## Q&ASKTHE EXPERTS



O Dear Stylist,

My hair is flat and dull and I long for thicker strands. Do you think extensions would be good for me and, if so, which type do you recommend that won't damage my hair long term?

There are typically two types of extensions: permanent and temporary. A lot of people like temporary clip-in extensions for a one-time event like a party or a wedding. These are the most temporary option, as they will not last through a shampoo or overnight. They can also be used to provide temporary highlights; for example, a brunette can put blonde extensions in to get natural highlights without putting color in her hair. We call this "fantasy coloring" because you may pop a teal or pink in for your

favorite sports team or a cause of which you are an advocate.

In the salon, we use "Great Lengths," which are bonded extensions, meaning they are bonded directly to the hair as extensions of your own hair. The benefits are that they aren't obvious and they last six months to a year. They are one-hundred percent natural human hair and of a superior quality. You can even select the type of hair you want, whether it is European, Indian or non-human-it all depends on how much you want to spend.

It sounds like you want to add strands to naturally thicken the hair, so extensions are ideal to help you with body and length. The only thing they do not do is combat hair loss at the top of your head and crown. Another option is "Hot Heads," which is a tape extension that is reusable and does not require a high level of commitment since it is temporary. "Hot Heads" is very popular because it is a newer product at a lower investment and can be reused, which people like a lot.

I think you will be happy with extensions because they do not damage the hair; however, my best advice is to consult with a certified cosmetologist.

Laura Phillips, General Manager H20 Salon & Spa, 441 Metairie Road .h2osalon-spa.com Dear Dr. Sadeghi,

I had three children in the last six years and I went from a C-cup to a small and very saggy B-cup. Do you recommend I get a breast lift or implants? I really want more youthful breasts, like they were before I had kids.

Women should know that pregnancyinduced sagging of the breasts is related
to inflation and deflation and the effect that
has on the tissue and skin of the breast. In some
cases, we are able to do augmentation with
implants to replace the volume in the breasts
and give them a lift. In other cases, the sagging
is more severe and implants will not do the job,
so we have to do implants with a lift or a lift by
itself.

There is a newer option available which is a lift using liposuction of the abdomen or wherever we may be able to get some fat. We inject the fat into the breast at the time of the lift, which gives it a natural look and feel, fullness and cleavage without having to use an implant. This technique is becoming popular. Fat injections are safe without having to compromise the circulation of the breast or nipple, which is the major downfall of implants with the lift at the same time. Otherwise, since the lift on its own does not add additional volume, we consider putting in implants at the time of the procedure versus doing fat injections.

Women should wait six months to a year after pregnancy to undergo any kind of procedure on their breasts. Evaluation by a plastic surgeon is the best way to figure out if you are a good candidate for a procedure.

Just be sure to have an annual mammogram if you are over 40 to ensure that you are clear and healthy before you proceed.

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## (a) Dear Dr. Lupo,

My 16-year-old daughter has developed acne and it seems to be getting worse. I hear so many bad comments about Accutane. What do you recommend I do for her?

A There are four basic protocols that female patients with acne can try. First, there is conventional therapy for severe acne which includes oral antibiotics as well as topical retinoids like Retin-A, Differin® or Tazorac® in conjunction with topical antibiotics. The second track would be hormonal manipulation, as often females respond to controlling the hormones with certain birth control pills and another medication called Spironolactone in conjunction with topical retinoids. The third option is Accutane, which is extraordinarily safe when properly prescribed and monitored by a physician. There have been numerous studies that have not shown any direct link between Accutane and depression, so it is a good option when the first and second choices fail. The final option is a combination of procedural treatments with the first or second step or on



their own when the first two are ineffective. With this option, we supplement the first or second protocol with lasers and peels, the most beneficial being Salicylic acid peels.

Of all the options I mentioned, Accutane presents the highest cure rate by far. People have been so inundated with bad information from the media and lawyers that, unfortunately, supporting evidence is no longer necessary. For this reason, it is important to talk with a board-certified dermatologist to find out which treatment would be best suited for you.

**Dr. Mary Lupo,** Dermatologist 145 Robert E. Lee Boulevard drmarylupo.com