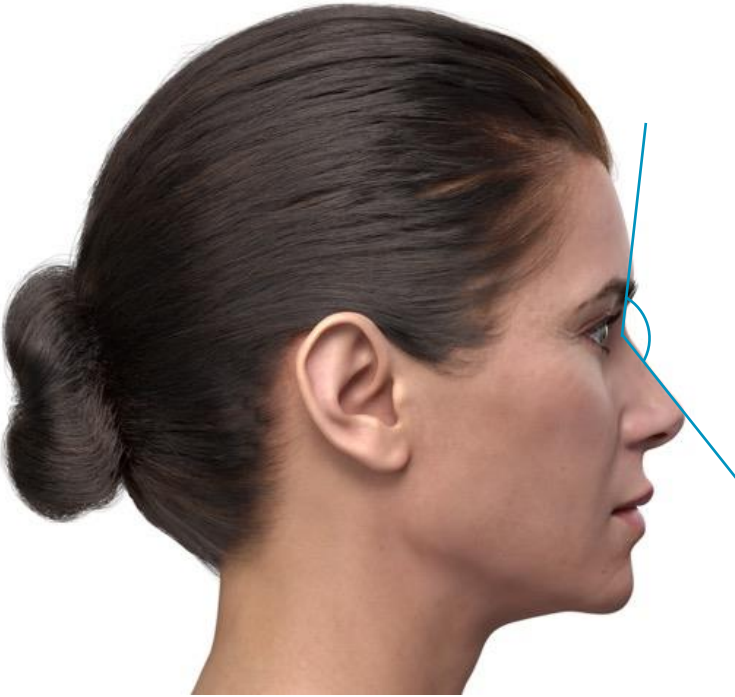
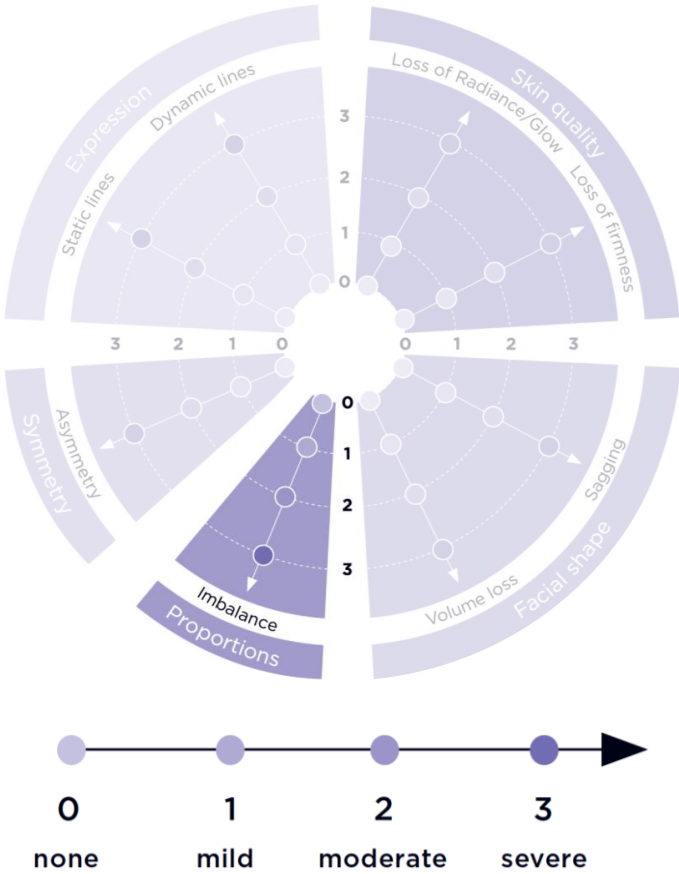
In Caucasians, the ideal vertical height ratio of upper to lower lip is 1:1.6¹

The lower third of the face is divided into unequal thirds to define the upper lip, the lower lip, and the chin²



1. Kollipara R, et al. J Clin Aesthet Dermatol 2017;10(11):19–21.
2. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

The Galderma FAS proportions — the ideal range for the nasofrontal angle is 115–130°¹



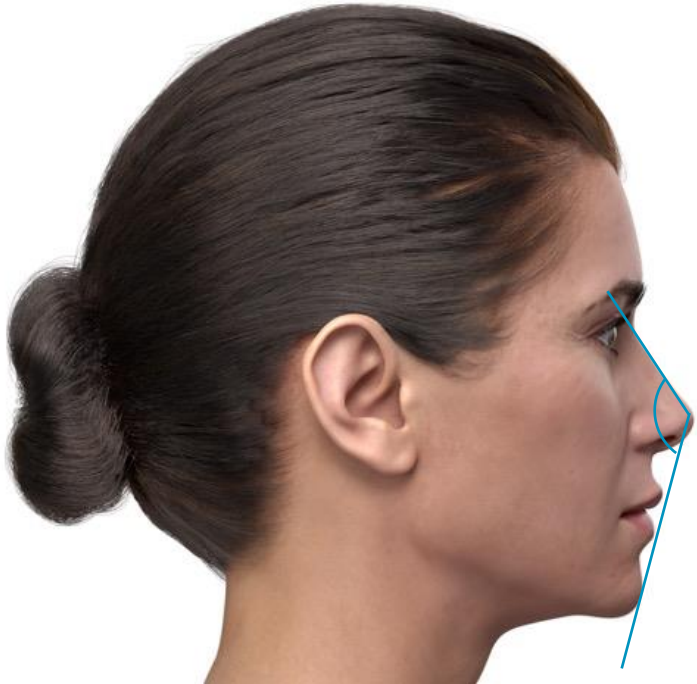
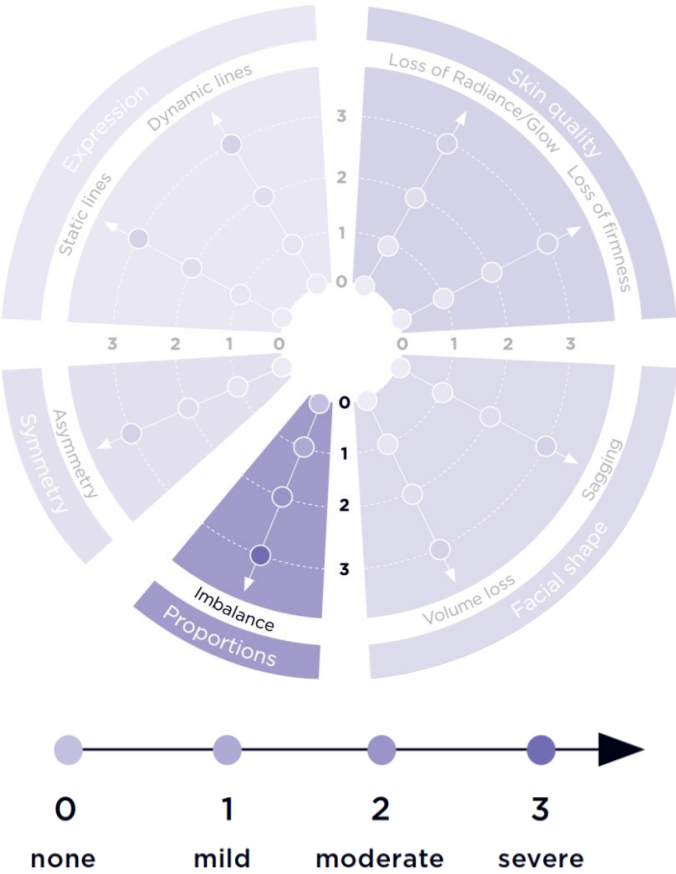
The nasofrontal angle

- The angle between lines drawn from:
1. The nasion to the glabella
 2. The nasion to the nasal tip¹

FAS, Facial Assessment Scale.

1. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

The Galderma FAS proportions — the ideal range for the nasofrontal angle is 120–130°⁰¹



The nasomental angle

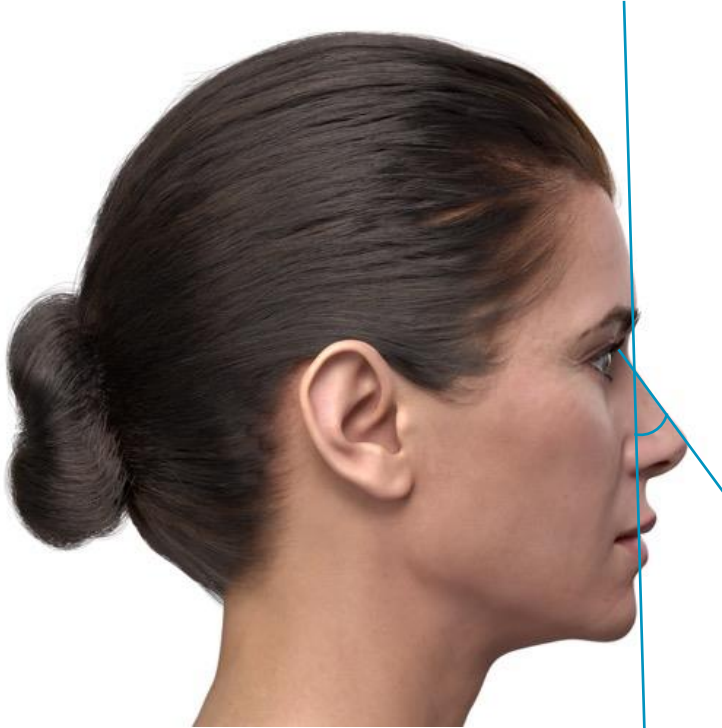
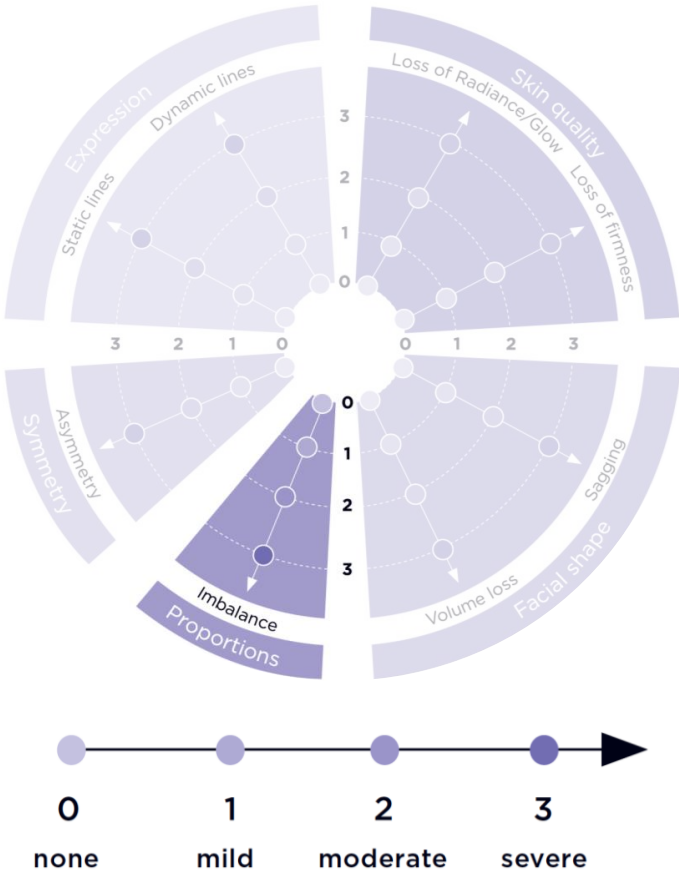
The angle between lines drawn:

1. Along the dorsum to the nasion
2. From the nasal tip to the the pogonion (the most projecting point on the anterior surface of the chin)

FAS, Facial Assessment Scale.

1. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

The Galderma FAS proportions — the nasofacial angle in Caucasians is 30–40°¹



The nasofacial angle

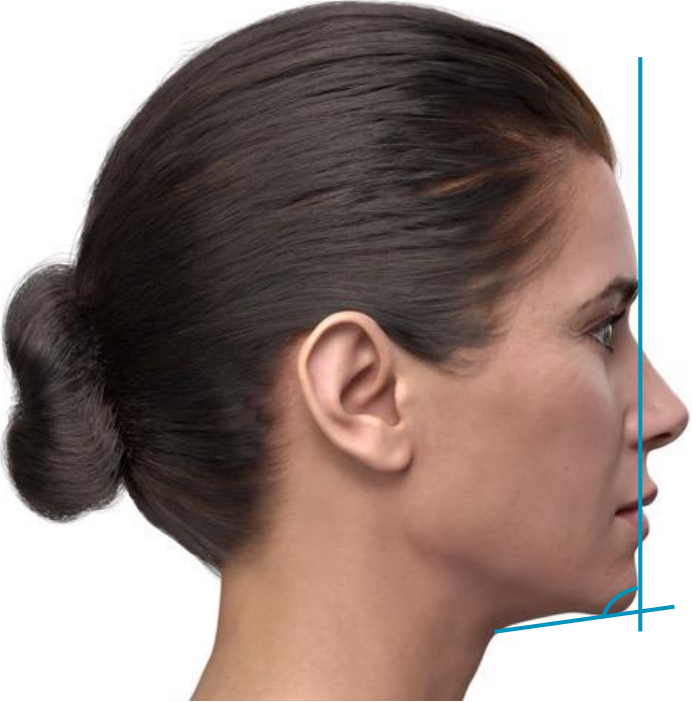
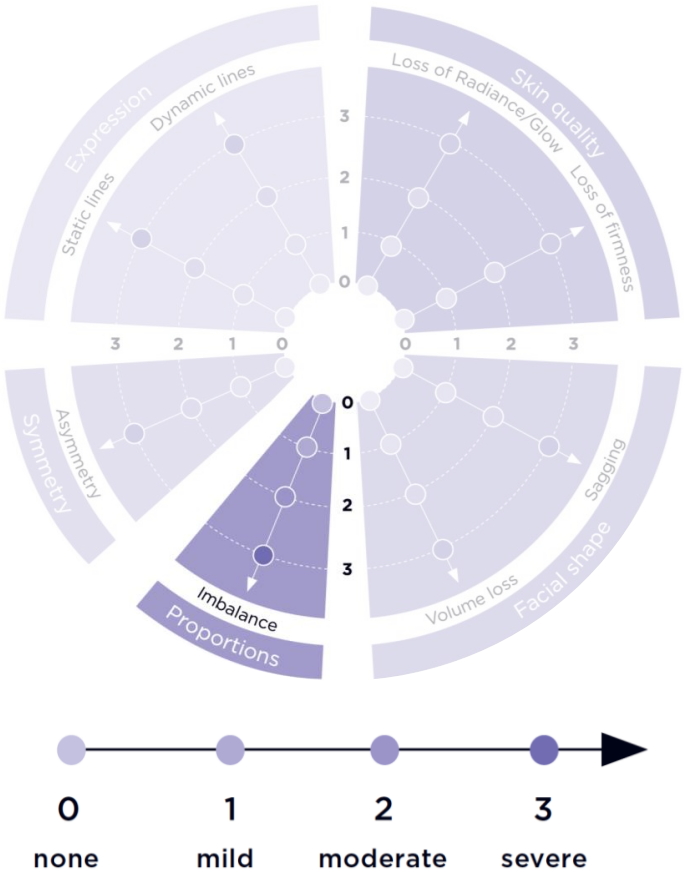
The angle between:

1. The anterior facial plane (the line from the glabella to the pogonion)
2. The line tangent to the dorsum of the nose (the line drawn from the nasion to the nasal tip)¹

FAS, Facial Assessment Scale.

1. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

The Galderma FAS — the ideal range for the mentocervical angle in Caucasians is 80–95°¹



The mentocervical angle

The angle between:

1. A line drawn from the cervical point to the menton¹
2. The anterior facial plane¹

FAS, Facial Assessment Scale.

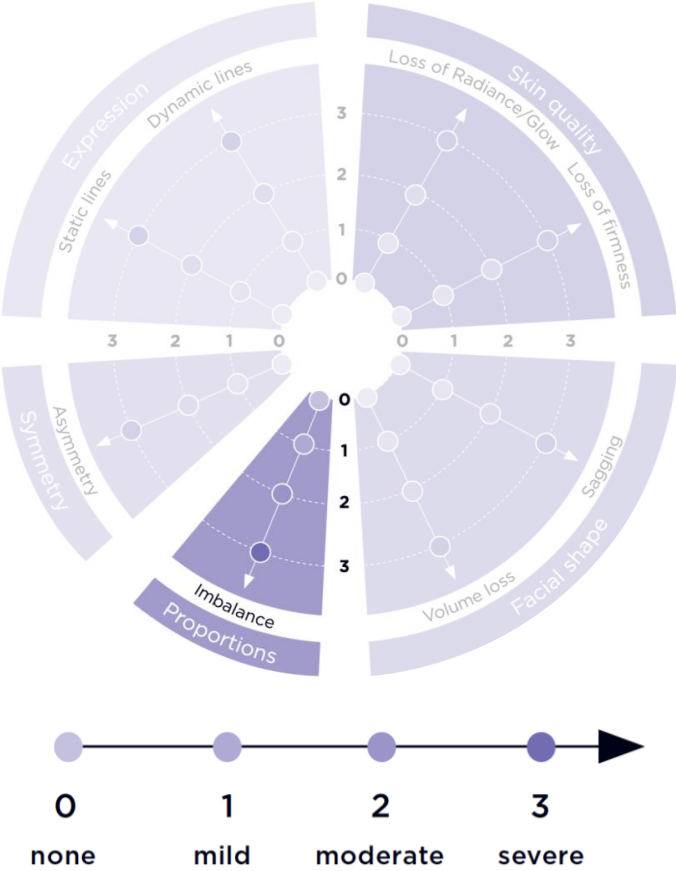
1. Prendergast PM. Facial proportions. In: Erian A, Shiffman MA, eds. Advanced Surgical Facial Rejuvenation. Berlin Heidelberg: Springer-Verlag; 2012.

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Assessment should include frontal, profile and $\frac{3}{4}$ views to examine the angles of the face and the relationship between features

The Galderma FAS — facial proportions and contours are graded 0–3

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1 (mild imbalance)



2 (moderate imbalance)



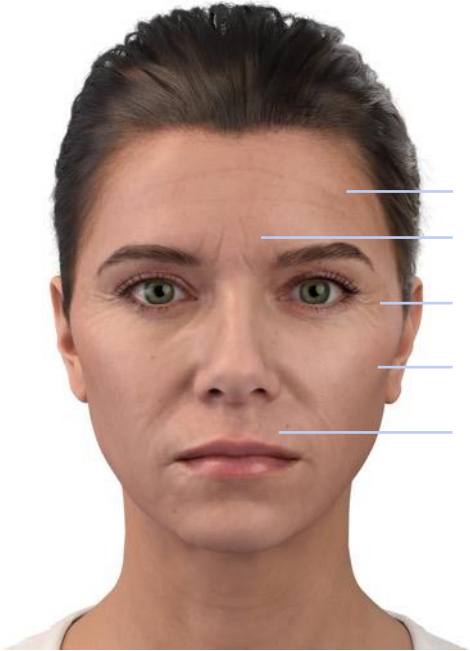
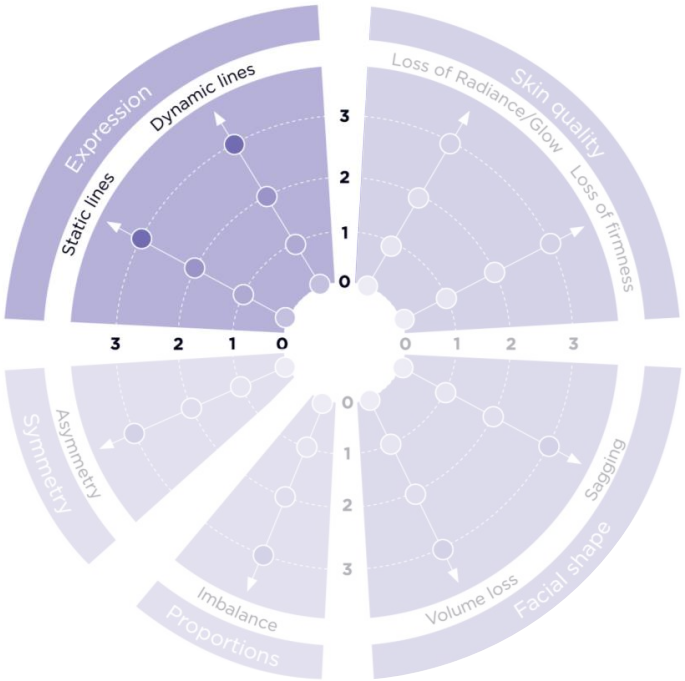
3 (severe imbalance)

GAIN

4. Expression

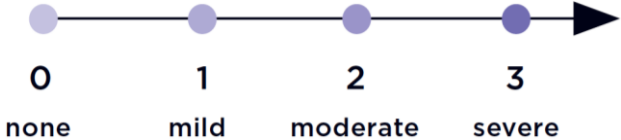
GALDERMA

The Galderma FAS — static and dynamic lines are graded 0–3

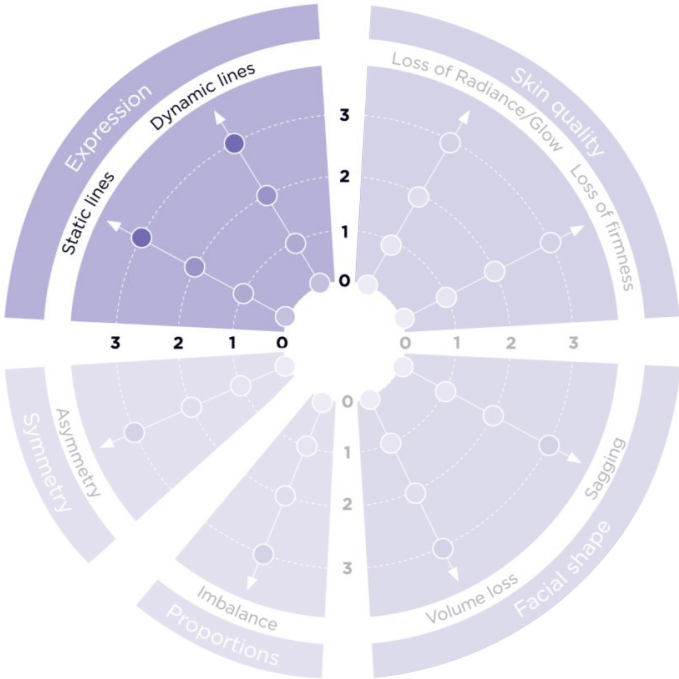


Forehead lines
 Glabellar lines
 Crow's feet lines
 Cheek lines
 Perioral lines

- Static lines are assessed at rest, dynamic lines are assessed in animation
- Dynamic assessment should include gesturing when smiling, frowning, and raising eyebrows

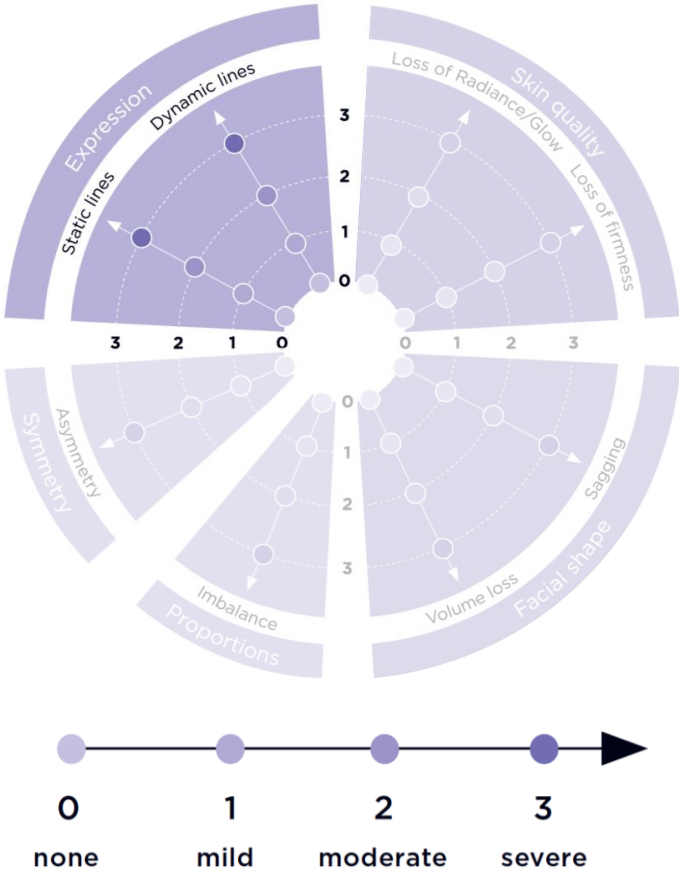


The Galderma FAS — static lines are graded 0–3



0 (none) 1 (mild) 2 (moderate) 3 (severe)

The Galderma FAS — dynamic lines are graded 0-3



0 (none)



1 (mild)



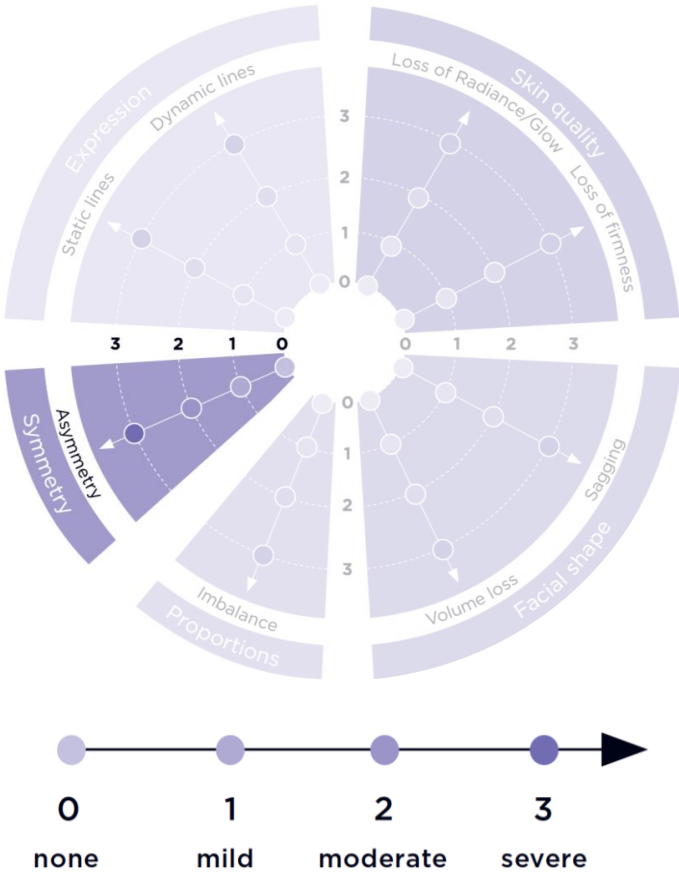
3 (severe)

GAIN

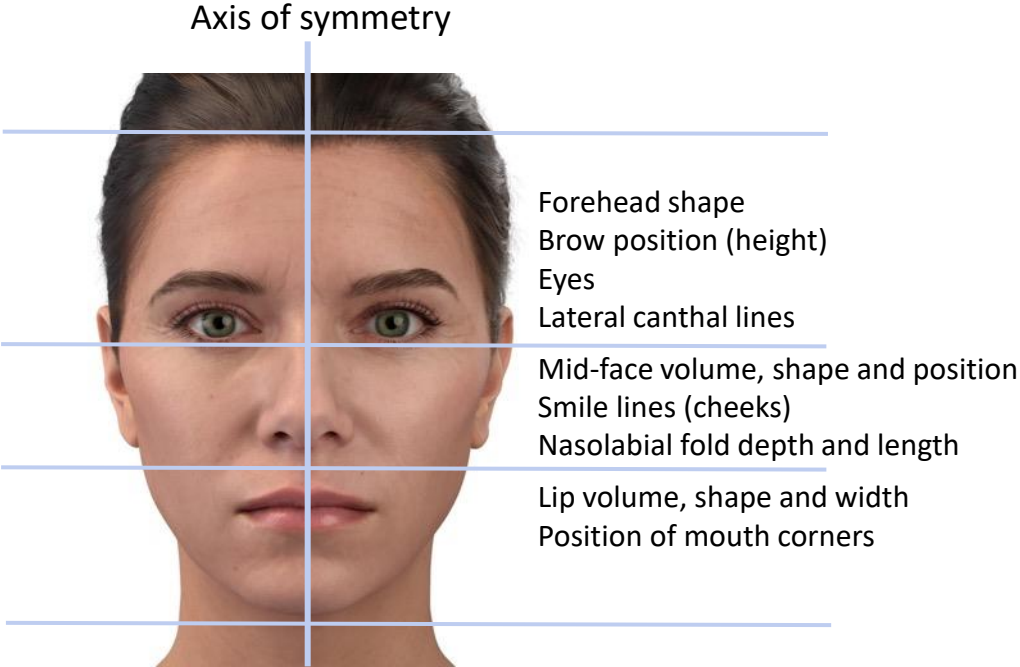
5. Symmetry

GALDERMA

The Galderma FAS — facial symmetry is evaluated separately in the upper, middle and lower thirds

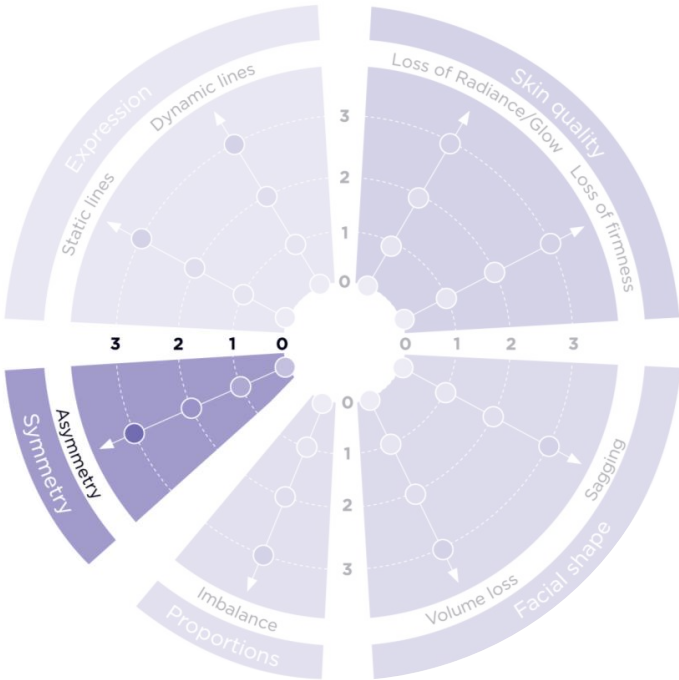


Facial symmetry is assessed at rest and in animation



Use a black card to mask parts of the face and focus on one area

The Galderma FAS — aesthetic asymmetry severity is graded 0–3



0 (none)

1 (mild)

2 (moderate)

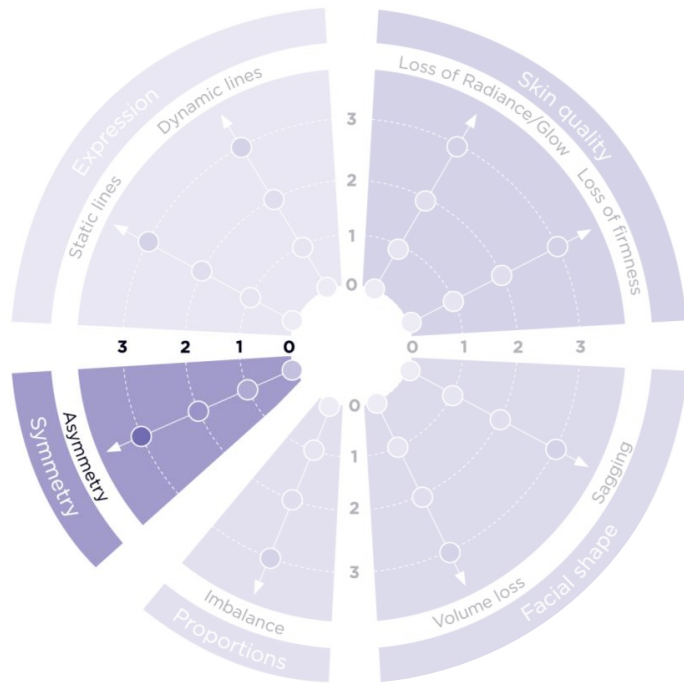
3 (severe)

Facial asymmetry is common. Causes include congenital and acquired diseases, and traumatic and developmental deformities¹

FAS, Facial Assessment Scale.
 1. Cheong YW, Lo LJ. Chang Gung Med J 2011;34(4):341–351.

The Galderma FAS — aesthetic asymmetry severity is graded 0–3

GAIN

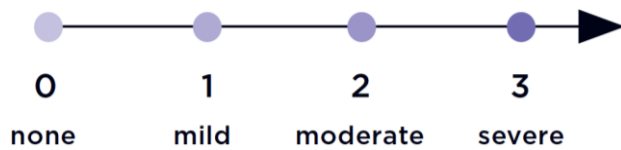


0 (none)

1 (mild)

2 (moderate)

3 (severe)



Facial asymmetry is common. Causes include congenital and acquired diseases, and traumatic and developmental deformities¹

FAS, Facial Assessment Scale.

1. Cheong YW, Lo LJ. Chang Gung Med J 2011;34(4):341–351.

GALDERMA

EST. 1981

GAIN⁺

Ami Technologies

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