The Biggest Mistake in Male Facial Rejuvenation Transcript

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Introduction to Male Facial Aging

If you're a man looking in the mirror If you're a man looking in the mirror and thinking, "I don't look bad, but I and thinking, "I don't look bad, but I don't look like myself anymore," don't look like myself anymore," this is where I stop and pay attention.

this is where I stop and pay attention. Because what most people miss is how Because what most people miss is how male faces actually age, why standard male faces actually age, why standard aesthetic treatments often fail men, and aesthetic treatments often fail men, and why things like structure, hormones, why things like structure, hormones, weight changes, and skin quality matter weight changes, and skin quality matter far more than simply chasing wrinkles.

far more than simply chasing wrinkles. I've seen the same pattern repeat itself I've seen the same pattern repeat itself over many years in practice. And when over many years in practice.

Why Male Rejuvenation Needs a Different Approach

And when it's ignored early, people often end up it's ignored early, people often end up compensating later with more filler, compensating later with more filler, more procedures, and results that feel more procedures, and results that feel less and less natural. Today, I want to less and less natural. Today, I want to walk you through what I see going wrong walk you through what I see going wrong in male facial rejuvenation and what I in male facial rejuvenation and what I do differently. Now, if you're new here, do differently. Now, if you're new here, I'm Dr. Fred Bloom. I practice I'm Dr. Fred Bloom. I practice integrative holistic anesthetic medicine integrative holistic anesthetic medicine and my work lives at the intersection of and my work lives at the intersection of anatomy, biology, hormones, and anatomy, biology, hormones, and long-term facial health. This channel long-term facial health. This channel isn't about doing more procedures. It's isn't about doing more procedures. It's about thinking more clearly. If that about thinking more clearly. If that resonates with you, take a moment to resonates with you, take a moment to like this video, subscribe to the like this video, subscribe to the channel, and join my newsletter if you channel, and join my newsletter if you want deeper, longer form education want deeper, longer form education beyond social media. One of the biggest beyond social media. One of the biggest mistakes I see is treating male faces mistakes I see is treating male faces like slightly modified female faces. Men like slightly modified female faces. Men age differently. Bone loss tends to age differently. Bone loss tends to occur earlier and more aggressively. Fat occur earlier and more aggressively. Fat pads behave differently. Skin is thicker pads behave differently. Skin is thicker but collapses structurally. And hormones but collapses structurally. And hormones play a much larger architectural role.

play a much larger architectural role.

The OG Curve and Facial Structure

>> Men lose structure first, not softness. >> Men lose structure first, not softness. >> So when we apply soft feminizing >> So when we apply soft feminizing techniques or overused neurotoxins, we techniques or overused neurotoxins, we don't actually rejuvenate men. We make don't actually rejuvenate men. We make them look off. And men sense this them look off. And men sense this instinctively. That's why they often instinctively. That's why they often say, "Just don't make me look weird." say, "Just don't make me look weird." That's not vanity. That's identity. One That's not vanity. That's identity. One of the most important and misunderstood of the most important and misunderstood concepts in facial aesthetics is the OG concepts in facial aesthetics is the OG curve. The OG curve is the natural curve. The OG curve is the natural S-shaped contour of the face. It's S-shaped contour of the face. It's created by the relationship between created by the relationship between bone, fat, skin, and light. It runs from bone, fat, skin, and light. It runs from the lateral cheekbone gently inward the lateral cheekbone gently inward beneath the eye and then outward again beneath the eye and then outward again toward the lower cheek. When

that toward the lower cheek. When that transition of light and shadow is transition of light and shadow is smooth, the face looks rested and smooth, the face looks rested and supported. When it collapses, the face supported. When it collapses, the face looks tired even without wrinkles. And looks tired even without wrinkles. And when it's overbuilt, the face starts to when it's overbuilt, the face starts to look puffy or unnatural. This is where look puffy or unnatural. This is where male and female faces must be treated male and female faces must be treated differently. In women, a softer and differently. In women, a softer and slightly more medial OG curve can look slightly more medial OG curve can look attractive. In men, the OG curve should attractive. In men, the OG curve should remain flatter, more lateral, and more remain flatter, more lateral, and more structural.

Assessing Collapse, Volume Loss, and Sex-Specific Anatomy

structural. structural. Too much medial projection in a man's Too much medial projection in a man's face quickly feminizes it. When I assess face quickly feminizes it. When I assess the OG curve in consultation, I'm not the OG curve in consultation, I'm not thinking about filler yet. I'm thinking thinking about filler yet. I'm thinking about structure, biology, and light. The about structure, biology, and light. The first thing I do is look at the face at first thing I do is look at the face at rest. Not smiling, not posing, just rest. Not smiling, not posing, just neutral. I'm asking myself where light neutral. I'm asking myself where light reflects naturally, where that reflects naturally, where that reflection breaks, and where the face reflection breaks, and where the face flattens, and where it collapses. A flattens, and where it collapses. A healthy OG curse flows. A disrupted one healthy OG curse flows. A disrupted one tells a story. Next, I look at the face tells a story. Next, I look at the face from oblique and profile views because from oblique and profile views because straight-on views often lie. The OG straight-on views often lie. The OG curve reveals itself when someone turns curve reveals itself when someone turns their head slightly, when they're their head slightly, when they're talking naturally, and when the face is talking naturally, and when the face is seen in motion. That's where you start seen in motion. That's where you start to notice loss of lateral support, to notice loss of lateral support, overfilled medial cheeks, and early overfilled medial cheeks, and early structural collapse. When someone looks structural collapse. When someone looks okay straight on, but distorted when okay straight on, but distorted when they move, something isn't right. Then I they move, something isn't right. Then I ask a critical question. Is this volume ask a critical question. Is this volume loss or is this structural loss? Not all loss or is this structural loss? Not all OG curve loss is caused by fat loss.

OG curve loss is caused by fat loss. Sometimes it's bone remodeling, ligament Sometimes it's bone remodeling, ligament laxity, skin thinning, and overall laxity, skin thinning, and overall tissue quality decline. If you treat tissue quality decline.

Hormones, Weight Loss, and Facial Deflation

If you treat structural loss with soft volume, you structural loss with soft volume, you don't get lift, you get puffiness. And don't get lift, you get puffiness. And finally, I always assess sex specific finally, I always assess sex specific anatomy. Men should not be treated with anatomy. Men should not be treated with the same OG targets as women. In men, the same OG targets as women. In men, I'm aiming for less medial fullness, I'm aiming for less medial fullness, more lateral support, straighter more lateral support, straighter transitions, and preserved angularity.

transitions, and preserved angularity. That's how you rejuvenate without That's how you rejuvenate without erasing identity. As we age, the face erasing identity. As we age, the face doesn't just develop wrinkles. The doesn't just develop wrinkles. The architecture changes. Bone slowly architecture changes. Bone slowly resorbs, ligaments weaken, fat pads resorbs, ligaments weaken, fat pads descend or deflate, and skin thins and descend or deflate, and skin thins and loses elasticity.

loses elasticity. The OG curve doesn't disappear, it The OG curve doesn't disappear, it collapses. That collapse is why people collapses. That collapse is why people often look tired even when they're often look tired even when they're sleeping well and taking care of sleeping well and taking care of themselves. Chasing lines alone misses themselves. Chasing lines alone misses the real issue. Weight loss adds another the real issue. Weight loss adds another layer to this, especially rapid or layer to this, especially rapid or significant weight loss, which we're significant weight loss, which we're seeing much more often now. Facial fat seeing much more often now. Facial fat

disappears faster than skin can adapt.

disappears faster than skin can adapt. The midface flattens. the light The midface flattens. the light transition breaks. That's why people transition breaks. That's why people often say, "I feel healthier, but my often say, "I feel healthier, but my face looks older." The answer is not to face looks older." The answer is not to overfill. The answer is restoring overfill. The answer is restoring lateral support, improving skin quality, lateral support, improving skin quality, sequencing treatments properly, and sequencing treatments properly, and respecting facial tension lines.

respecting facial tension lines. Overcorrecting weight loss faces is how Overcorrecting weight loss faces is how the pillow look happens. Hormones the pillow look happens. Hormones quietly influence all of this. They quietly influence all of this. They control bone density, collagen control bone density, collagen production, fat distribution, skin production, fat distribution, skin thickness, healing response, and thickness, healing response, and long-term tissue behavior. In men, low long-term tissue behavior. In men, low testosterone accelerates bone loss, testosterone accelerates bone loss, flattens the midface, weakens jaw lines, flattens the midface, weakens jaw lines, and thins the skin. Chronically, and thins the skin. Chronically, elevated cortisol, worsens tissue elevated cortisol, worsens tissue breakdown and deflation. In women, breakdown and deflation. In women, estrogen decline reduces collagen and estrogen decline reduces collagen and flattens the OG curve, while insulin flattens the OG curve, while insulin resistance often causes puffiness resistance often causes puffiness without structure. This is why purely without structure. This is why purely aesthetic treatments often don't hold.

aesthetic treatments often don't hold. The biology underneath isn't supported. The biology underneath isn't supported. That's also why I integrate That's also why I integrate biioidentical hormones when appropriate.

biioidentical hormones when appropriate.

A Better Treatment Strategy for Men

When hormones are optimized When hormones are optimized thoughtfully, skin quality improves, thoughtfully, skin quality improves, structural treatments last longer, less structural treatments last longer, less filler is needed, and faces age more filler is needed, and faces age more slowly and more naturally. In selected slowly and more naturally. In selected patients, peptides can also support patients, peptides can also support collagen synthesis, tissue repair, collagen synthesis, tissue repair, inflammation control, and recovery after inflammation control, and recovery after procedures. At that point, aesthetic procedures. At that point, aesthetic stop fighting biology and start working stop fighting biology and start working with it. What I do differently today is with it. What I do differently today is simple, but it's not easy. I treat skin simple, but it's not easy. I treat skin first, respect male anatomy, use less first, respect male anatomy, use less product rather than more, sequence product rather than more, sequence treatments carefully, address hormones treatments carefully, address hormones and metabolism, and focus on long-term and metabolism, and focus on long-term facial integrity. The goal isn't to look facial integrity. The goal isn't to look done. The goal is to look healthy, done. The goal is to look healthy, strong, and congruent with who you are.

strong, and congruent with who you are. If this perspective helped you think If this perspective helped you think about facial aging differently, please about facial aging differently, please like this video, subscribe to the like this video, subscribe to the channel, and consider joining my channel, and consider joining my newsletter for deeper integrative newsletter for deeper integrative education. And I'd love to hear from you education. And I'd love to hear from you in the comments. Has anyone ever in the comments. Has anyone ever explained facial aging to you this way?

explained facial aging to you this way? Have you noticed changes in your face Have you noticed changes in your face after weight loss or hormone shifts? And after weight loss or hormone shifts? And would you like a deeper breakdown of would you like a deeper breakdown of male versus female facial structure male versus female facial structure next? Drop your thoughts below. I read next? Drop your thoughts below. I read them.

them. >> [music]