

# EMFACE®

## VOLUME & LIFT

Natural Facial  
Balancing Platform

EMFACE | Volume & Lift



# HOW DO WE AGE?

Skin

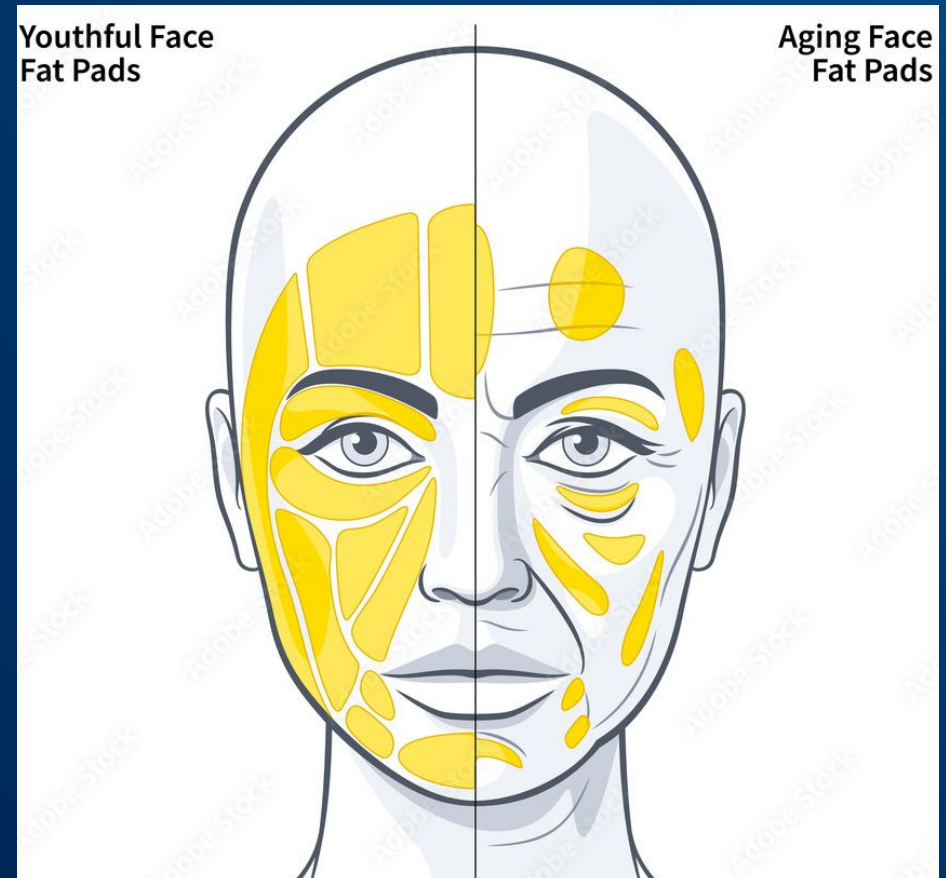
Loss of elasticity

Fat

Volume reduction

Muscles

Long regarded as unaging



# IS MUSCLE AGING **WHAT WE MISSED?**

Facial muscles believed not to age

**Dr. Cotofana study breakthrough in 2021**

## Understanding Facial Muscle Aging: A Surface Electromyography Study

Sebastian Cotofana <sup>1</sup>, Shirin Assemi-Kabir <sup>2</sup>, Samir Mardini <sup>3</sup>, Riccardo E Giunta <sup>2</sup>, Robert H Gotkin, Nicholas Moellhoff <sup>2</sup>, Luiz E T Avelar, Arnaldo Mercado-Perez <sup>1</sup>, Z Paul Lorenc <sup>4</sup>, Konstantin Frank <sup>1</sup>

Affiliations + expand

PMID: 33942051 DOI: 10.1093/asj/sjab202

**ELEVATOR MUSCLES DO AGE!**

**EMFACE** | Volume & Lift



# IMPORTANCE OF FACIAL ELEVATORS

Facial muscles are interconnected with fat, skin, and fascia across all facial layers

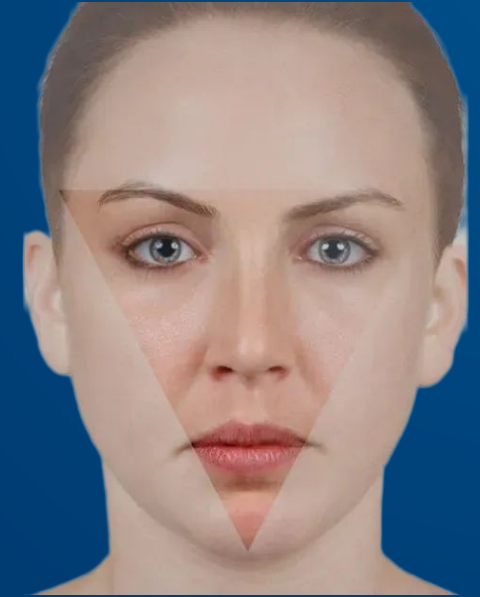
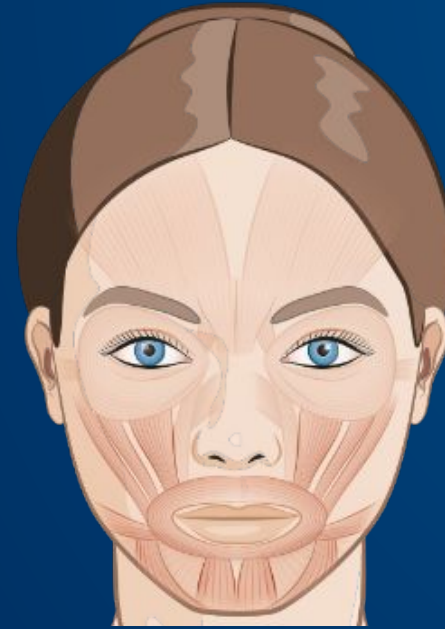
Only the elevator muscles age, giving the depressors the upper hand

Weak elevator muscles won't prevent gravity

Fat redistribution, facial structure drooping

From young pyramid to old triangle

**EMFACE** | Volume & Lift



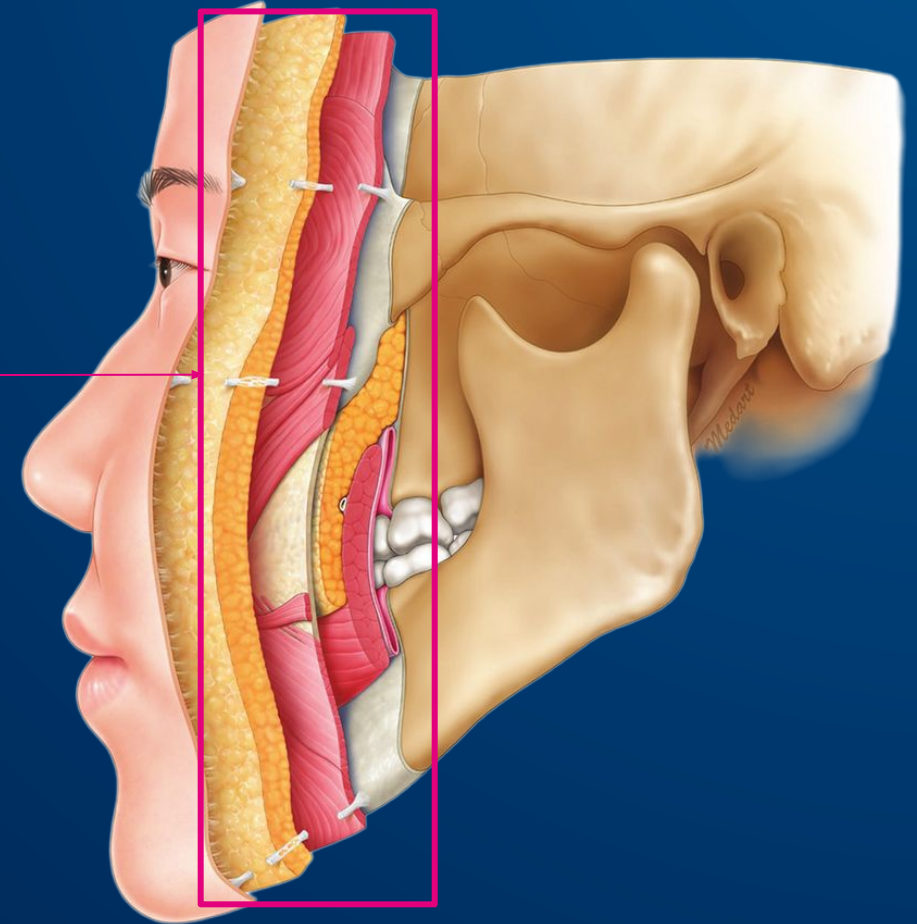
# MOST LAYERS DO NOT HAVE SOLUTION

Current solutions focus mainly on skin

Missing part in facial rejuvenation

We knew how to address depressors, but elevators were beyond our reach

Aging in deeper layers => **volume loss and sagging**



# People Want **VOLUME & LIFT**

**\$5B**

**FACIAL AESTHETIC  
MARKET**

**\$1.7B**

**FACIAL LIFTING  
DEVICE MARKET**

**\$3B**

**DERMAL FILLER  
MARKET**

## The Main Drivers Of Facial Market

# EMFACE<sup>®</sup>

## VOLUME & LIFT

### Natural Facial Balancing Solution

NON-INVASIVE

NEEDLE-FREE

HANDS-FREE

EMFACE | Volume & Lift



# UNLOCKING FULL POTENTIAL OF MULTIBILLION FACIAL MARKET **WITH JUST ONE DEVICE**

## 4 PROCEDURES



**Non-invasive brow lift**  
alternative to **#1 facial aesthetic surgery**



**Eyebags reduction** dealing with the **#1 most searched concern** in upper face



**Only non-invasive solution** to **improving the volume** without the needles



**Double chin reduction** - dealing with the problem that bothers **79% of people**

# 4 PROCEDURES FOR CORE FACIAL NEEDS

Covering the most important facial areas

Two technologies in each applicator



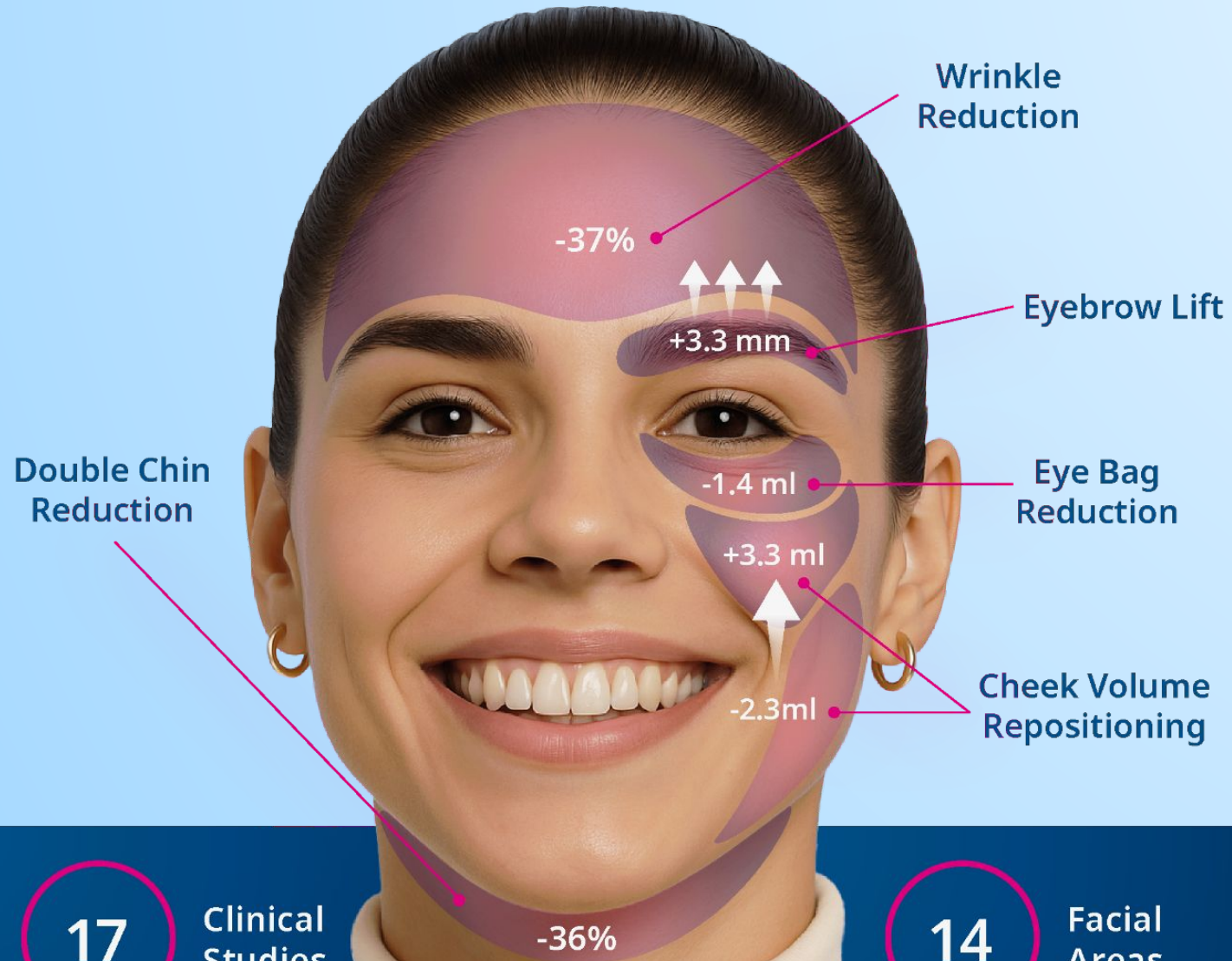
Each applicator is tailored to specific area needs



**EMFACE** | Volume & Lift



# CLINICALLY PROVEN RESULTS TAILORED TO EACH AREA



**17** Clinical Studies

**14** Facial Areas

**EMFACE** | Vo



\*On average (Data on file)

# Technology Behind Success

EMFACE



EMFACE®

HIFES®

# HIFES<sup>®</sup> TECHNOLOGY

High-intensity electric fields emitted simultaneously with **Synchronized RF**

Motor neuron depolarizes → signal propagates through nerve → muscle fiber contracts

Designed to stimulate only facial elevators

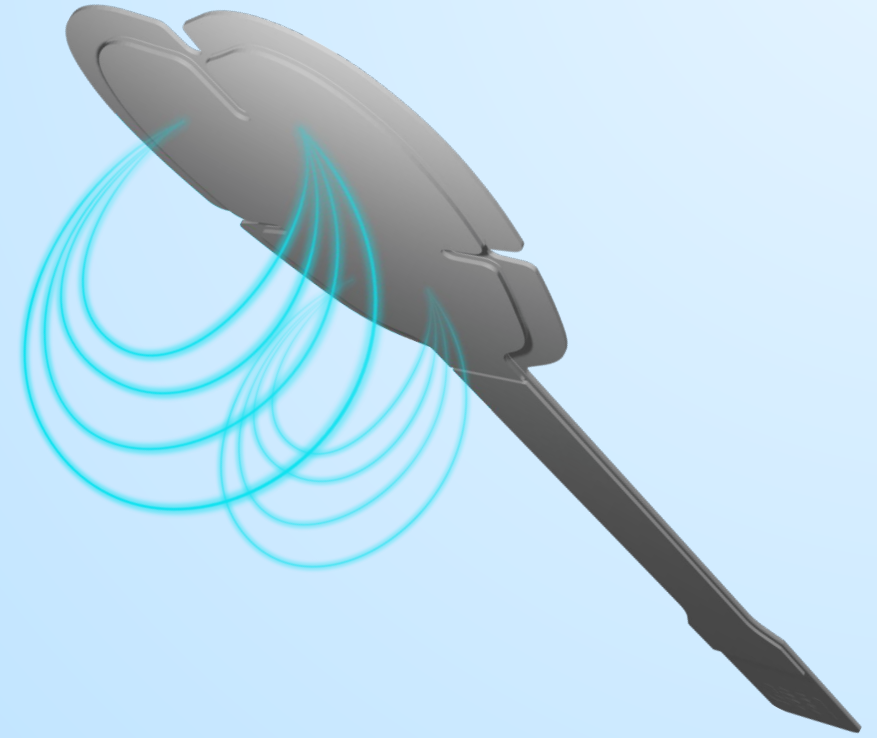
## Provides supramaximal contraction

Improves the condition of facial muscles

Increases resting muscle tone

Reverses muscle aging and improves skin support

**EMFACE** | Volume & Lift



EMFACE



EMFACE®

SYNCHRONIZED RF

# SYNCHRONIZED RF

Monopolar RF is emitted simultaneously with **HIFES**<sup>®</sup>

Active area across entire applicator = uniform heating

Dynamic impedance technology

## Homogeneous heating in targeted facial layers

Increases collagen and elastin fibers

Remodels & smooths skin

Improves overall skin texture

Does not reduce fat

**EMFACE** | Volume & Lift

40-42°C	DERMIS
40-42°C	FAT
39.5-40°C	MUSCLE



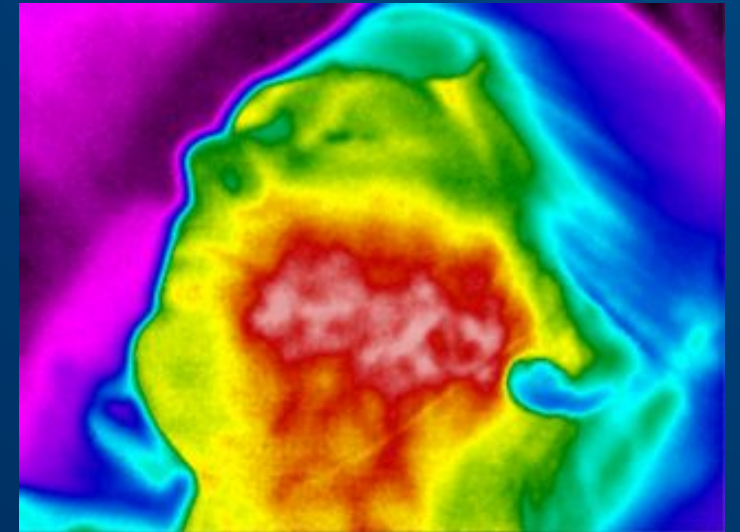
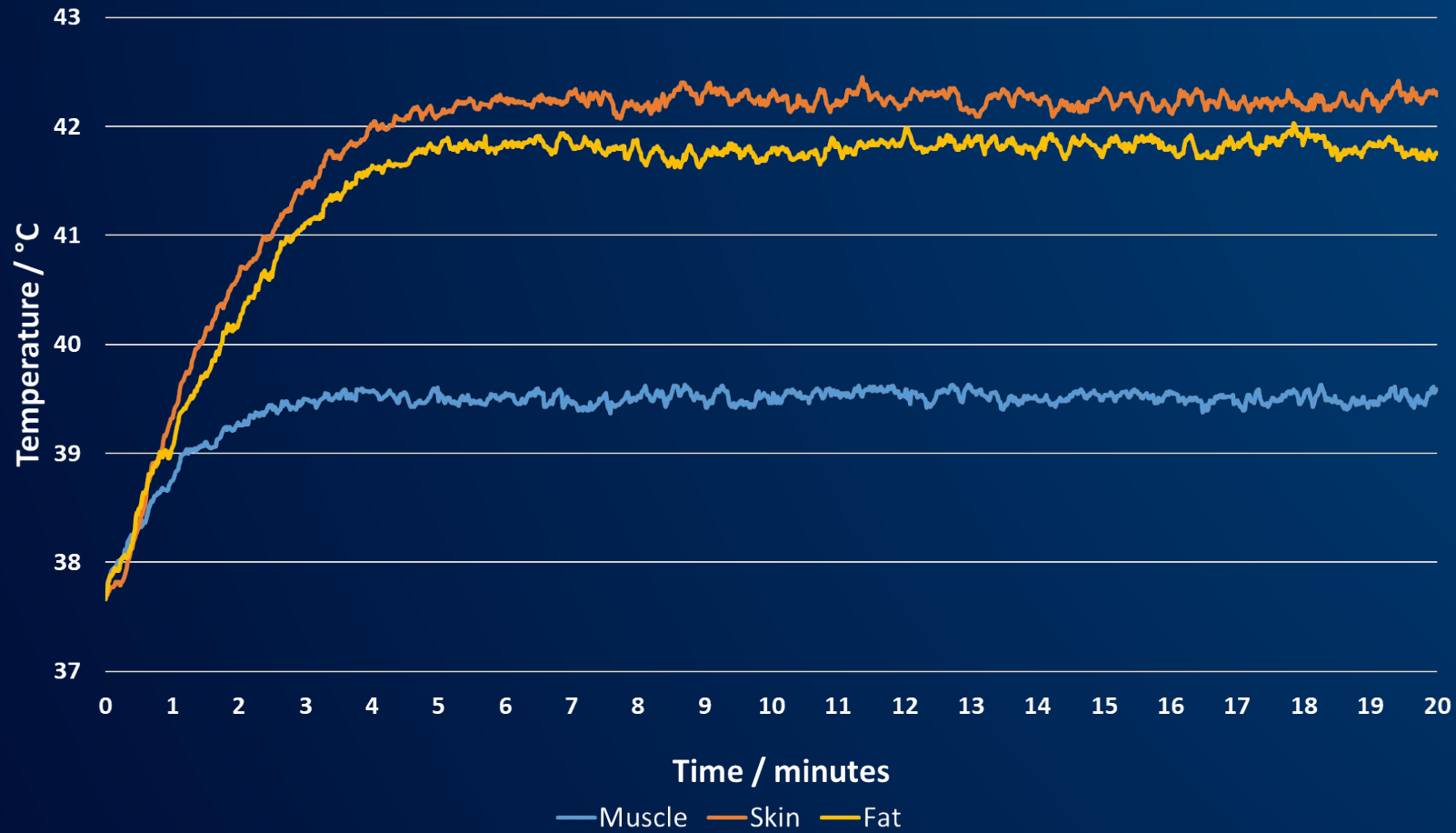
**-37%\***

Less Wrinkles

\*on average



# SYNCHRONIZED RF



EMFACE



# 4 Applicators For Core Facial Needs



# POWER OF TARGETING ONLY ELEVATORS

Selectively toning only the elevator muscles:

Frontalis muscle

Orbicularis oculi muscle

Zygomatic Major/Minor muscle, Risorius muscle

Digastric muscle

Repositioning **volume** while providing the **lifting** effect

Provides **tailored solutions** for aging in each specific area

**EMFACE** | Volume & Lift



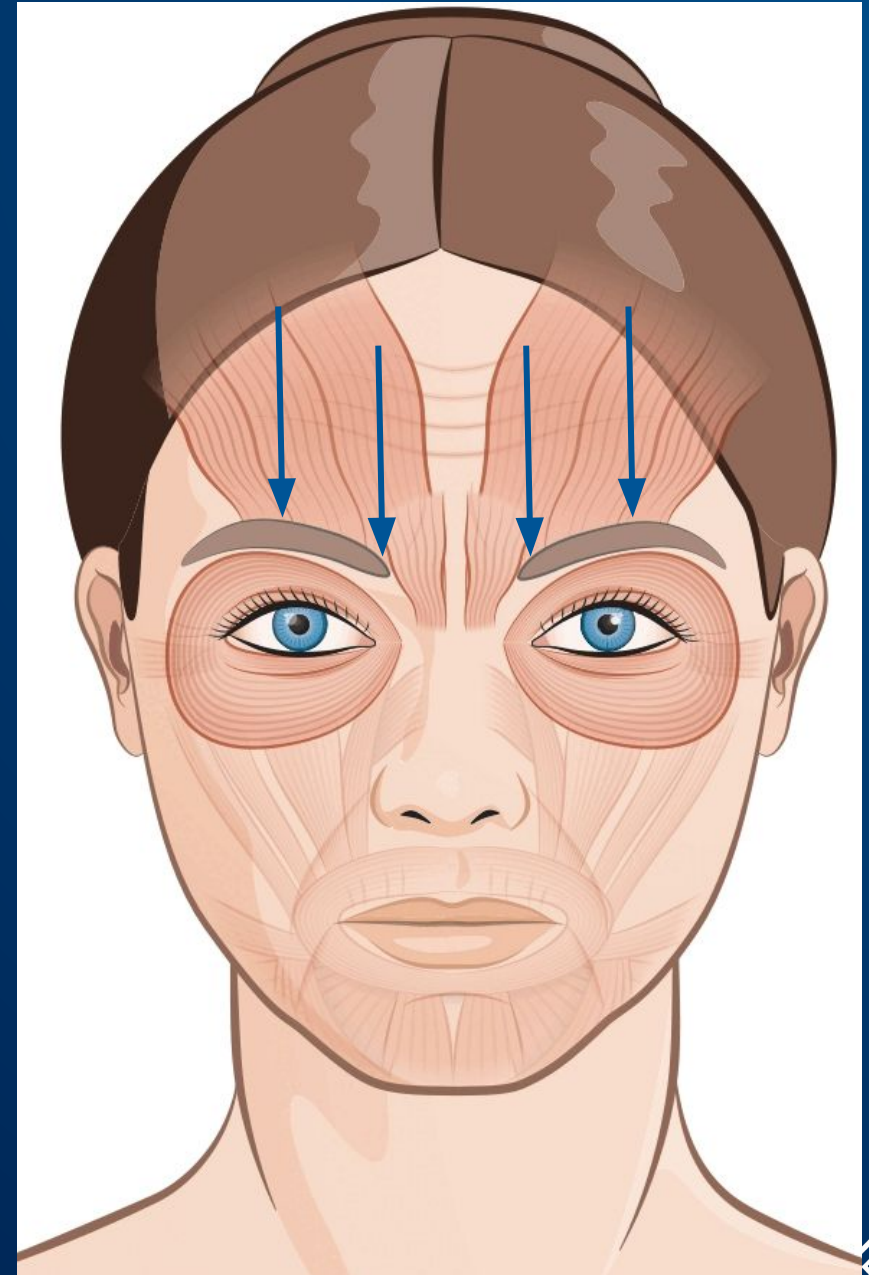
# Upperface Area

# FOREHEAD AGING

## Frontalis muscle losing its tone

Weak muscle needs to work more to hold eyebrows in position

Causing **brow ptosis** and **static wrinkles**



# CURRENT SOLUTIONS

## **Neuromodulators**

Only for dynamic wrinkles reduction

Long term using can lead to BROW PTOSIS

## **Surgery (Browlift)**

#1 facial aesthetic surgery

As every invasive procedure has high risk

Patients are interested in brow lifts, but non-invasive options are not yet available

**EMFACE** | Volume & Lift



# EMFACE FOREHEAD

First Forehead Lifting  
Without Needles

Elevates the Eyebrows  
and Reduces Wrinkles

**EMFACE** | Volume & Lift



# FOREHEAD APPLICATOR

Tones only the **Frontalis muscle**

Does not affect glabellar region

**Lifts** the eyebrow and **reduces the wrinkles**

-37%

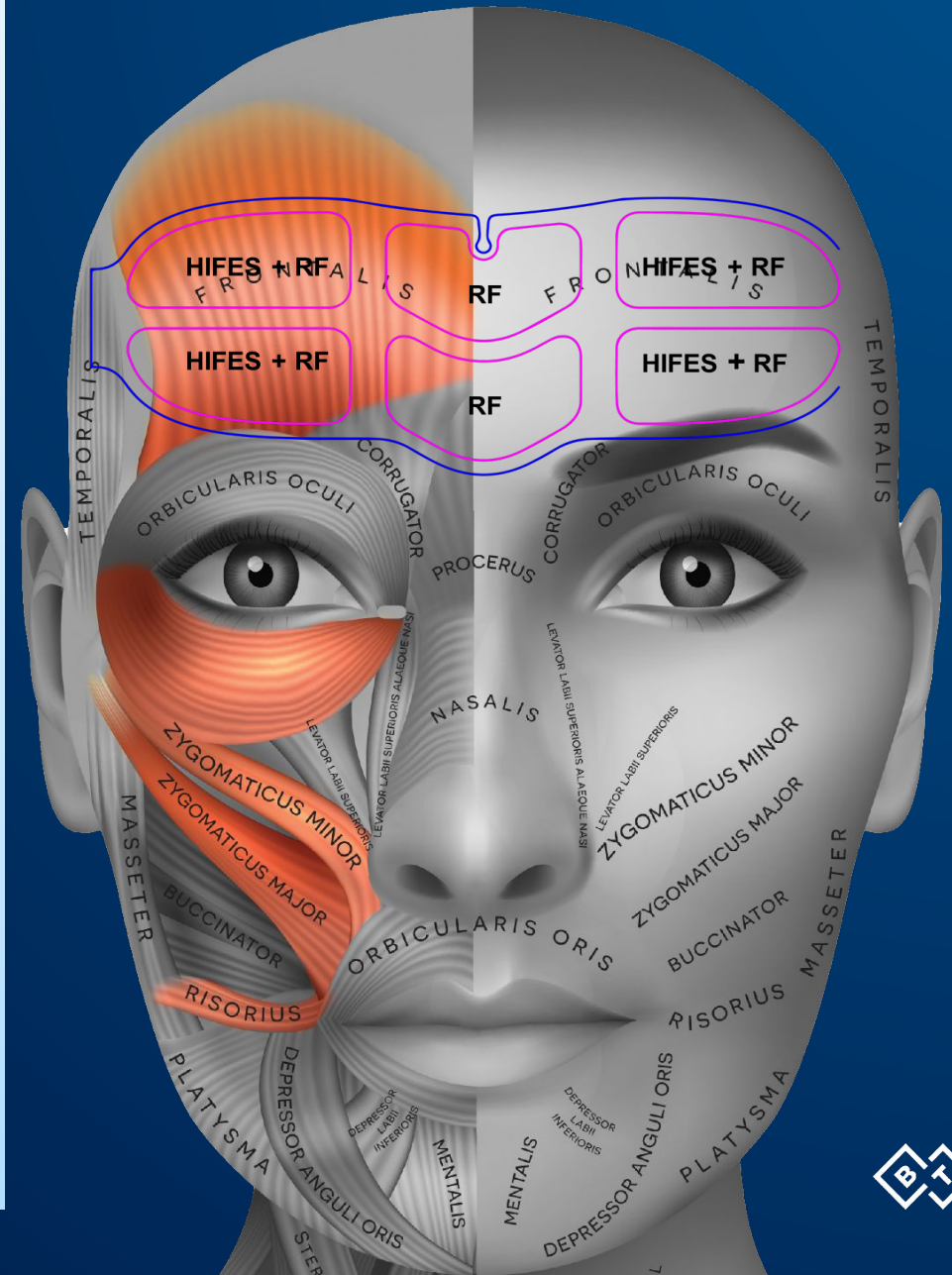
WRINKLE  
REDUCTION\*

+23%

LIFTING  
EFFECT\*

EMFACE | Volume & Lift

\*Data on file



BEFORE



AFTER EMFACE



AFTER 4<sup>TH</sup> TREATMENT, COURTESY OF: CHARLES BOYD, M.D.

BEFORE



AFTER **EMFACE**



3 MONTHS AFTER 4TH TREATMENT, COURTESY OF: YAEL HALAAS, M.D.

# Periorbital Area

# PERIORBITAL AGING

## Skin loses thickness

Wrinkles appear

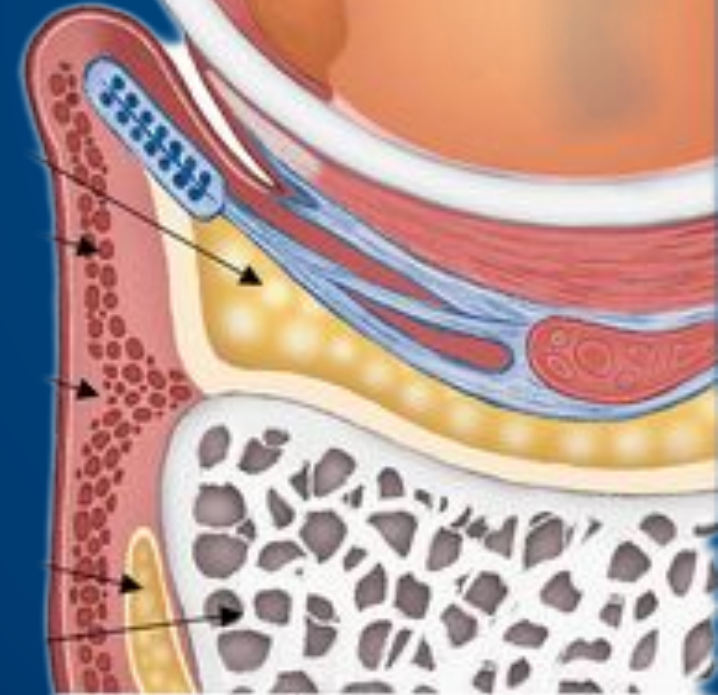
Vasculature shines through - Dark circles

## The Lower part of the orbicularis oculi muscle weakens

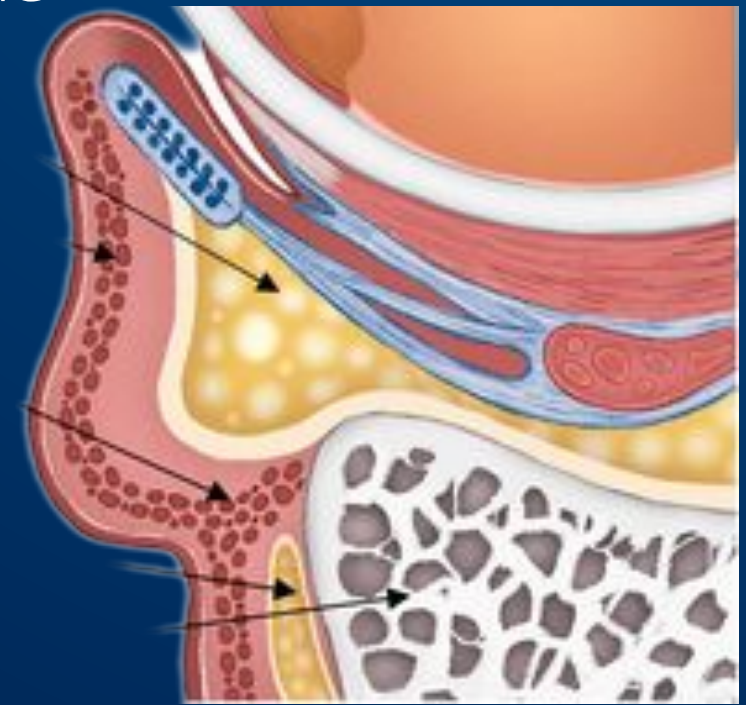
Fat protrudes - Eyebags

Insufficient lymphatic drainage - Puffy eyes

**EMFACE** | Volume & Lift



YOUNG



OLD

# CURRENT SOLUTIONS

The periorbital area segment within the aesthetic and cosmetic **market is reaching multi-billion dollars**

Yet there is **no solution** that would **treat all** core problems of the **area safely without downtime:**

**Surgery** - Invasive, higher risk, longer downtime

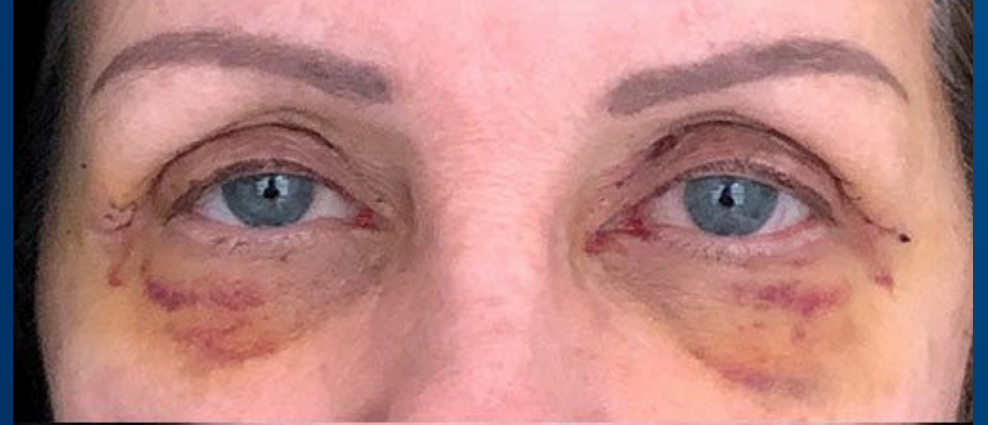
**Neuromodulator** - Can create the eyebags

**Dermal fillers** - High risk area

**Aggressive RF/Lasers** - Does not affect the muscle

**EMFACE** | Volume & Lift

Lower Blepharoplasty downtime



Tyndall effect (blueish color) after fillers



# EMFACE EYES

Brighter Eyes  
Better Looks

The First to Target the Root Causes of  
Periorbital Aging

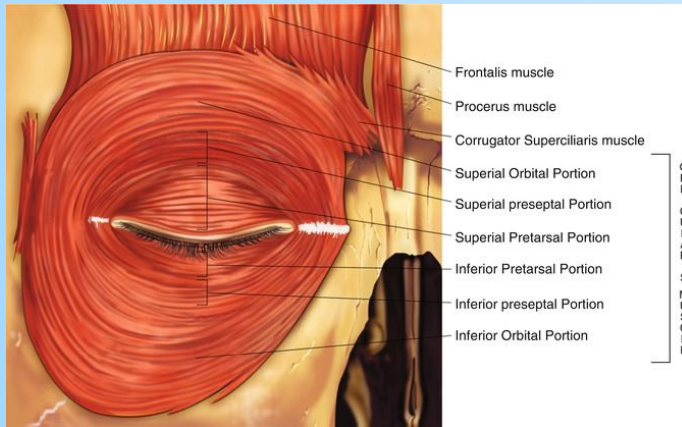
| EYEBAGS | DARK CIRCLES | CROW'S FEET

**EMFACE** | Volume & Lift



# EMFACE EYE APPLICATOR

Tones only lower part of **orbicularis oculi**

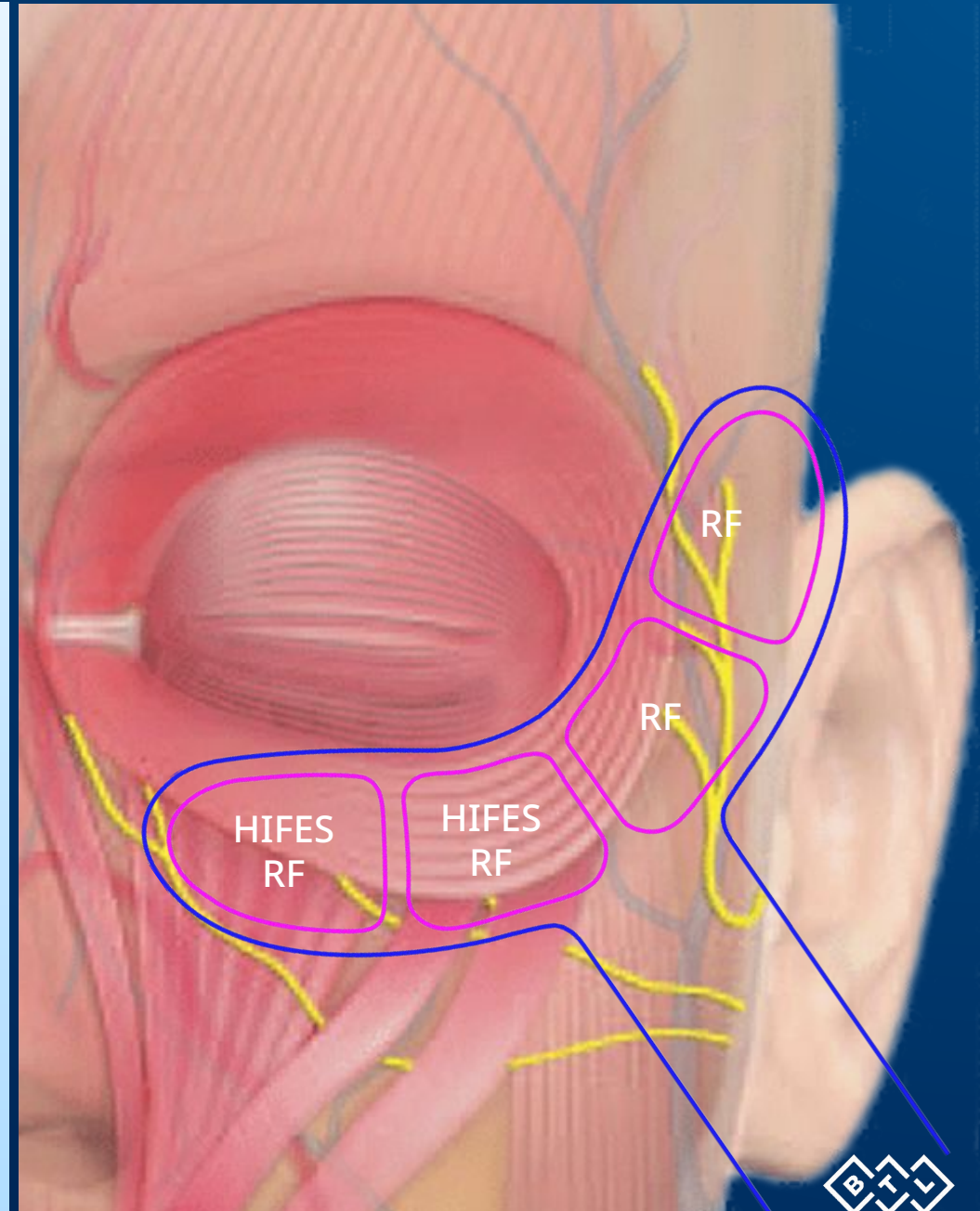


Avoiding upper portion - depression of eyebrows

Avoiding pretarsal portion - risk of Ectropion

SyncRF heating remodels skin in whole periorbital area

**EMFACE** | Volume & Lift



## EYEBAGS REDUCTION

Toned muscle reduces fat protrusion

= Eye Bag reduction

Better muscle condition - > Lymphatic drainage

= Puffy eyes reduction

## WRINKLE AND DARK CIRCLES REDUCTION



Remodels and smooths skin

= Wrinkle reduction

Increasing skin thickness =  
Dark circle reduction

**EMFACE** | Volume & Lift



BEFORE



AFTER 4<sup>TH</sup> TREATMENT, COURTESY OF: BTL

AFTER EMFACE\*



\*EMFACE EYES

**EMFACE** | Volume & Lift



BEFORE



AFTER 4<sup>TH</sup> TREATMENT, COURTESY OF: BTL

AFTER EMFACE\*



\*EMFACE EYES

**EMFACE** | Volume & Lift



# Midfacial Area

# CHEEK AGING

Aging reduces facial fat and bone structure

*Zygomaticus major and minor losing their tone*

Unable to compensate the fat and bone changes

*Volume is reduced and shifts downwards*

Creation of jowls and upper cheek hollowness

**EMFACE** | Volume & Lift



# LACK OF CURRENT SOLUTIONS

## No way to address the elevators muscles

Only slight results with depressors inhibition

Without treating elevators first - volume is unfavorable position

Volume needed to compensate aging is greater

Can lead to **overfill syndrome**

**EMFACE** | Volume & Lift



# EMFACE CHEEKS

Only Non-Invasive Way To  
Reposition Facial Volume

Increases the Volume Back in  
Upper Cheeks While Reducing Jowls

**EMFACE** | Volume & Lift

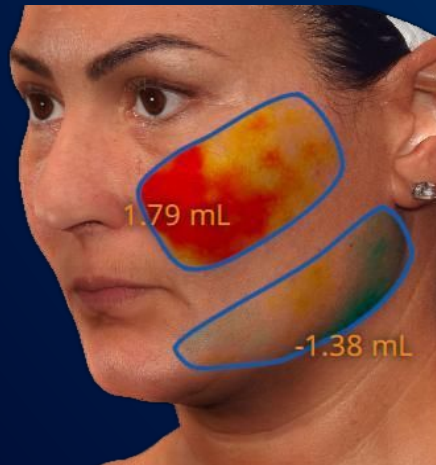


# CHEEK APPLICATOR

Tones Zygomatic major/minor, Risorius

Improves skin texture

Repositions facial volume back from jowls to cheeks



+3.3 mL

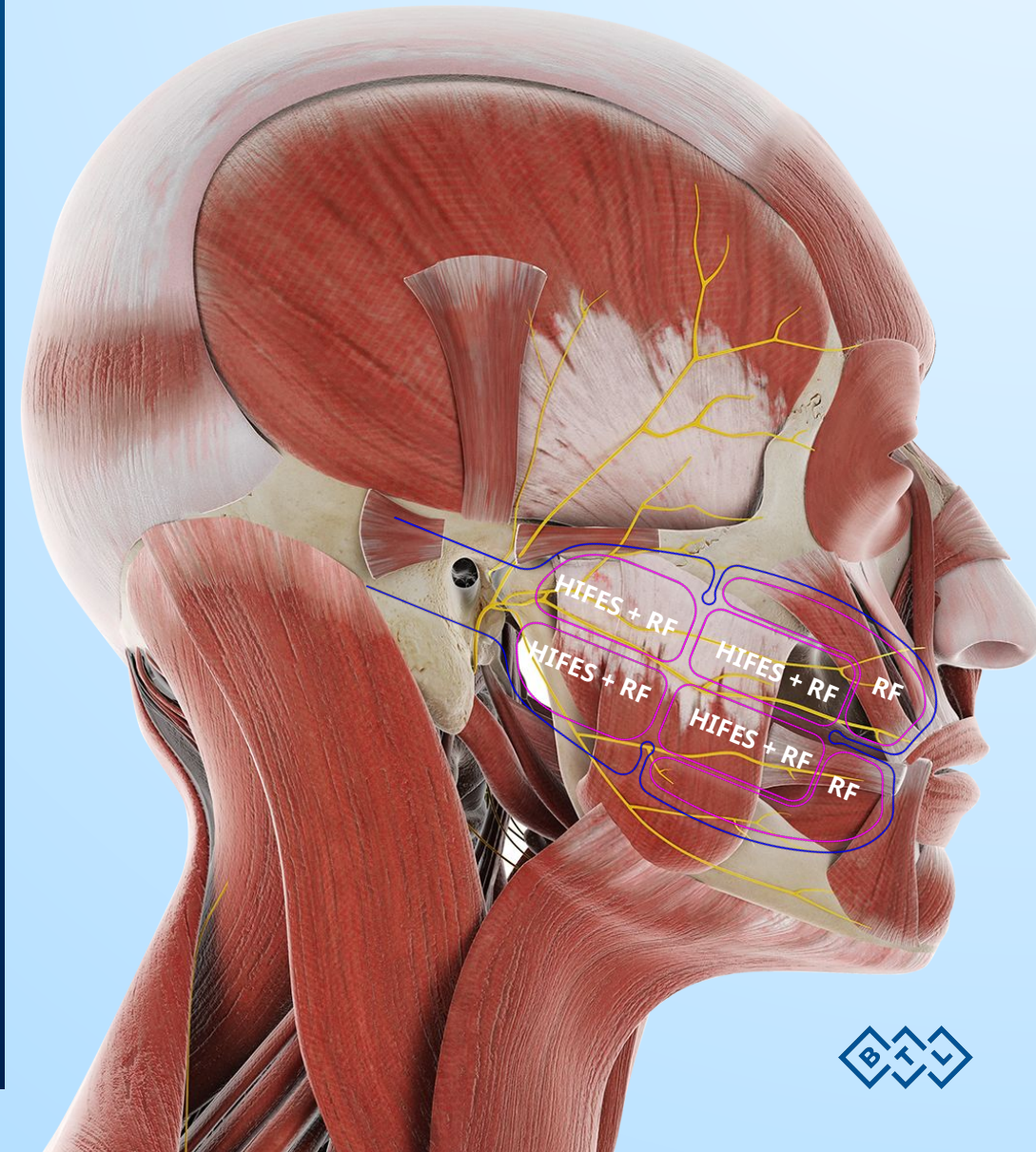
VOLUME  
IMPROVEMENT IN  
UPPER CHEEKS\*

-2.3 mL

VOLUME REDUCTION  
IN LOWER FACE  
(JOWLS)\*

**EMFACE** | Volume & Lift

\*Data on file



BEFORE



AFTER **EMFACE**



1 MONTH AFTER 4<sup>TH</sup> TREATMENT, COURTESY OF: JOEL COHEN, M.D.



BEFORE



AFTER **EMFACE**



3 MONTHS AFTER 4<sup>TH</sup> TREATMENT, COURTESY OF: RICHARD GENTILE, M.D.

# Submental Area

# DOUBLE-CHIN FORMATION

Fat accumulates

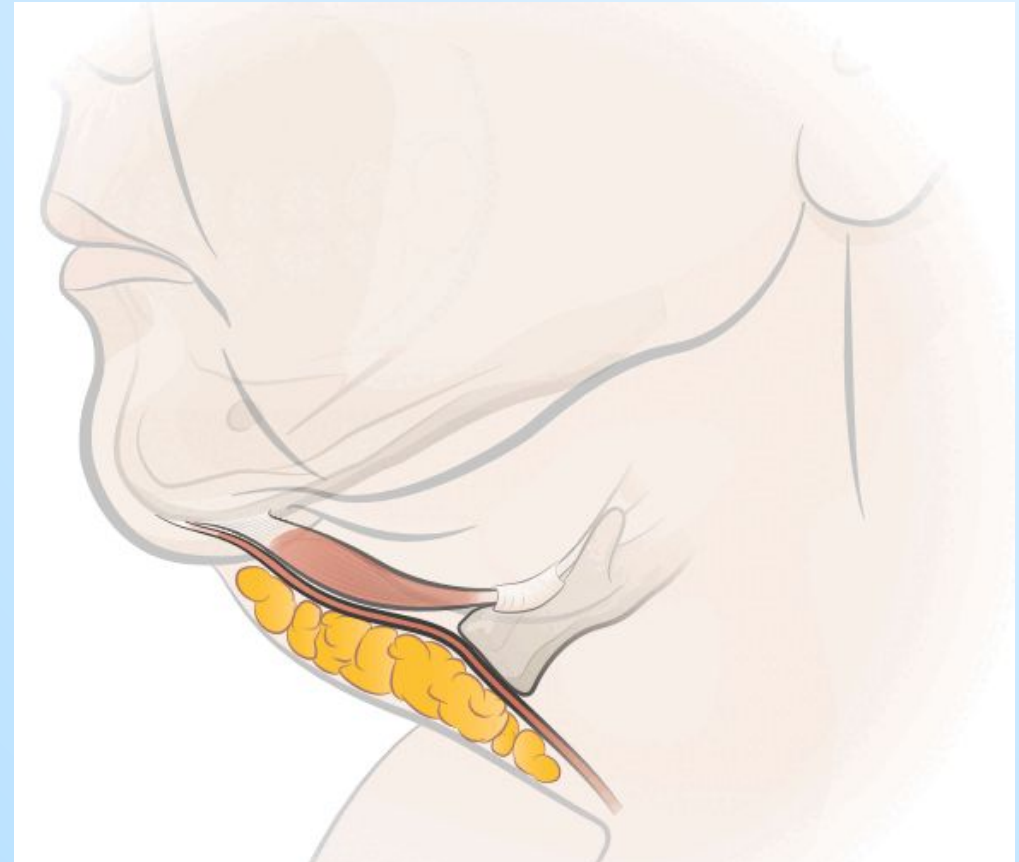
Skin becomes lax

Digastric muscle weakens = Pseudo double chin

**79%**

POPULATION  
IS CONCERNED ABOUT  
DOUBLE CHIN\*

**EMFACE** | Volume & Lift



# LIMITATIONS OF CURRENT SOLUTIONS

Target only fat or skin - **Nothing addresses muscle**

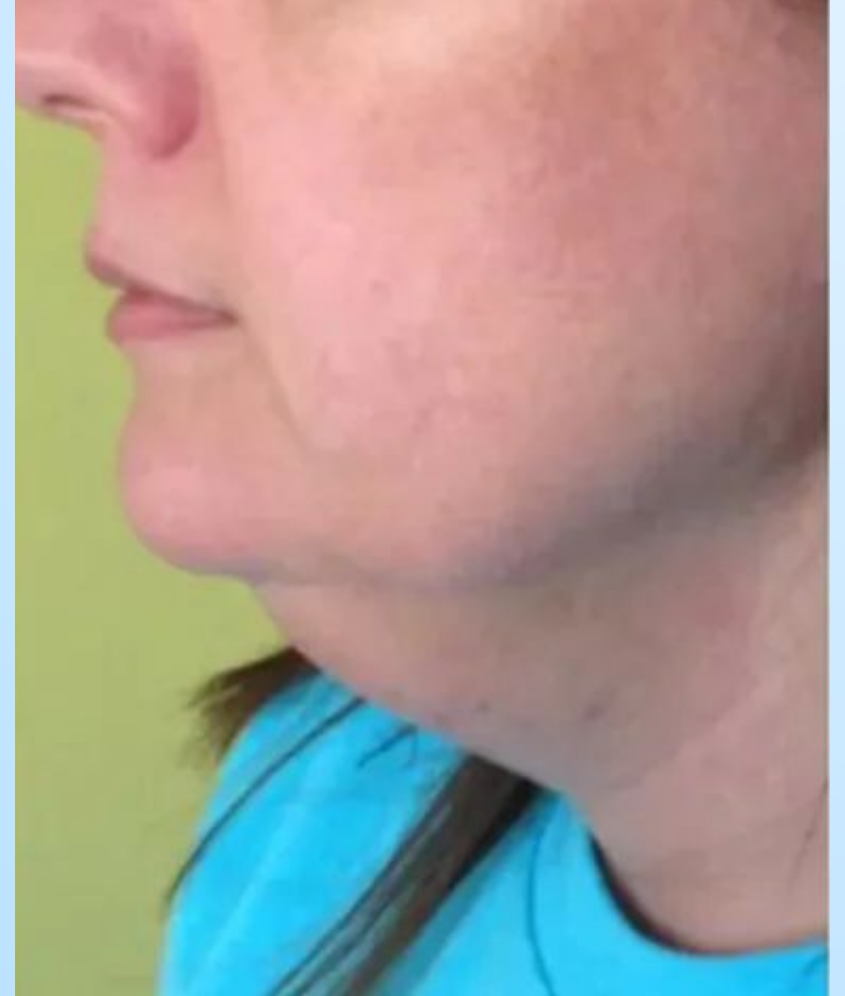
Come with unpleasant downtime:

Bruising

Sweling

Pain

**EMFACE** | Volume & Lift



# EMFACE SUBMENTUM

Reduce Your Double Chin

Non-Invasive Solution to Target  
Every Layer From Muscle to Skin

| NO NEEDLES

| NO BRUISING

**EMFACE** | Volume & Lift



# SUBMENTUM APPLICATOR

Tones only the digastric muscle

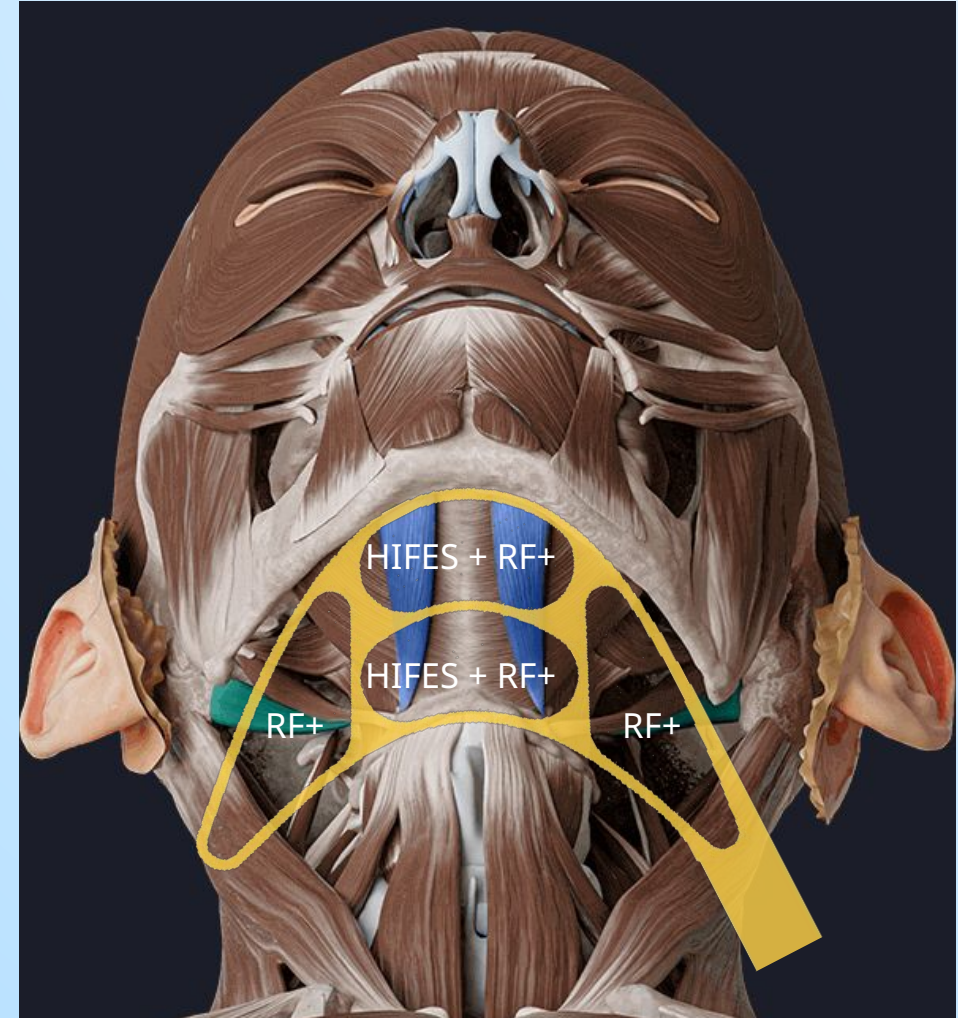
SyncRF+ targets deeper structures

Uniform heating across the entire applicator area

Lifts the submental area = Pseudo double chin reduction

Reducing digastric muscle protrusion

EMFACE | Volume & Lift



SYNCHRONIZED **RF+**

vs.

SYNCHRONIZED **RF**

### **Fat disruption and skin rejuvenation**

- Higher power
- Skin remodelling temperature
- Heating fat tissue to apoptotic levels

### **Skin rejuvenation**

- Lower power
- Skin remodelling temperature
- No fat reduction

# IT IS ALL ABOUT ANGLE

Lifts the submental area

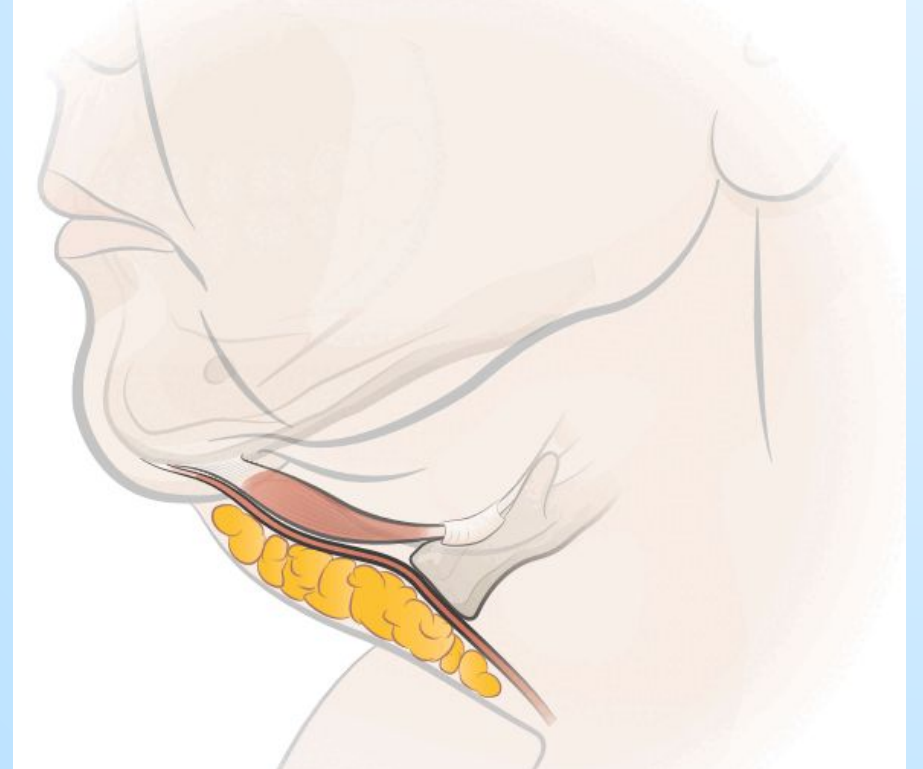
Reduces fat

Reduces skin laxity

-36%

DOUBLE CHIN  
REDUCTION\*

**EMFACE** | Volume & Lift



BEFORE



AFTER EMFACE



AFTER 4<sup>TH</sup> TREATMENT, COURTESY OF: CAROLYN JACOB, M.D.

BEFORE



AFTER EMFACE



AFTER 4<sup>TH</sup> TREATMENT, COURTESY OF: BARRY DIBERNARDO, M.D.

BEFORE



AFTER EMFACE\*



1 MONTH AFTER 4<sup>TH</sup> TREATMENT, COURTESY OF: JENNIFER LEVINE, MD.

\*EMFACE CHEEK & SUBMENTUM



EMFACE



EMFACE®

COMBINE TO **PROMOTE FULL-FACE CHANGES**



EMFACE Lift



# IDEAL FOR INJECTABLE COMBINATION

**EMFACE** has no negative effect on neuromodulators

**“Turning on” the midfacial elevators** unreachable by neuromodulators

**Keeping the frontalis muscle fit** to prevent neuromodulator-induced brow ptosis

**Reduces needed amounts of dermal fillers**

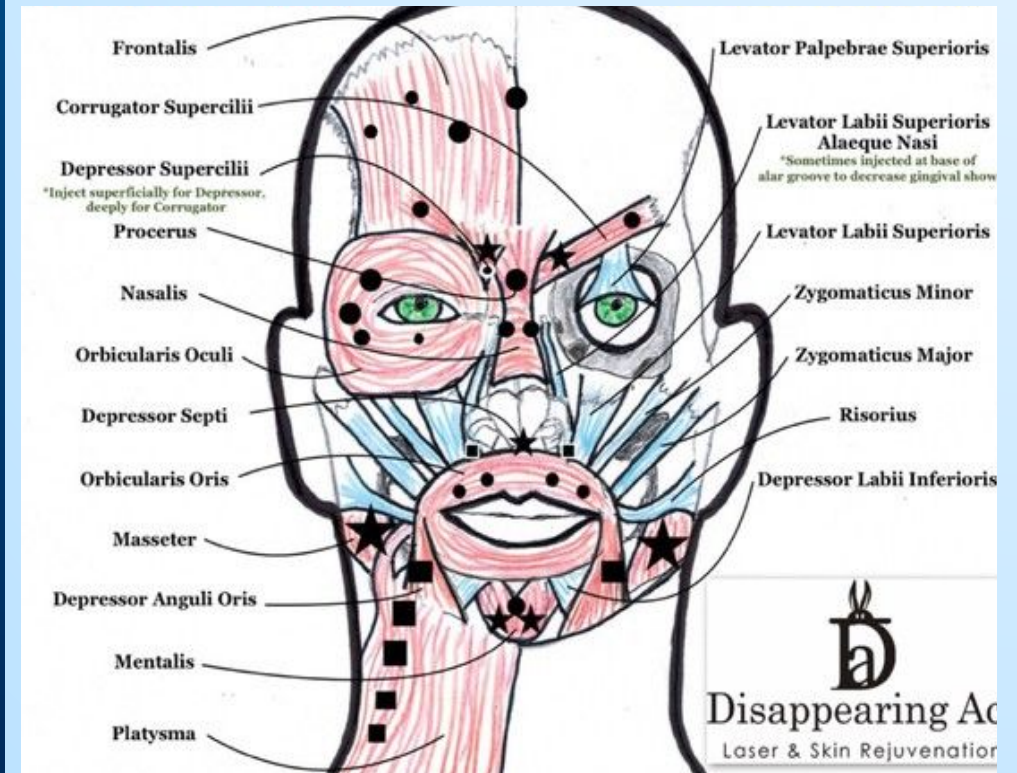
Enhanced and natural results

Avoids overfilling and resistance build-up

**EMFACE** | Volume & Lift

**NEUROMODULATOR**

**EMFACE**



BEFORE



AFTER **EMFACE\*** & HA FILLER



1 MONTH AFTER THE LAST TREATMENT, COURTESY OF: MELANIE PALM, M.D.

\*EMFACE CHEEK & SUBMENTUM

BEFORE



AFTER **EMFACE** & NEUROMODULATOR



1 MONTH AFTER 4TH TREATMENT, COURTESY OF: ANNE CHAPAS, M.D.

\*EMFACE CHEEK



# FOLLOW THE INDUSTRY LEADERS



EMFACE



EMFACE®

THANK YOU