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APRIL 2007

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NEEDLE WORK

In the movies, people travel to the past via a time machine (or a DeLorean). In real life, the vehicle just might be injections. Leslie Baumann, professor of dermatology at the University of Miami and author of *The Skin Type Solution* (Bantam Trade Paperback), is a syringe superstar, having participated in study after study on injectables. Here, she discusses what she's learned about erasing lines and obliterating wrinkles.

What's the biggest misconception about injections? That there is one best filler. They all have characteristics that make them better for certain areas. I love CosmoPlast for the lining of the lips, Hylaform for the body of the lip, and Restylane for deeper nasolabial fold lines.

What's the latest in injectables? Reloxin, the new Botox, will likely come out later this year. Early data shows it may last longer and kick in faster than Botox. It will be nice to have competition on the market—the Botox people (Allergan) raised their price another 8 percent this year!

How have you changed your approach to injections in the past few years? I now inject Sculptra first, a watery substance that causes your skin cells to make collagen, and then follow with a filler—hyaluronic acid or CosmoPlast. I love Sculptra because I mix it with lidocaine and epinephrine, which prevents pain and bruising. Over the next month, the Sculptra starts to really kick in, making new collagen—other injectables don't do that.

Are we approaching an era where people just won't have to look old? Not yet. I am getting close to 40 though, so let's hope there are more advances! The biggest issue I think is that we can do a lot for faces but not much for the neck. I do like the Titan laser for the neck—you can see immediate tightening of the skin, and I can use it on dark skin.

What parts of the body do people forget to protect? The arms, neck, chest, and hands. I noticed the other day that my feet are looking old because I don't think to put sunscreen on them, and in Miami, I wear sandals a lot.

What's the most outlandish request you've had from a patient? One patient told me that she wanted her face to look like an egg—no movement and no wrinkles.

Have you had to talk patients down? Many times. I have lost patients because they

want me to use too much Botox. Or I won't make their lips as big as they want. I think big lips are ridiculous. One patient referred to me as "Dr. No."

What do you think of that overinjected look? Women have forgotten what natural beauty is. The funny thing is, I don't think men have. I have never met a man who thought that over-Botoxed, space-alien look was attractive, but I have met women who do and want it.

Do you get injections yourself? I used to have my nurse inject me with CosmoPlast, but I gained ten pounds and that puffed out all my lines. I think I'd rather have the lines—they're easier to fix than the ten pounds! —INTERVIEW BY LINDSY VAN GELDER

DAMAGE CONTROL

As a dermatologist in the sun-worshipping town of Virginia Beach, David McDaniel deals with environmental damage every day. But as a researcher who conducted clinical trials on breakthrough antioxidants such as idebenone and coffeeberry extract at the Institute of Anti-Aging Research, he's also wise about the steps we can take to protect ourselves from premature aging.

How much of skin aging is in our control? Your body is bombarded daily with environmental stressors—sun, pollution, ozone—that cause it to degrade

in before a beach vacation and say, "I'm going to the islands next week; then I'll be in for you to fix me." They don't realize there's no magic "undo" button I can push to reverse all the damage.

What signs of aging do you notice first? A woman with leathery, weathered skin can look much older than someone who has even skin tone and wrinkles. There's an overemphasis on treating wrinkles in America, both in the media and in product marketing. Brown spots, white spots, broken capillaries—most youthful-looking skin doesn't have those things.

Is there a difference between applying antioxidants topically and getting them through food or supplements? A diet rich in fruits and vegetables is definitely important, and I'm also a proponent of good supplements, but there is evidence that dietary antioxidants get metabolized quickly and don't remain in the skin 24 hours a day, seven days a week. The greater your environmental exposure, the more important it is to also be applying them topically, so they can accumulate in the skin. There is a reservoir effect with the new superpotent antioxidant creams.

How do you know if you're getting enough antioxidants? There's a hand scanner, called the BioPhotonic scanner, that uses a laser to read antioxidant levels in your body. We have one in our office—it's available to doctors, nutritionists, gyms.

How did you do? Excellent, but then I

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collagen faster and create less new collagen. Some things you can control, some you can't. You can quit smoking, but maybe you can't force your friends to quit. You can wear sunscreen every day, but you might still live in a smoggy area. Still, the more you protect yourself now, the less you'll have to repair in the future. Awareness is better than it used to be, but I still have patients who come

practice most of what I preach. I stay out of the sun; I eat a lot of fruits and vegetables; I take supplements.

Which ones? I did a lot of research on formulas back when my father had cancer, and ended up giving him something called LifePak. It was pretty remarkable—the effect they had on his energy levels. My wife and I took them for years. Now we take