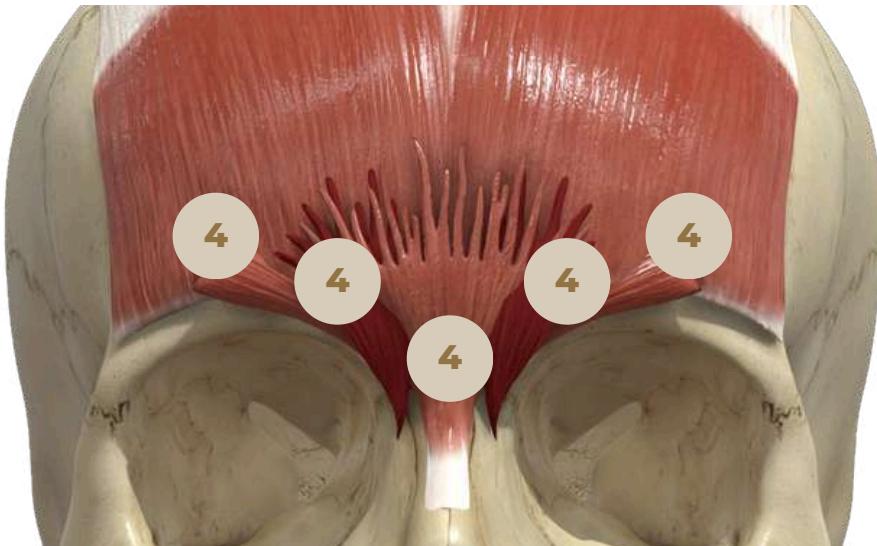


**26**

**BOTULINUM TOXIN**

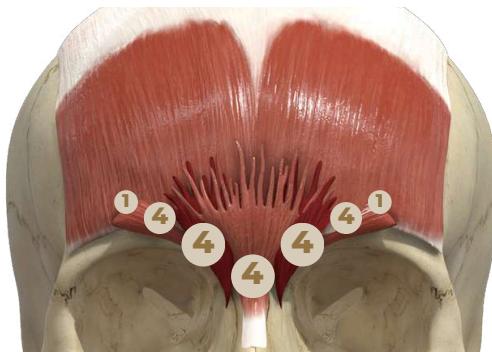
**INJECTION DESIGNS**

# GLABELLA LINES (FROWN LINES)



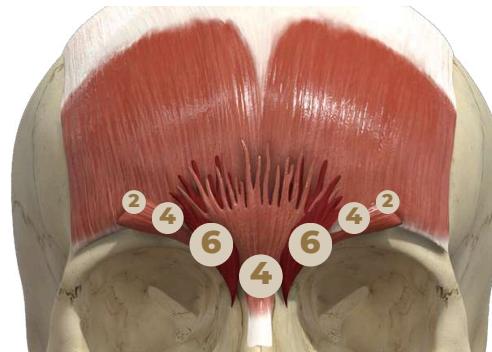
LICENCED DOSES  

## OFF LABEL VARIANTS



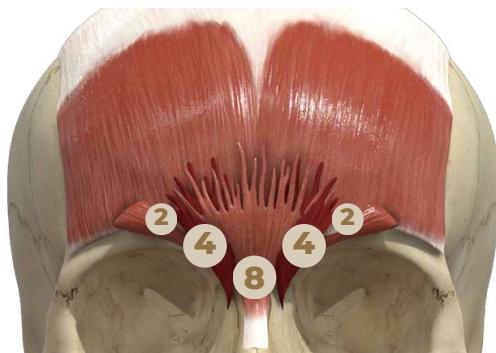
### WIDE

Wide insertion point of the corrugator muscle may leave lateral activity without a small, superficial dose lateral to the mid pupil.



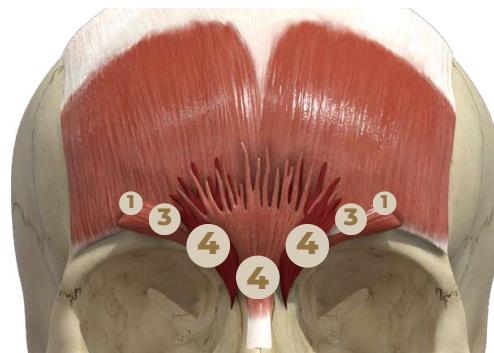
### STRONG

It is common to increase the dose in men or women with obviously stronger muscles than average. Up to 80 units have been found to have a similar side effect profile.



### DOWN PULL

Dominant procerus & depressor supercilli may require stronger doses medially.



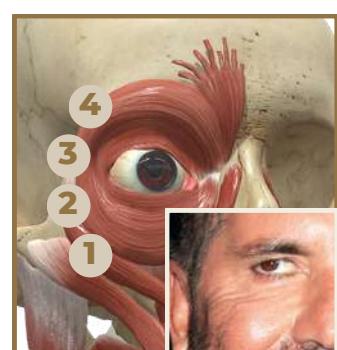
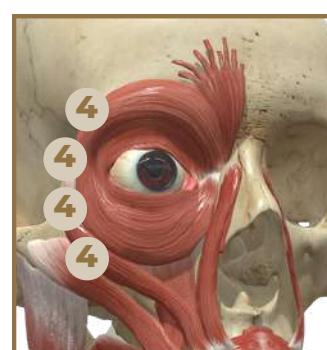
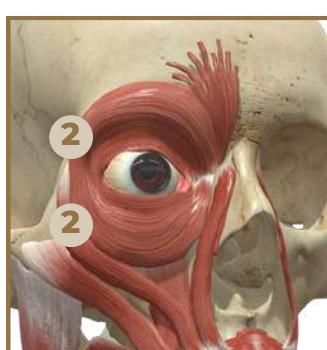
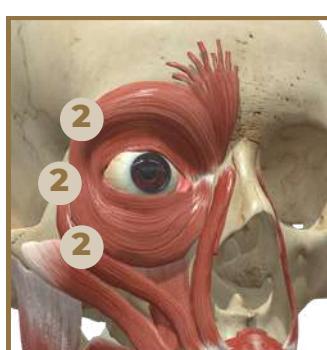
### CAUTIOUS

Lower dose above the midpupillary line may decrease eyelid ptosis risk.

# LATERAL CANTHAL LINES (CROWS FEET)



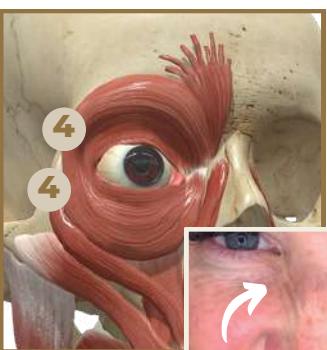
## OFF LABEL VARIANTS



More gentle results may be attained, preserving some activity but also reducing longevity. Even less may be appropriate in some cases. 1,1 or 2,2 is in the realm of 'baby botox' for mild results and normal expression.

Higher Doses are sometimes required in people with stronger than average orbicularis oculi muscles.

Over-treatment is a risk. In some cases, a sag or a ledge around the eye can occur, and a more graduated dose may reduce the risk of this.



Lower dose inferiorly may reduce the "pinched" look caused by the relative dominance of central muscles after a treatment.

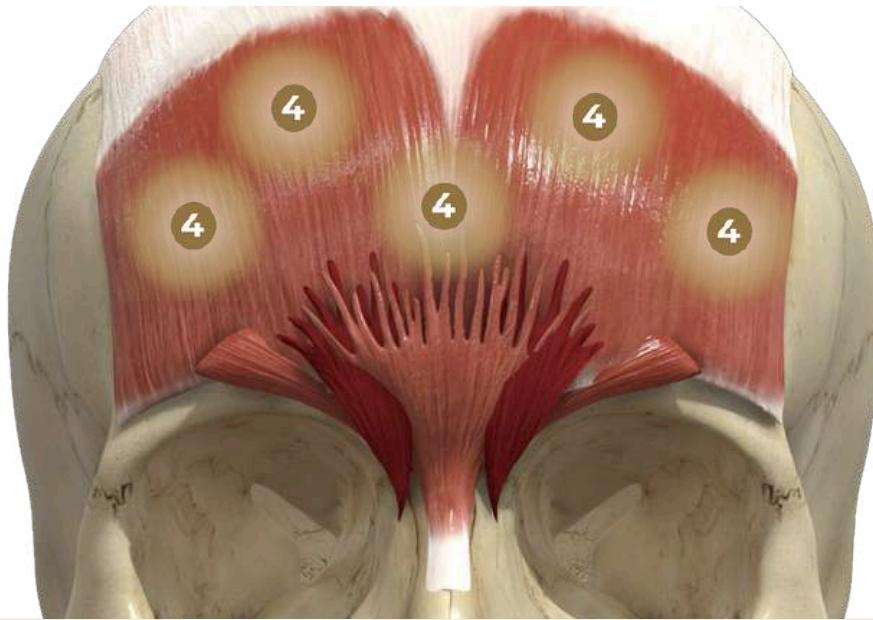
Under eye lines are sometimes treated as above. However, the result can be disappointing if the lines are formed by action from the Zygomatic muscles. This area is important for expression.

Superiorly there can be activity outside of the licenced areas, and small doses superficially administered can soften lines and aid lift in this area.

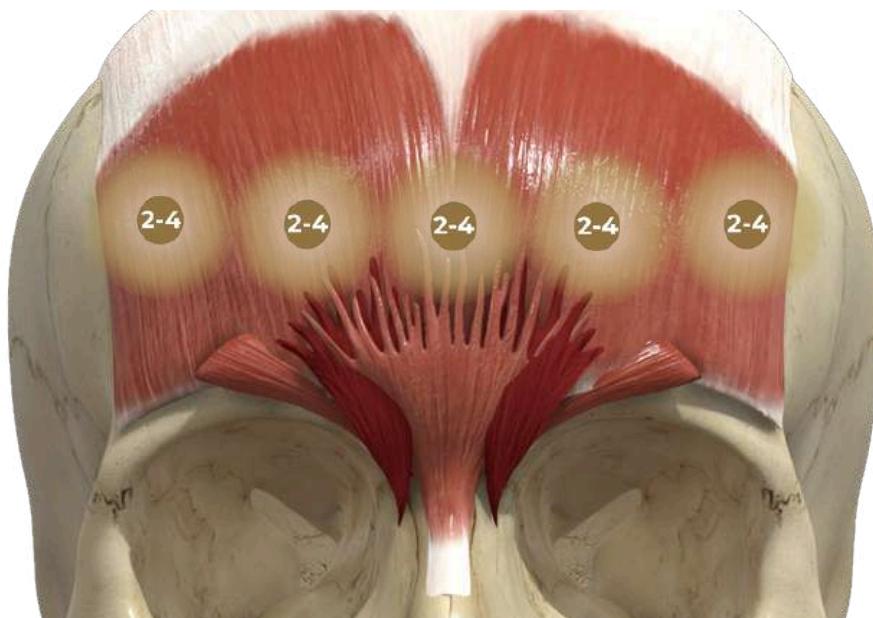
# FOREHEAD LINES

## (FRONTALIS)

LICENCES FOR TREATMENT OF FOREHEAD LINES (NOT FOR BROW LIFT)



LICENCED DOSES



LICENCED DOSES



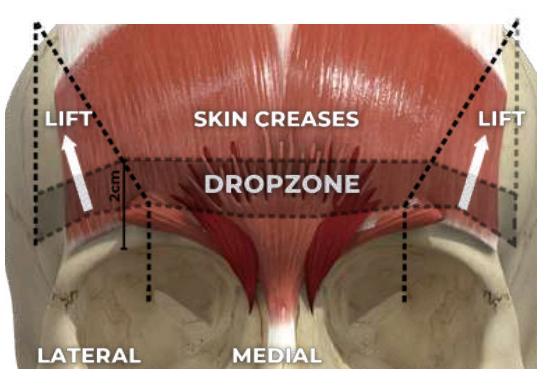
Licensed patterns are designed to give acceptable results to the greatest proportion of people treated. They therefore less good at treating atypical patients. You can see that there are areas of untreated muscle in these diagrams which may require patient follow up or cause undesired results in some cases. Below are some variations of the patterns that enable personalisation of the treatment design to different shaped foreheads and to create different results. For example if a patient wants to increase the arch of the brow instead of just softening the lines.

# VARIATIONS IN FOREHEAD TREATMENT DESIGN



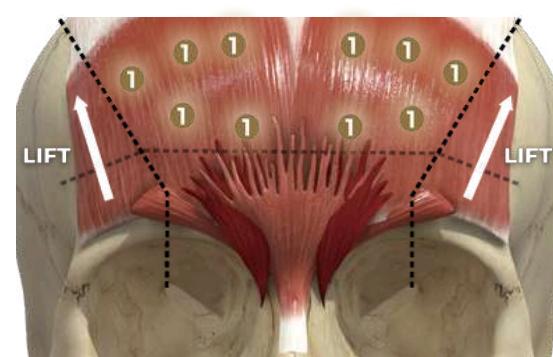
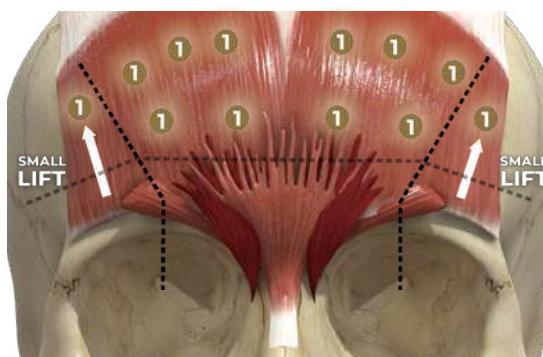
Foreheads are highly variable, as are the desired goals from botulinum toxin treatments. Eyebrow lifts, frozen or soft treatments are often requested in the context of a wide variety in the physical size and dynamic characteristics of foreheads. The skilled clinician must learn to design treatments around all these variables, as the licensed dosages reveal their limits in many of these contexts.

It's vital to understand that both licences are for treatment of horizontal lines, and do not claim to prevent brow ptosis as a side effect. Variations below are ways of attaining lift and reducing the incidence of ptosis through a variation of dose and position.



To understand the forehead, you must understand the 4 zones- lateral forehead is important for eyebrow lift, and should be left untreated if an eyebrow arch is desired. Medial zone is the site of most lines in the average forehead. The drop zone is higher risk for ptosis and eyebrow asymmetry.

 BOTOX 

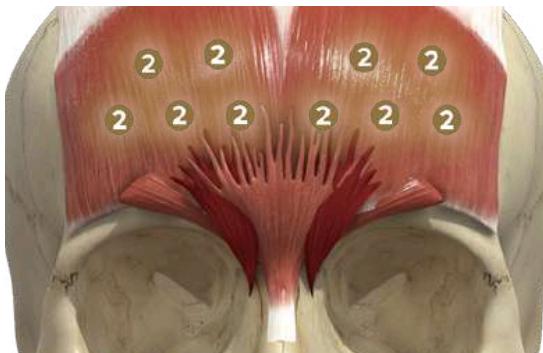


Most females look better with an angle in their eyebrow of about 15 degrees from the medial low point. To achieve this you must leave some lateral muscle activity above the eyebrow. 3-4 cm of muscle untreated from the orbital rim in a direction which would pull the arch. If too much is left you can get ladder lines. To soften them, add a little more in the top of the triangle illustrated.

For bigger lifts, less toxin should be injected in the lateral frontalis. There is an increase in resting tone of untreated muscle when the medial frontalis is treated.

**NB: ALL SUGGESTED TREATMENTS IN THE FOREHEAD ASSUME GABELLA TREATMENT IS ALSO BEING PLANNED.**

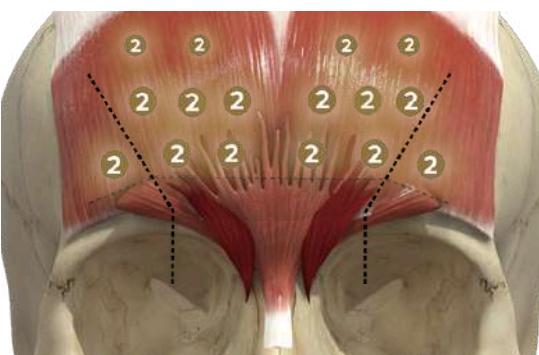
# VARIATIONS IN (FOREHEAD TREATMENT DESIGN)



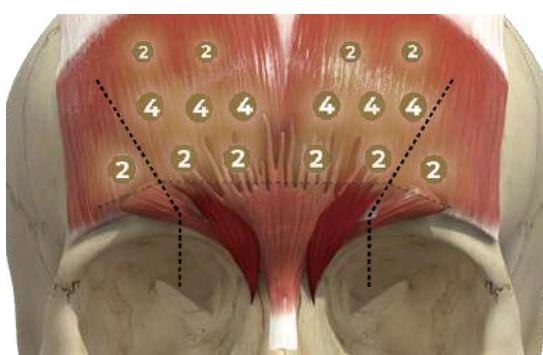
AVERAGE FOREHEAD



SHORT FOREHEAD



TALL FOREHEAD



RARE HIGH LEVEL DOSE -  
EG LARGE MUSCULAR MAN

## LEARNING FROM POOR RESULTS



The forehead is the hardest area of the face because it is literally a balancing act.

It is essential to leave some parts untreated to support the eyebrows and the medial forehead, but if you leave too much muscle it can lift. Thus the boundary placement between treated and untreated muscle is the deciding factor for results

**TOO MUCH**

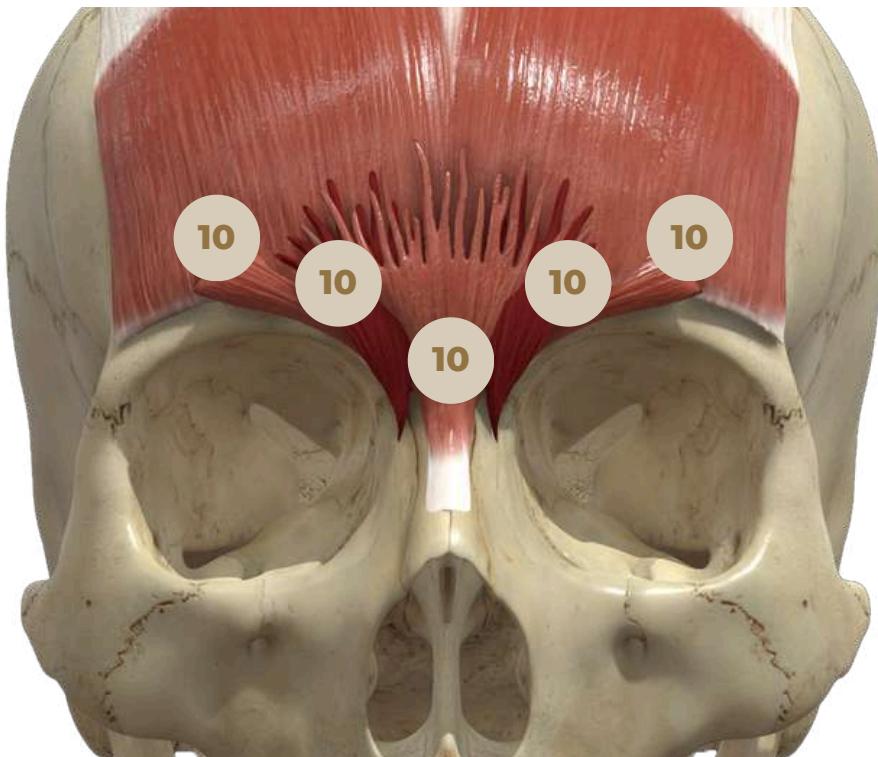
The licensed doses in my opinion risks a higher than needed rate of forehead ptosis, and limits the chance of a lift to the eyebrows- which are a very common request from females. On average they also use more product in females than may be required to get a good result, increasing costs with limited benefit for many clients.



You can learn the most from seeing poor results and deciding what may have caused the disharmony you can see. Greater understanding through case studies will decrease the risk of poor results with your patients.

Finally, remember that with foreheads more than any area, it's important to see the first treatment as stage 1 on a journey, and leave room for a top up once you have gained some experience of the patient's face. Brow drops are harder to fix than overly lifted brow lifts.

# GLABELLA LINES (GLABELLA LINES)



LICENCED DOSES



# LATERAL CANTHAL LINES (CROWS FEET)



LICENCED DOSES





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*Dr Tim*