



INTENSIVE
BIOSTIMULATION

50 mg.

of high molecular weight
hyaluronic acid and

195 mg. amino acids

per syringe

WHAT IS IT?

IT IS A SANITARY PRODUCT WITH CE CERTIFICATE CLASS III IN THE FORM OF STERILE GEL INTENDED FOR INTRADERMAL INJECTIONS.

Revok50 combines stabilized hyaluronic acid with a uniform 2,200 kDa double chain length and amino acids (L-proline, L-hydroxyproline, glycine, and L-lysine HCl). **Revok50** is an optimal formulation for the fibroblastic stimulation of collagen formation and maintenance of the extracellular matrix.

WHAT IS IT FOR?

ITS COMPOSITION PROMOTES THE STIMULATION AND REPAIR OF THE CONNECTIVE SKIN TISSUE, PRODUCING AN ANTI-AGING EFFECT, THUS REVERSING TROPHIC ALTERATIONS OF THE SKIN (WRINKLES, SCARS, STRIKES ETC.)

The synergism of high molecular weight hyaluronic acid and **REVOK50** amino acid precursors promote the restoration of skin elasticity and firmness.

COMPOSITION

Revok50 contains 50 mg. of hyaluronic acid in each 2ml syringe. and 195 mg. amino acids.

Concentration 2.5 times higher than other products on the market.

Revitalization
Rehydration
Regeneration
Remodeling



Revok50

**Integral intense
biostimulation.**



WHY CHOOSE Revok50?

BECAUSE stabilizes the electrolyte balance of the extracellular matrix with optimization of the biochemical reactions that take place in it.

BECAUSE delays cell apoptosis and tissue aging.

BECAUSE exerts an anti-inflammatory and repairing action on connective tissue.

BECAUSE it has a lower susceptibility to endogenous hyaluronidase thanks to its high molecular weight, resulting in a longer duration of treatment effects.

HYALURONIC ACID AND OUR SKIN

Hyaluronic acid native to the skin is mainly made up of chains similar to those in Revok50's composition.

Non-cross-linked hyaluronic acid rapidly undergoes enzymatic degradation and breaks down into larger chains.

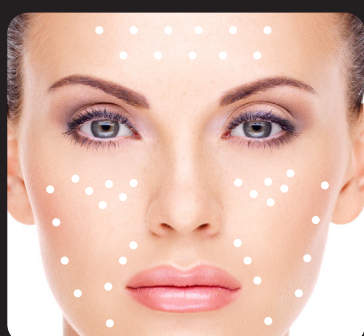
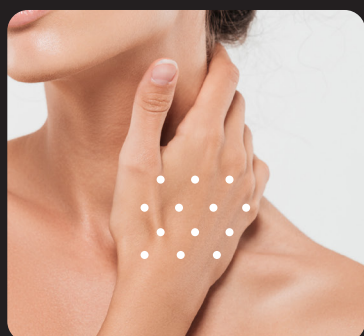
In Revok50, this process is much slower thanks to the use of 2,200 kDa hyaluronic acid chains, which in an electrochemical process produce hydrogen bonds that stabilize the structure (ionic bonds between chains).

THERAPEUTIC USES

MESOTHERAPY (face, neck, cleavage, arms and hands)

Injection protocol

- Superficial-middle dermis injection
- Needle 30G 4 mm
- Multi-function technique. Angle $<15^\circ$:
 - * Papule (recommended separation between papule 5-10 mm.)
 - * Linear threading
- Injection volume 0.01-0.02 ml. per point.
- Treatment interval: one monthly session for three months (three sessions).
- Compatible with mesotherapy gun.



DOUBLE CROWN LIFT



OUTER CROWN

- 1- UPPER FRONT
- 2- TEMPORARY CREST
- 3- TEMPORARY ZYGOMATIC APOPHYSIS
- 4- MANDIBULAR ANGLE
- 5- PREMANDIBULAR GROOVE

INNER CROWN

- 1- LATERO-MEDIAL SUPRACILIARY ZONE
- 2- TEMPORARY FOSSA
- 3- ZYGOMATIC PROTUBERANCE
- 4- SUBZYGOMATIC SPACE
- 5- LOWER LABIAL COMISSURE

DCL TECHNICAL PROTOCOL DCL

DOUBLE CROWN LIFT

TECHNIQUE DEVELOPED BY THR MEDICAL
PRODUCTS BY DR. J.R. VÁZQUEZ.

TECHNIQUE BASED ON
ANCHORING SURFACE
FACIAL RETENTION
LIGAMENTS AND SKIN
TENSION LINES

Injection protocol:

- Deep dermis injection
- 30G needle (4-6 mm.) or 27 / 25G cannula
- Point by point papule technique.
- Injection angle > 45°
- Injection volume 0.1 ml. per point (a 2 ml syringe per session).
- Treatment interval: one session per month for 3 months (three sessions).
- A 2 ml. **Revok50** syringe is used in each session.

**Concentration 2.5
times higher than other
existing products on
the market.**

INDICATIONS

SKIN DEHYDRATION

REPAIR OF INJURIES BY
ENVIRONMENTAL AGENTS:
UV RADIATIONS,
POLLUTION AND OTHER AGENTS
CONTAMINANTS

FINE AND MEDIUM WRINKLES

CONNECTIVE TISSUE INJURIES
(STRIPES, SCARS AND OTHERS
DYSTROPHIES)

SYNERGISM WITH OTHERS
AESTHETIC TREATMENTS
(FILLERS, LASER, ETC)

CONTRAINDICATIONS AND POSSIBLE SIDE EFFECTS

This treatment is not indicated for patients with hypersensitivity to any of the components or a tendency to hypertrophic scar formation. It is also not indicated for autoimmune patients, pregnant or lactating women, under 18 years of age and patients undergoing anticoagulant treatments. For example redness, swelling or erythema, which may be associated with itching and pain when pressing on the injection site. These reactions usually disappear within minutes, but can persist for a week after the procedure. Hardening or small nodules at the injection site, especially if the injection is too shallow. Discoloration at the injection site. If Revok50 is NOT injected correctly the expected result will not be achieved.

Revok50

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