

The image above is an example of a vascular occlusion.

Delayed onset vascular occlusion (vascular compromise)

This can happen when the filler either migrates (moves around), the swelling from treatment, or the filler expanding, this can cause blocking of the vessel by compression, preventing blood flow. In this instance the patient may experience some or all of the following symptoms:

Pain, this may not be experienced immediately as the dermal filler contains a local anaesthetic, the pain may be extreme or a dull ache, this pain should not be confused with tenderness from the injection procedure due to internal or external bruising.

The skin appearance may look dusky, a bluish tint with fine lace like pattern. If this is not treated the skin will begin to break down, the top layer will start to slough off (skin peeling away) and will eventually become necrotic (turn black and die) this necrosis is irreversible and would require surgical intervention.

It is very important that you are aware of this particular complication as your practitioner is reliant on you reporting symptoms clearly, and in a timely manner. Further complications can occur if there is a delay in treating.





The first picture shows early symptoms and the second picture more advanced symptoms, which have occurred 2 days later.

Are there any other complications from vascular occlusion?

Yes, depending where the occlusion occurs on the face, injection into the temple area or the orbital area have a greater risk of blindness, whilst this complication is extremely rare there are reported cases, this occurs very soon after or during an injection and is irreversible.

Will this happen to me?

All procedures come with a degree of risk, your practitioner will discuss your particular procedure and it's associated risk before you decide. Your practitioner will take certain steps to minimise the risk. Blunt cannula can be used to treat certain areas and minimises the risk but cannot fully guarantee a 0% risk. Your practitioner also uses a safe procedure and the correct filler type for the area, again a 0% risk is not possible.

Please remember that your practitioner would rather be contacted if you have any concerns even if this is not related to a serious complication, it is better to be cautious. If you are contacting your practitioner please remember to describe your symptoms clearly:

- Pain severity 1- 10, 1 being mild 10 being severe
- Skin discolouration, you should describe how it looks and the location
- If you are feeling unwell
- Loss of circulation, skin feeling cool to touch
- Redness and heat at the site of treatment
- Swelling
- Other concerns not listed

Are there any side-effects from Hylase?

Yes all medicines have side effects, you could be allergic to this medicine and this could lead to a very severe allergy called anaphylaxis which can be life threatening. Despite this risk in the event of a vascular occlusion it is considered to be an emergency. Your medical practitioner is qualified to manage this complication and carries the required medication and emergency life support skills.

The naturally occurring Hyalauronic Acid in the skin can also be dissolved leaving unevenness.

The injection is painful and multiple injections are required to ensure that the area is treated effectively this can result in bruising and swelling, mild irritation may also be experienced which could result in a rash.

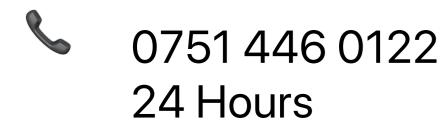
If a vascular occlusion occurs what is expected of me?

- Prior to treatment you have agreed to emergency treatment with Hylase there is no compromise here.
- You will remain in clinic until the practitioner agrees that it is safe for you to leave.
- You agree to engage with the practitioner which includes answering texts and calls.
- You will send photographs of the treatment area when requested.
- You will attend follow-up appointments as requested, this may not be at your local clinic.
- Aspirin will be administered orally and you may be asked to continue this for a couple of days.
- Dermal filler treatment to the affected area is not safe after Hylase, for a minimum of 3 months.

Photographs

- Should be taken in good light you should take photographs with and without flash
- Should be clear, blurred photographs will not be of any use

Contact Information



Clinic Locations

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Vascular OcclusionPatient Guide

What is a vascular occlusion?

Vascular occlusion is a very rare occurrence, this occurs when a filler is injected directly into the blood vessel or vascular compromise when the filler and/or swelling creates a compression of the vessel. Essentially the blood is unable supply the surrounding tissue.

What will happen if this is not treated?

Blood supply is essential for the tissue to live if untreated the skin will become necrotic (turn black and die) this cannot be reversed if it has gone too far.

How will I know if I have a vascular occlusion?

If the filler is injected into the blood vessel your practitioner will see blanching (skin turning white). You may not feel pain as most dermal filler contain local anaesthetic. This type of vascular occlusion has very obvious symptoms which will be observed by the practitioner immediately.

In this instance the practitioner will administer a medicine called Hylase (Hyaluronidase) this is an enzyme which dissolves Hyalauronic Acid.

Hyaluronidase is very fast acting, within 30 minutes of administration the practitioner will decide if a further treatment is required. Treatment will continue until blood supply is normalised, you can have a maximum of 4 treatments over a 2 hour period.