There’s no disputing the fact that award-winning actress Jane Seymour has plenty of star appeal. Whether she’s on set or walking down a Hollywood red carpet, she exudes confidence and looks radiant. How does the 67-year-old dynamo do it?

For her, it starts with taking good care of her skin. “As I’ve aged, I’ve needed to protect my skin from the damage I did when I was younger, like sun worshiping with reflector boards,” she says. “I tend not to need expensive facials if I am consistent with my day and night regimen.”

Seymour’s time in front of the camera has also taught her a few tricks of the trade, like the importance of removing makeup and preventing skin damage. She has learned to remove her eye makeup gently with a cotton swab dipped in diluted baby shampoo.

Being in the spotlight comes with expectations for stars like Seymour. “There is definitely pressure to look your best in Hollywood especially with high definition, in which all flaws are clearly seen,” she says.

To keep her body looking great for those sleeveless gowns, she applies her favourite product, Crepe Erase, liberally. “It keeps my skin crepe-free, smooth, and youthful looking,” she says. Clearly, Seymour is always ready for her close up!

Michele Sponagle

SAFETY ALWAYS COMES FIRST, ESPECIALLY WITH AESTHETIC MEDICINE

Dr. Renier van Aardt
MB,ChB,CCFP
Medical Director & President of CAAM

Canadians take medical safety very seriously. We believe in regulation and oversight to ensure that all medical procedures are as safe as possible. However, when it comes to aesthetic medicine, a lack of regulation is presenting a series of dangers Canadians aren’t used to facing, especially in the non-invasive treatment field where procedures often focus on enhancing the quality of skin on the face and neck.

Aesthetic medicine uses distinctly medical technologies and involves procedures like using injections to smooth wrinkles as well as using lasers to rejuvenate skin and treat scarring. And yet, there are an unsettling number of fly-by-night operations that prioritize quick profits over professionalism. “The concern for us is that non-medically licensed individuals, such as aestheticians or laypeople, are doing these things out of their homes and basements or flying under the radar in storefronts,” says Dr. Renier van Aardt, President of the Canadian Association of Aesthetic Medicine (CAAM). “They’re often using products that are not Health Canada approved and, because they’re not licensed, there is no regulatory body monitoring them.”

Safety is paramount

The procedures are very safe when done properly, but in untrained hands, injectables and laser treatments can have disastrous results. The price of safety in this case is vigilance. “Watch out for red flags,” says Dr. van Aardt. “If the price is suspiciously low, you should really be worried about it. If they only take cash for payment, that should concern you. If it’s in someone’s living room or basement — big red flag. These procedures should be performed in a proper medical setting.”

Fortunately, good training and certification for aesthetic medicine exist in Canada. The key is to remain aware and to always ensure that your practitioner is licensed. Ask your physician if they are a member of the Canadian Association of Aesthetic Medicine, or board certified in Dermatology or Plastic Surgery.

D.F. McCourt
GET A BOOST OF CONFIDENCE WITH UNIVERSKIN
CUSTOMIZED SKINCARE

Most people have combination skin — a dry patch here, a wrinkle there, some redness. But most products are designed for a single skin type or specific issue. Revolutionary cosmeceuticals create custom skincare blends using medical-grade ingredients to achieve the ultimate goal: luminous skin, no matter what type.

After an initial consultation with patients, Oakville dermatologist Dr. Sheetal Sapra creates an individualized blend from Universkin, which offers 19 pharmaceutical-grade active ingredients in 57 possible concentrations to create up to 1,159 unique formulations.

Mediaplanet How do you use Universkin?
Dr. Sheetal Sapra Universkin allows me to create a tailored product based on what I see when I examine a patient’s skin. I use it for anti-aging because it lets me combine Vitamin A and Vitamin C with products that produce collagen. I combine an “active” like azelaic acid or kojic acid for the treatment of rosacea or hyperpigmentation. For dryness, I can add aloe. For acne, I can add salicylic or zinc sulfate. I add up to three ingredients to a neutral base to create a serum that people can use all over or just to spot-treat.

MP Why is personalized skincare superior?
DSS It addresses skin issues like no other product on the market because it gives me the versatility to combine ingredients to treat some of the most common skin concerns. We take pharmaceutical-grade ingredients and use them as cosmeceuticals to repair, treat and prevent.

MP What are some issues you treat with Universkin?
DSS Whether it’s a medical problem for anti-aging or to reduce wrinkles, I can take whatever you’re using for skincare and add Universkin to give you a beautiful glow to your skin.

Zoe Davey

Dr. Sheetal Sapra
Director of Dermatology at ICLS Dermatology & Plastic Surgery

To get more information and see clinical before and after photos visit Universkin.ca.

Dr. Sheetal Sapra’s ANALYSIS

Improving Melasma
A 33-year-old patient came in with severe melasma. Nothing was working. We tried the standard routine of sunscreen and hydroquinone, a bleaching agent and her skin improved a bit. But when we created her Universkin formula with kojic acid, arbutin, and niacinamide to address the pigmentation, her skin improved by 70 percent over three months. She was so happy with the results.

Tackling Acne
A 16-year-old patient with acne refused to go on oral medication. She tried everything on the market for acne, from benzoyl peroxide to topical antibiotics. I created her Universkin formula with salicylic acid, zinc sulfate, and some azelaic acid and eight weeks later her skin had improved by 60 percent. It’s pretty remarkable when we can achieve these results with skincare alone.

Zoe Davey

IN 2018, 7,200 CANADIANS WILL BE DIAGNOSED WITH MALIGNANT MELANOMA AND 1,250 CANADIANS WILL DIE FROM THIS DEADLY DISEASE. EXPOSURE TO ULTRAVIOLET RADIATION, FROM THE SUN OR FROM TANNING BEDS, IS THE NUMBER ONE CAUSE OF RISING MELANOMA RATES IN CANADA.

Occasional use of tanning beds before the age of 35 can increase your risk of developing melanoma by 75 percent. Fortunately, prevention is the best way to avoid a diagnosis of malignant melanoma.

“Dermatology nurses play a critical role in the skin cancer journey and serve as a great resource for patients as they battle this deadly disease,” says Lynne Vear, RN and President of the Canadian Dermatology Nurses Association. “In addition to providing support to patients, dermatology nurses devote a tremendous amount of time to educating Canadians about the dangers of sun exposure by providing patient education, instructions on skin self-examination, and sun safety education.” And remember, no tan is a safe tan.

Lynne Vear
Sandra Walsh
Lori Baldwin

To get more information and see clinical before and after photos visit Universkin.ca.

Tanners Beware:
Melanoma is on the Rise

The statistics are startling.
In 2018, 7,200 Canadians will be diagnosed with malignant melanoma and 1,250 Canadians will die from this deadly disease. Exposure to ultraviolet radiation, from the sun or from tanning beds, is the number one cause of rising melanoma rates in Canada.

Occasional use of tanning beds before the age of 35 can increase your risk of developing melanoma by 75 percent. Fortunately, prevention is the best way to avoid a diagnosis of malignant melanoma.

Seek shade
Avoid direct sunlight between 10 a.m. and 4 p.m.

Cover up
Wear a hat and sunglasses in the summer. Apply sunscreen everyday even when it’s cloudy.

Stay protected
Wear sunscreen every day. One blistering sunburn can significantly increase the risk of melanoma.

Speak Up
Talk to your doctor about the appearance of moles after age 40, or sores that haven’t healed after 4 weeks.

Reduce your risk of developing melanoma and other forms of skin cancer with these sun safety tips:

SPONSORED BY
Canadian Dermatology Nurses Association

EXECUTIVES OF THE CANADIAN DERMATOLOGY NURSES ASSOCIATION.
Dr. Kim Papp recalls treating a patient who suffered from psoriasis, a chronic inflammatory condition. He had patches of thick, red, scaly skin on his palms and the soles of his feet, which made it impossible for him to work at his job as a machinist.

Dr. Papp, a dermatologist, submitted an insurance claim on the man’s behalf, and it was denied because his psoriasis was not designated as “severe.”

He is one of many psoriasis patients who struggle to get treatment even though the effects of their disease are debilitating. Many insurers provide coverage for severe cases of psoriasis by using a classification system based on one or two criteria used in research.

The first is a rating on the Psoriasis Area and Severity Index (PASI), a scale that accounts for the percentage of the affected body surface area and plaque appearance. The second criteria, called the Dermatology Life Quality Index (DLQI), measures the impact of the psoriasis on a patient’s quality of life. But many healthcare providers see those measurements as flawed.

The PASI score doesn’t take into consideration where the lesions are located on the body, which is a significant factor. For example, a small patch of psoriasis would likely be less problematic on a patient’s calf than on the soles of his feet, where it might prevent him from walking.

The DLQI score might determine that a patient can exercise without determining whether she actually will exercise — something that would require her to expose patches of red, scaly skin in public.

“The key question to ask is, ‘What is the overall impact of a patient’s disease on his or her daily life?’” adds Dr. Papp, who is head of Probity Medical Research in Waterloo, ON.

**Patients find hope**

Insurance coverage varies among plans and continues to evolve. A specialist considers their patient’s coverage along with other factors when making a treatment plan, which could include topical ointments, light therapy, and systemic medication.

When it comes to systemic medication, most patients prefer pills over injectables, notes Dr. Gooderham. But in all cases, patients should explore their options with the help of a dermatologist.

Patients should be proactive in getting the right treatment, says Dr. Papp. “As a psoriasis patient, you should expect an appropriate response to your disease.”

Randi Druzin

**Effective psoriasis treatments for those in the middle range**

**Dr. Kim Papp**
President, Probity Medical Research

**Dr. Melinda Gooderham**
Dermatologist & Investigator, SKiN Centre for Dermatology

This article was made possible with support from a Canadian pharmaceutical research company

_A man with psoriasis went on a date._

She noticed nothing but his smile.

_The End._

**Discover the true cause of psoriasis and find your treatment fit at psoriasisstory.ca**

Ask your dermatologist about oral and injectable treatment options today.
Controlling atopic dermatitis takes continuous effort. As a chronic form of eczema, atopic dermatitis is caused by an overactive immune system and presents a range of symptoms including dry, red, itchy skin with swelling, oozing, crusting, and scaly areas.

Unlike contact dermatitis or allergic dermatitis where symptoms occur after exposure to an irritant or allergen, atopic dermatitis involves periods of acute worsening of the condition, referred to as flares. Flares vary from person to person — covering only certain parts of the body in milder cases, or the entire body in severe cases.

**Symptoms affect more than just skin**

Apart from dealing with physical symptoms, those with atopic dermatitis face emotional and mental health challenges including self-consciousness, social isolation, depression, and anxiety. According to the Eczema Society of Canada’s 2016/2017 Quality of Life Report, 87 percent of respondents reported that their atopic dermatitis negatively impacts their quality of life. In addition, 79 percent of respondents reported loss of sleep, 32 percent have missed work or important life events because of their condition, and 30 percent have had to change careers or give up certain activities.

**Safer and more effective therapies available**

In milder cases, daily application of specialized moisturizers is often sufficient but moderate to severe forms of the disease usually require systemic therapy, typically with anti-inflammatory drugs. However, long-term use of these drugs can lead to serious health problems such as kidney damage, high blood pressure, liver damage, osteoporosis, cataracts, glaucoma, and diabetes.

Because atopic dermatitis requires long-term therapy, patients with severe forms of the condition are additionally challenged in balancing the health risks and tradeoffs of their therapy with the need to treat their symptoms. However, that’s changing thanks to emerging biologic therapies designed to stimulate the body’s natural defense system. “Not only do they work better than the treatments we’ve had, but they don’t have the side effects that our older therapies do,” says Dr. Melinda Gooderham, Dermatologist and Investigator at the SKiN Centre for Dermatology in Peterborough, ON.

For Dr. Gooderham’s patients, biologics have been life-changing. “They sleep all night and they’re no longer itchy, so they can focus on what really matters like their family, friends, work, and school work.” Best of all, they have newfound freedom. “They’re no longer carrying around that burden of disease and anxiety that it could become active at any time,” she says.

If you suffer from atopic dermatitis, speak to your health care professional to learn more about biologic therapy.

Anne Papmehl

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**“Thirty-two percent miss work or important life events because of their condition.”**

This article was made possible with support from a leading Canadian pharmaceutical company

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Atopic dermatitis is the most common type of eczema. Ask your healthcare professional for more information.

**ATOPIC DERMATITIS REVEALED**

www.atopicdermatitisrevealed.ca

Brought to you by a leading pharmaceutical company.
A youthful face may disguise our real age, but the upper neck and back of our hands—being more prone to loss of smoothness and elasticity—can give us away.

Galderma is a pharmaceutical company on the forefront of breakthrough treatments for radiant-looking skin. The company’s Restylane® Skinboosters™, recently approved in Canada, is a new, non-surgical aesthetic treatment that rejuvenates the skin on the lower cheeks, jawline, upper neck, and back of the hands. Available in Europe for over 12 years, the product’s recent Canadian launch affirms Galderma’s leadership in medical aesthetics.

The effect of Restylane® Skinboosters™ is achieved through an injectable form of hyaluronic acid, a natural sugar found in the body that binds to water and makes the skin look smooth and radiant. Our bodies produce less hyaluronic acid with age, but injecting it into the skin improves elasticity, smoothness, and overall appearance.

“Unlike some of the more traditional fillers, the hyaluronic acid filler is much lighter, so the focus is more on skin quality than on changing the shape or lifting the face,” says Dr. Julia Carroll, Dermatologist and Founding Director of Compass Dermatology in Toronto.

Patient satisfaction on many fronts
Dr. Carroll reports high satisfaction levels from her patients receiving this treatment, who range in age from the mid-20s to over 70. “For younger patients, it’s a great way to get started in improving their skin quality. For more mature patients, it’s sort of the icing on the cake. They’re happy with the lack of lines and wrinkles, and they’re also getting that next step in skin quality improvement.”

The non-surgical aspect enhances the appeal of Restylane® Skinboosters. “My clients are busy and don’t have much downtime, so the non-surgical aspect is great,” says Dr. Carroll. Initial treatment is done through a series of multiple micro-injections by a qualified health care professional, typically in about three 15-minute office visits, two to four weeks apart, followed by a touch-up six months later.

Best of all, with Galderma Canada’s legacy of safety and innovation, patients feel comfortable knowing Restylane® Skinboosters™ is safe to use and looks natural. “Hyaluronic acid is something our bodies are familiar with and we have it in almost every single cell, so that—and the fact that it’s a natural look—really elevates the game in terms of skin quality,” says Dr. Carroll.
CELLULITE NO MORE! SAY GOODBYE TO DIMPLES AND DENTS

Dr. Julie Khanna, MD, FRCSC
Diplomat of the American Board of Plastic Surgeons, Director of Plastic Surgery, ICLS Dermatology and Plastic Surgery Clinic in Oakville, ON

As the weather heats up across Canada, the layers start to come off and we expose our skin to the summer sun. But baring our skin usually means baring our cellulite as well. What’s a girl to do?

We sat down with Dr. Julie Khanna, Plastic Surgeon and Director of Plastic Surgery at ICLS Dermatology and Plastic Surgery Clinic in Oakville, ON, to explore what women can do to get rid of dimples and dents caused by cellulite.

“Most women, approximately 90 percent, have some form of cellulite and get frustrated with the appearance of it as it’s usually found on their thighs and buttocks,” says Dr. Khanna. “They’ve tried all kinds of different things to get rid of it but there hasn’t been anything that’s been reliable and consistent to this point.”

There are several myths that surround cellulite, but Dr. Khanna shared her opinion on three of the more popular misconceptions.

MYTH: Losing weight and exercising will help get rid of cellulite.

FACT: According to Dr. Khanna, “Being in shape will help your legs look better no matter what, but losing weight won’t release those dents. It doesn’t change the structural issue within the skin.”

MYTH: Cellulite can be eliminated with creams, lotions or massage.

FACT: “If you hydrate skin, you may see a temporary improvement in appearance, but it’s not long-lasting,” states Dr. Khanna.

MYTH: There’s really no effective and lasting treatment for cellulite.

FACT: “There’s a new treatment in Canada called Cellfina®,” says Dr. Khanna. Cellfina® treats the structural cause of cellulite. “I see it as an excellent innovation for those dented, deep dimples that women get. It’s reliable, reproducible, and lasts at least three years. And it’s easy. That’s what I like about it.”

SUMMER IN CANADA: MORE DANGEROUS THAN YOU THINK

Canada may not be thought of as a sunny nation, but skin cancer affects one out of seven Canadians and remains the most common cancer diagnosed in Canada.

With the incidence of melanoma rising across the country, sun-safe behaviours are increasingly important to prevent skin cancer. Timely treatment saves lives, so early detection is also critical. Incidence rates of melanoma have increased in both men and women over the past several decades, growing 2.1 percent per year in men from 1992 to 2013, and 2.0 percent per year among women.

Studies show that one-in-three Canadians over the age of 18 got a sunburn last year. Unbeknownst to many, severe sunburns increase the risk of melanoma, so it’s important to keep the following sun-safe behaviours in mind this summer:

1. Avoid the sun as much as possible between 11:00 a.m. and 3:00 p.m. — seek shade or use an umbrella for shade.
2. Wear clothing that covers as much skin as possible and a wide-brimmed hat.
3. Wear close-fitting wraparound sunglasses with full UVA and UVB protection.
4. Use a “broad spectrum” sunscreen with a minimum 30 sun-protection factor (SPF) all year-round and reapply after swimming, strenuous exercise, or towelling off.
5. Avoid UV tanning equipment and deliberately trying to get a suntan.