



## Dr. Fabián Pérez Rivera **INTERVIEW**

**Dr Rivera, you have become an expert on performing Blepharoplasty using the Pixel CO<sub>2</sub>, showcasing some very impressive results. Could you share some general tips to achieve optimal results when performing non-surgical Blepharoplasty?**

My best experience treating this indication is by using the Pixel 9x9 applicator on the Pixel CO<sub>2</sub> device.

As a plastic surgeon, I like to use quite aggressive treatment parameters, in order to achieve the best results.

I usually perform three passes, and sometimes even stack pulses, to get optimal results.

In terms of treatment parameters, I usually start working with the Power mode set to Low, with Energy levels varying between 80 to 100 mJ/Pixel, and end the treatment by switching the Power mode to High, while delivering 40-60 mJ/Pixel.

Since I work with relatively high energy levels, I apply an injectable local anesthesia in the periorbital area (2% lidocaine with epinephrine) before the treatment.



**Xanthelasma can be difficult to treat. What are your guidelines for a successful treatment?**

Actually, treating Xanthelasma is not difficult at all! The tricky thing is performing the treatment without leaving any scars or sequels.

I use the Focusing applicator (F = 50 mm), with the Power level set to 8-10 Watts.

When performing the treatment, I make sure that the tip of the applicator is at least 5 cm away from the xanthelasma itself. This way, the laser beam is defocused and therefore, it generates more photocoagulation (heat transfer) and no ablation. This is how I manage to melt the fat, instead of cutting the skin.

For the treatment regimen, it usually takes two sessions, with 15 days in between these sessions.

**Another out-of-the-ordinary indication which you've mastered is the treatment of Pearly Penile Papules. For those of us who're unfamiliar with it, can you tell us a little bit about it, and share some key pointers in terms of safety and efficacy, while using the Pixel CO<sub>2</sub>?**

PPP is a widespread pathology. Depending on the source of reference, between 15% to 40% of uncircumcised young men suffer from it worldwide. This is a considerably significant number of potential patients!

I say this because, although benign, PPPs generate a significant alteration in our patients' quality of sexual life and their self-esteem. Luckily, there's a solution using the Pixel CO<sub>2</sub>.

In a paper that I published in the European Journal of Plastic Surgery, I reported that 70% of enrolled patients indicated they had suffered, at least once in their lives, an embarrassing sexual situation due to their PPP, and 60% of them rated the way PPP altered their Sexual Health Quality of Life (SHQL) as very important to extremely important. I was able to show that 90% of the patients evaluated the level of improvement in their SHQL as "successful" after performing the PPP removal treatment, using the Pixel CO<sub>2</sub> laser.

[You can read and download the work for free.](#)

For the treatment itself: I use the Focusing applicator (F = 50 mm), with the Power level set to 10 Watts, and the Mode set to Repeat (with both the On- and Off-Time set to 100 ms). I keep the applicator at a distance between 5-10 cm from the papules during the procedure.

Since the glans (tip of the penis) is mucosa tissue, it absorbs anesthetic creams very well (I use lidocaine 10% + tetracaine 10%), making the treatment entirely painless.



**When it comes to skin resurfacing, the patient's skin type can be a challenging factor. As someone who gained extensive experience in treating a variety of different patients, how would you treat darker skin types – is there a preferable applicator and treatment regimen which you find best in these occasions?**

Certainly, CO<sub>2</sub> laser facial resurfacing on dark skin is a great challenge.

In my country, patients that are skin type III-IV on the Fitzpatrick scale are very prevalent. In these cases, I prefer to prepare the skin using Melanization-inhibiting creams. I use different combinations with hydroquinone, tranexamic acid and kojic acid, ideally one month before treatment, and even one month after the treatment - I instruct my patients to resume the use Melanization inhibitor creams for 3 to 6 months.

**The CO<sub>2</sub> laser is considered to be the gold standard for surgical scars. When a patient comes into your clinic, what are the main aspects you take into consideration when forming the treatment plan?**

Yes, I agree that the CO<sub>2</sub> laser is the gold standard for these treatments, especially for mature and atrophic scars. I usually use it not only for its ablative and biostimulation function of the fibroblasts, but also as a DDD (delivery drug device). Immediately following the Pixel CO<sub>2</sub> treatment, injectable formulation of corticosteroid and 5-FU may be applied.



**Last but not least: how would you treat stretch marks?**

For stretch marks, that's an indication for which I decide on the treatment plan according to the patient's skin type.

If the patient is either a Type I or II, and even for some of my Type III patients, I don't hesitate to use the CO<sub>2</sub> with the Pixel 9x9 applicator. I set the Energy level to 10-20 mJ/Pixel, the Power mode to High, and perform multiple passes. For patients that are Type III, IV or V on the Fitzpatrick scale, I prefer to use a picosecond laser, with a focused point handpiece, to avoid PIH.



# Dr. Fabián Pérez Rivera Bio

Dr. Fabián Pérez Rivera is a general surgeon, lymphobologist, plastic surgeon and an expert in the use of EBD (lasers and RF), with more than 20 years of experience. He studied medicine and completed his residencies in Argentina. He has written 26 scientific publications in medical journals of Argentina and other countries, and 5 chapters in Aesthetic Dermatology books.

He is a member of five plastic surgery societies: SACPER - ISAPS - ICOPLAST - FILACP - SCPBA. He is a founding member of the Argentine Society of Laser and Medical Technologies (SALTEM). He was a member of the director committee of the Plastic Surgery Society of Buenos Aires (SCPBA), from 2017 to 2022.

Dr. Pérez is a Reviewer in the European Journal of Plastic Surgery, Editorial Board Member for Medical Lasers Journal, Reviewer of the Scientific Reports Editorial for Springer Nature. Miembro Comité de Redacción de la Revista Argentina de Cirugía Plástica, and an Editor Associate and Editorial Board Member for the Journal of Advanced Plastic Surgery Research. He has been designated as Expert Evaluator of Postgraduate Careers by National Commission for University Evaluation and Accreditation (CONEAU).

Dr Pérez was elected to be President of the 27th Buenos Aires Plastic Surgery Symposium in 2024 and has received 2 awards from the Society of Plastic Surgery of Argentina (SACPER) and an Honorable Mention of the Society of Plastic Surgery of Buenos Aires (SCPBA).

Dr Pérez is an acting KOL for Alma Lasers, specialized on the Pixel CO<sub>2</sub> device.

