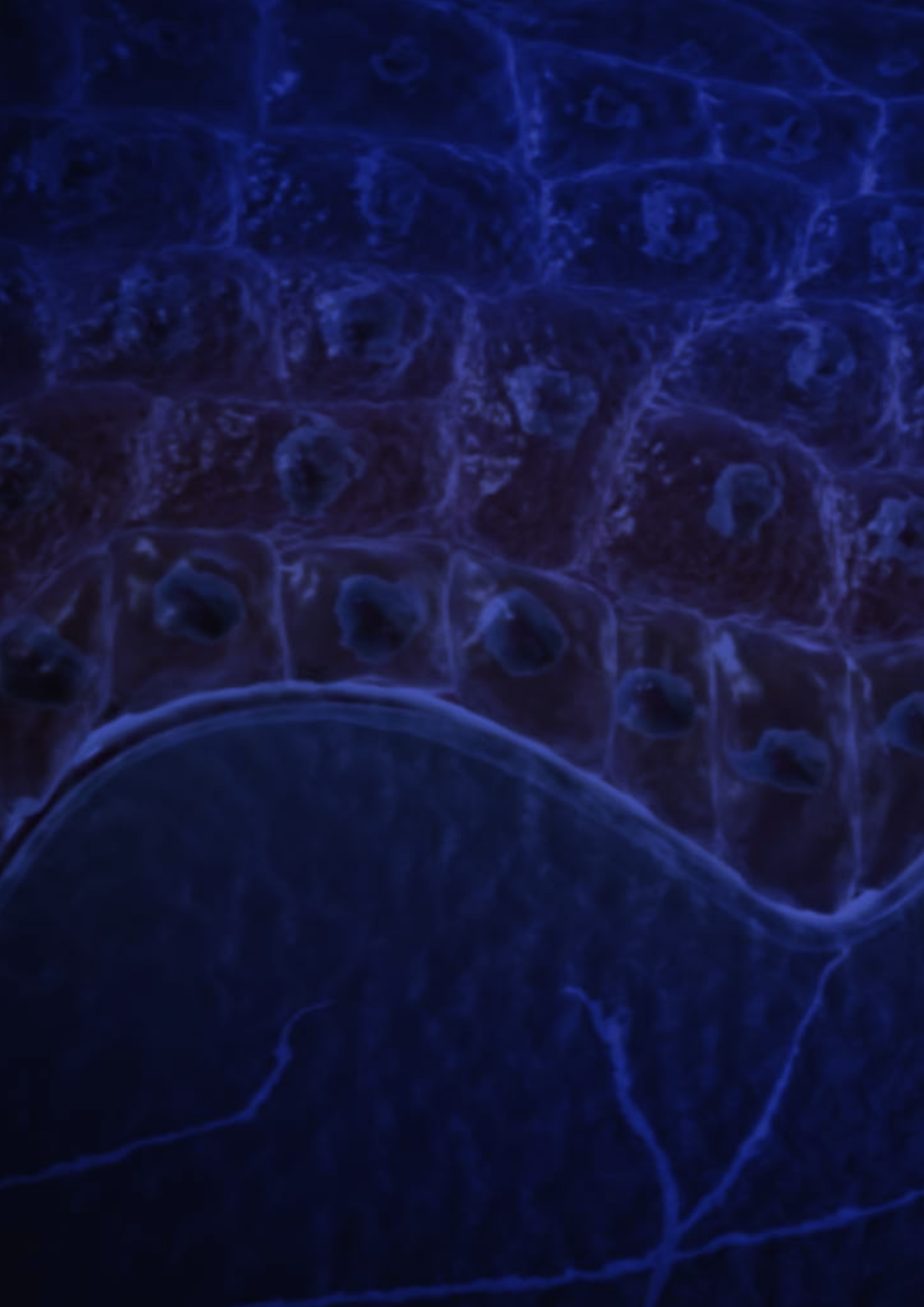


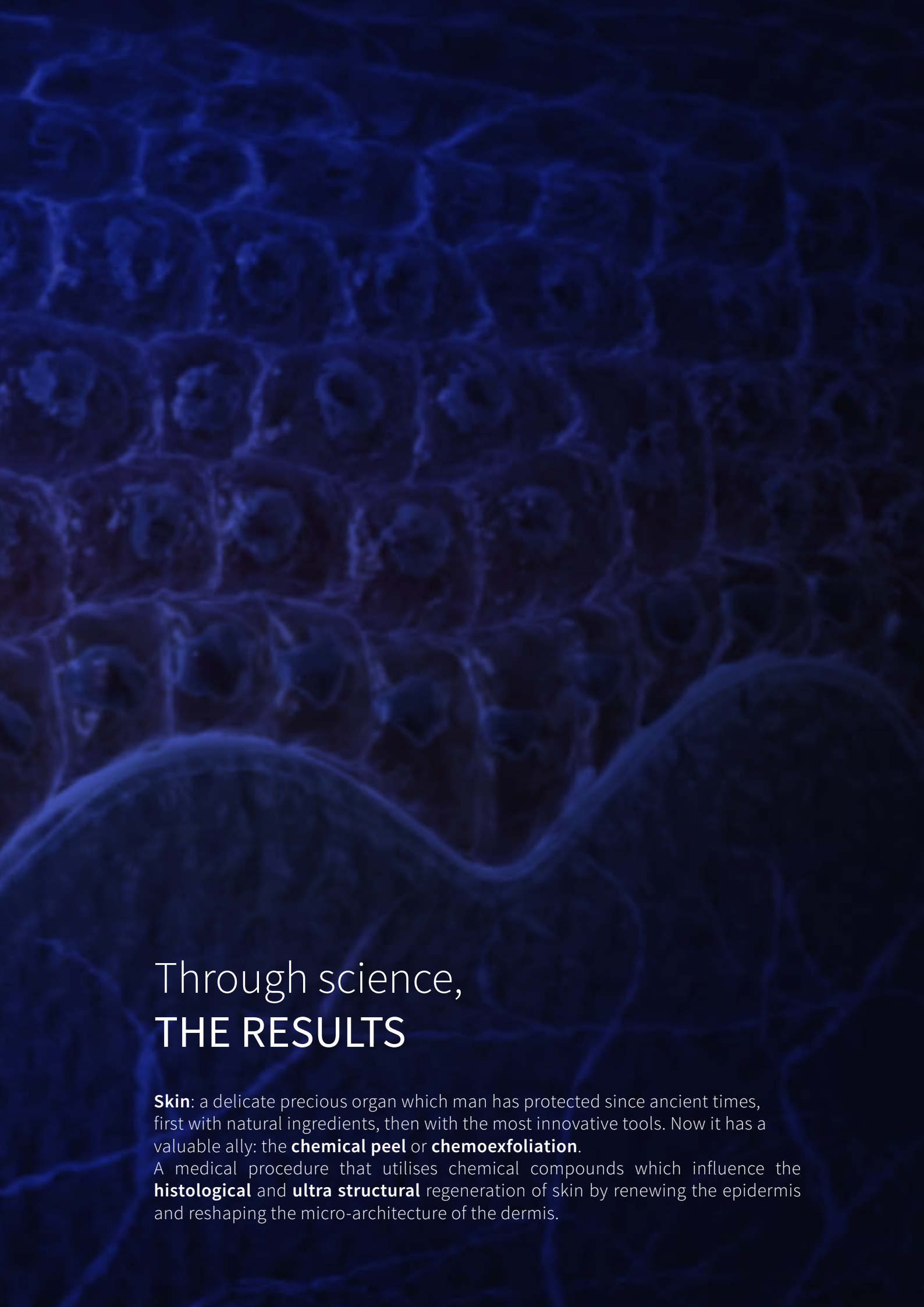


CHEMOEXFOLIATION
ENERPEEL®

TEBITECH

Technologies and Biotechnologies
for dermatology and plastic surgery



A microscopic view of skin cells, showing a dense network of polygonal cells with prominent nuclei and cell membranes, rendered in a blue monochrome palette.

Through science, **THE RESULTS**

Skin: a delicate precious organ which man has protected since ancient times, first with natural ingredients, then with the most innovative tools. Now it has a valuable ally: the **chemical peel** or **chemoexfoliation**.

A medical procedure that utilises chemical compounds which influence the **histological** and **ultra structural** regeneration of skin by renewing the epidermis and reshaping the micro-architecture of the dermis.



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what is
**CHEMICAL
EXFOLIATION**

Chemoexfoliation, or **chemical peeling**, is a procedure used to improve specific cutaneous conditions through the stratum corneum controlled removal.

The aim of this procedure is altering the appearance of the skin through the regeneration of new epidermis.

Chemoexfoliation, compared to physical or mechanical exfoliation, has evident advantages such as:

- Major efficacy
- Major efficiency
- Easier execution of the procedure
- Versatility:
use of organic acids of various nature for the treatment of different cutaneous problems.
- Independence from the technical expertise of the doctor:
contrary to mechanical or physical peelings (such as laser, micro and dermabrasion) chemoexfoliation does not depend totally on the technical expertise of those who execute the procedure.
- Possibility of integration with auxiliary substances:
“medicated” chemical peelings contain active ingredients that are able to synergize the activity of different acids.

What is
AN ACID

What is an acid?

According to the Brønsted-Lowry theory an acid is a substance able to donate H^+ ions (protons) to another chemical molecule known as a base. Acids are divided according to their nature into organic and inorganic.

The proton H^+ is an atom of hydrogen minus an electron and, consequently, it is positively charged.

Organic acids

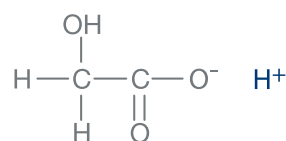
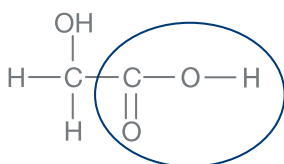
Organic acids are characterized by the presence of carboxyl group $-\text{COOH}$.

This is the part of the molecule capable of releasing the proton H^+ . Actually, many other organic molecules, which lack the carboxyl group, can act like an acid (e.g. resorcinol). This is due to their ability to release a proton, under certain chemico-physical conditions, also from an alcoholic group $-\text{O}-\text{H}$.

INTRINSIC CHARACTERISTICS OF ACIDS

The acidic characteristics of a molecule are expressed by a recognised constant of acid dissociation (K_a) in its logarithmic form, called $\text{p}K_a$. The lower the value of $\text{p}K_a$ is, the greater the acidic potential of a molecule is and thus the more easily a proton is released. In some organic molecules the presence of other functions in addition to the carboxyl group, such as alcohol- OH groups or the presence of atoms such as halogens (chlorine atoms in Trichloroacetic Acid) can make it even easier for the proton to be released from the carboxyl group, thus increasing the acidic potential of the molecule.

ACID	° C	$\text{p}K_a$
Trichloroacetic Acid	25° C	0,70
Pyruvic Acid	25° C	2,49
Salicylic Acid	25° C	2,97
Lactic Acid	25° C	3,08
Glycolic Acid	25° C	3,83
Resorcin	25° C	9,81



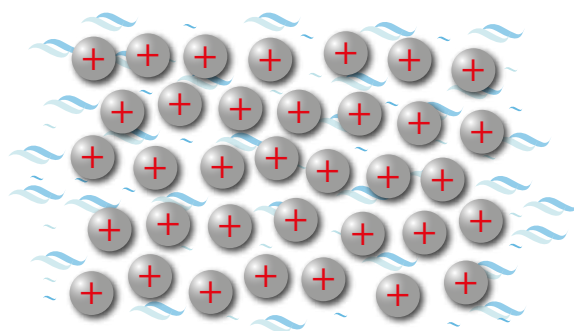
two electrochemical
variables that define the
**ACIDITY OF AN
AQUEOUS SOLUTION**

The main electrochemical parameters used for the evaluation of the acidity in an aqueous system are:

pH

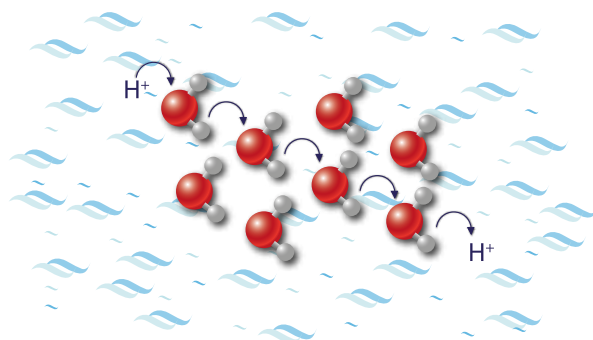
pH describes the acidity of an aqueous solution of an acid.

Practically it defines the concentration of hydrogen ions (H^+) that are free in the solution.



Electrical conductivity

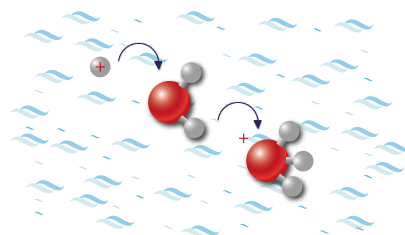
Electrical conductivity, measured in mS/cm, describes the speed with which a proton moves in an aqueous solution.



MOBILITY OF PROTONS: FROM GROTTTHUSS TO ENERPEEL® TECHNOLOGY

The mobility of protons in an aqueous solution has been described for the first time by Grotthuss in 1806.

According to his theory the excessive proton released by the acid in an aqueous solution jumps from one water molecule to another forming, step by step, the instable oxonium ion (H_3O^+), which is positively charged because of the hydrogen atom in excess inherited from the acid.



The oxonium ion, because of its instability, releases on its turn the hydronium ion (proton in excess), that bonds the adjacent water molecule.

This is a dynamic mechanism and the proton released by the acid moves in the network of water molecules with a specific speed, evaluated by electrical conductivity. In aqueous solutions of organic acids, normally used for the procedures of chemoexfoliation, the values of the proton mobility are already expressed at the maximum levels with a consequent ratio between surface trauma and chemoexfoliant efficacy that is skewed towards irritation.

The protons are, in a solution with the ENERPEEL® Technology, kept in a “dormant” state and their mobility increases with a simple though effective mechanism once the product is absorbed by the skin.

“Catabolic” and “anabolic” phase:
**PEELING OCCURS IN
TWO PHASES**

Chemical peeling is described as a controlled insult at cutaneous level and it is determined by the acid nature, by its absorption profile and by the electrochemical behaviour of the proton released by the acid. The action of the solution on the skin can be characterized by two separated phases:

- “Catabolic” phase:
removal of existing cellular and fibrous structures.
- “Anabolic” phase:
replacement with new epidermal cells and with new amorphous and fibrous structures of the dermis.

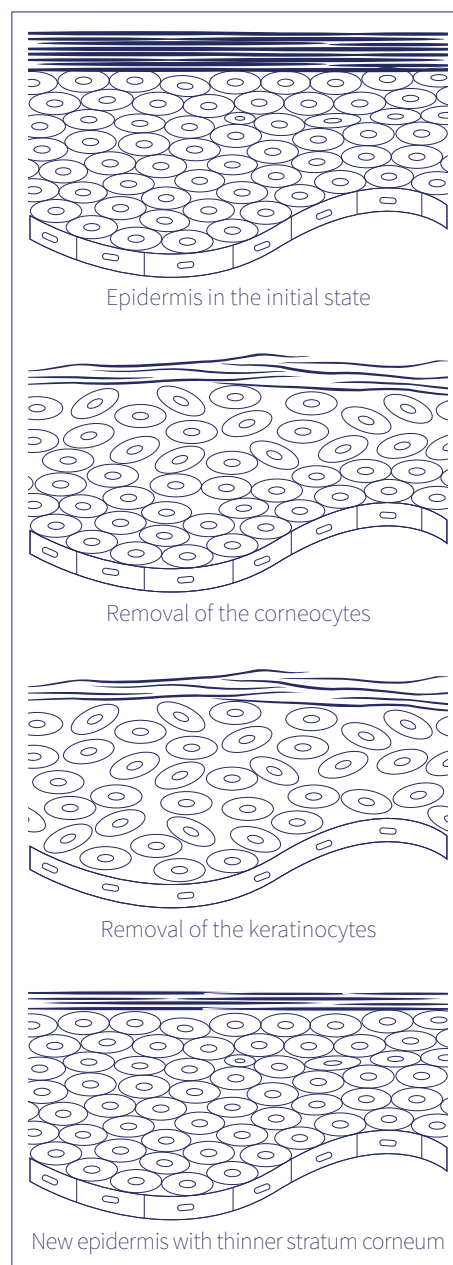
“Catabolic” phase

The proton released by the acid causes the breaking of peptide bonds that bind the various amino acids together to form the protein structure of:

- keratin fibres;
- corneocytes;
- desmosomes (which connect keratinocytes);
- other skin structures.

“Anabolic” phase

It is determined by the differentiation of cells in the basal layer of the epidermis which replace the eliminated keratinocytes during the desquamation phase with the subsequent formation of new stratum corneum through the natural process of keratinization.



the limits of
CHEMOEXFOLIATION

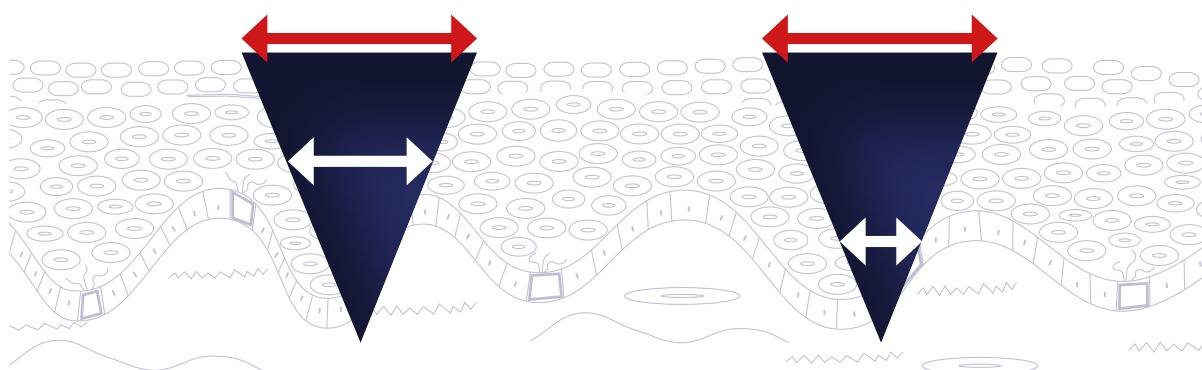
The chemoexfoliation obtained using a simple aqueous solution of an organic acid is characterized by an important limiting effect: the intensity of the surface trauma is not proportional to the agents ability to renew the epidermis and to remodel the dermis.

Three factors that trigger superficial trauma:

- Non homogeneous absorption of the acid.
- High concentration of protons (low pH).
- High mobility of protons.

Intense superficial trauma,
less chemoexfoliant efficiency

In the figure: the imbalance between the effect of irritation (red arrow) and the ability to renew and remodel the skin (white arrow) as the acid reaches the deepest skin layers.



In a standard aqueous solution of an acid, the concentration and the mobility of the protons are already at their peak: when the solution is put in contact with the skin surface, the relationship between superficial trauma and effective chemoexfoliation is skewed towards irritation.

Yesterday's illusion: reducing the surface trauma by buffering the chemoexfoliant solution

To reduce skin trauma, different techniques have been utilized, such as:

- buffering the aqueous system;
- increasing the pH of the aqueous system.

In this way it is possible to reduce the trauma induced by the protons but proportionally it reduces also the efficiency of the overall chemoexfoliant system.

Some other techniques, such as chelating the acid (TCA), have been proposed to solve this problem: none of them have been scientifically demonstrated.

Finally, it is possible to reduce the surface trauma but never changing the shape of the ideogram: **the triangle.**

the revolution of
ENERPEEL® TECHNOLOGY:
**CHEMICAL PEELING CHANGES
FORM**

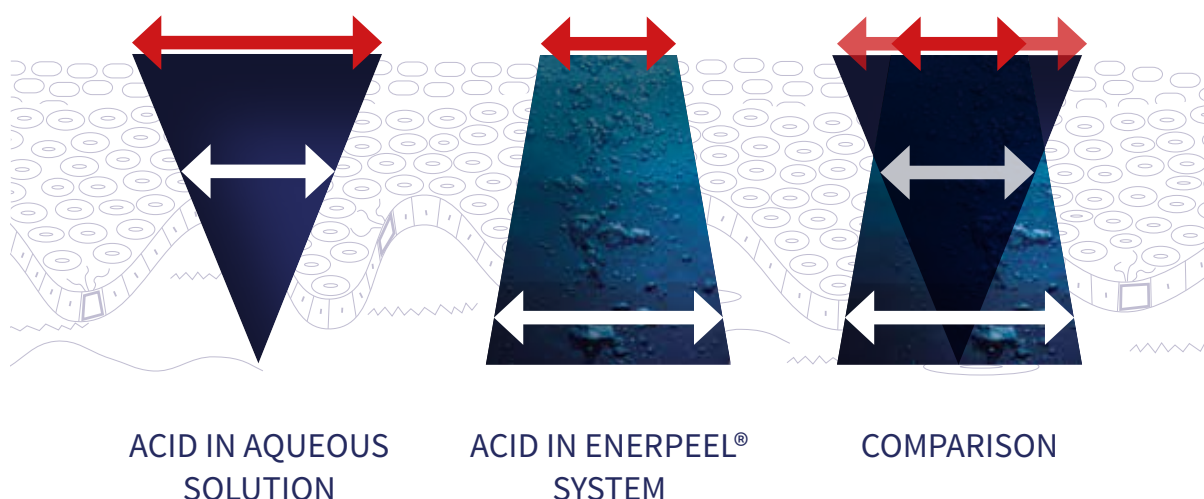
Every problem has a solution, **but we must choose the right one:**

it is possible to reduce the surface trauma and simultaneously to achieve a more efficient chemoexfoliation.

The peeling changes form

The figure demonstrates the ability of ENERPEEL® Technology to improve the chemoexfoliant efficiency, increasing the proportionality between irritation and renewal and remodelling of skin favouring the latter.

The triangular shape is modified to a trapezoidal shape.



ENERPEEL® acts on the only 3 variables that may be influenced:

- More uniform absorption of the acid
- Slowing down the proton mobility inside the ENERPEEL® solution
- Activation of the proton (by increasing its mobility) once absorbed into the skin

With the ENERPEEL® Technology the shape of the ideogram can be changed **from triangular to trapezoidal**.

The ENERPEEL® Technology made it possible to reduce surface trauma rendering simultaneously more efficient the renewal of the epidermis and the remodelling of the dermis.



ENERPEEL®:

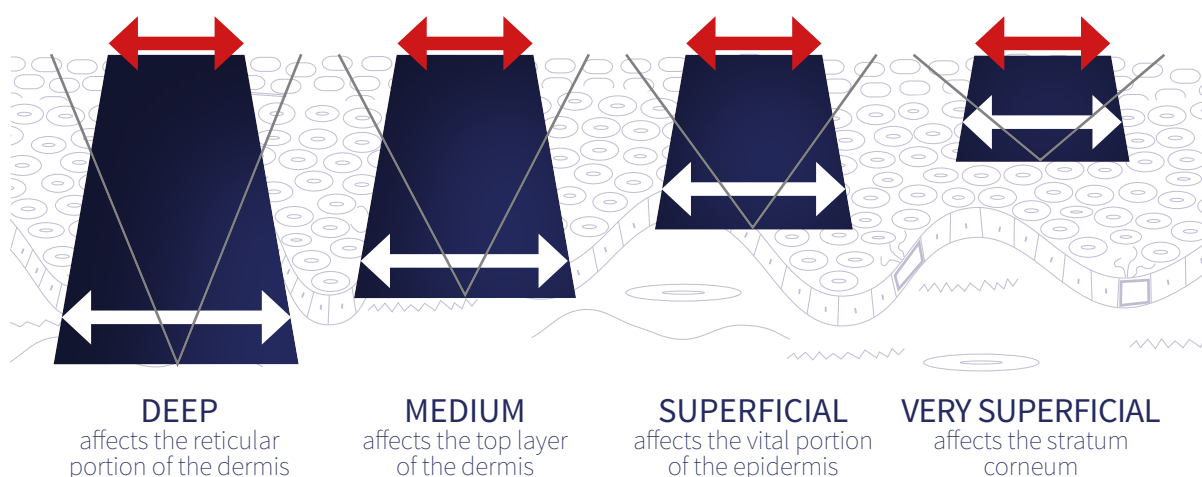
different depth,
always efficient

The level changes? **THE EFFICACY REMAINS.**

The chemoexfoliation can act at different levels of the skin structure:

ENERPEEL®:
different depth, always efficient

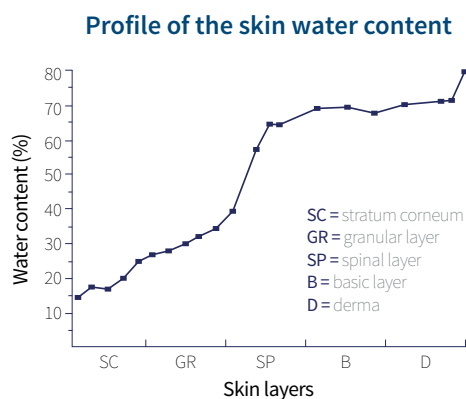
Even if chemoexfoliation is performed at different skin levels (medium, superficial, very superficial) the ENERPEEL® Technology always allows more efficient chemoexfoliation with reduced trauma intensity.



ENERPEEL® manages the proton to obtain excellent results

There is only one way to get an efficient remodelling peel: to act in a targeted manner in the deepest layers of the skin. ENERPEEL® Technology promotes this: therefore it delivers cutting edge technology that activates the proton as the acid penetrates into the skin and comes into contact with higher amounts of water.

Activating the proton at different layers of cellular and protein structures means ensuring a controlled and efficient chemical, biochemical and physiological action, but also has a less traumatic action.



ENERPEEL®:

a complete set of
electrochemical assessments

ENERPEEL® Technology modifies the **ELECTROCHEMICAL PREROGATIVES OF ORGANIC ACIDS**

pH changes

Diluting the starting solution up to 90% shows that pH increases relatively, presenting values similar to those of a simple aqueous solution of the same acid, at the same concentration.

In the graphic can be observed the behaviour of ENERPEEL® PA, Pyruvic Acid 50%.

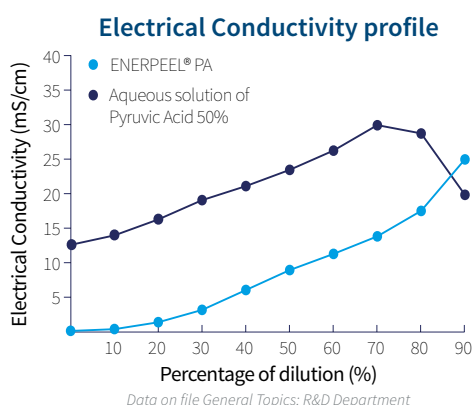
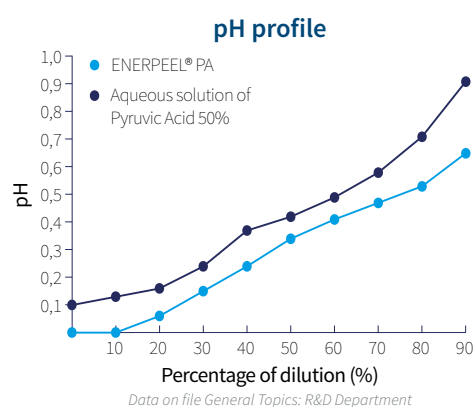
Proton mobility

The proton mobility, assessed with electrical conductivity and expressed in mS/cm, is noticeably slowed down in ENERPEEL® PA if compared to a simple solution of Pyruvic Acid 50% in water.

With ENERPEEL® Technology the proton that is in a “dormant state”, will “awake” and acquire mobility, interacting with ever higher amounts of water.

At the highest dilutions it surpasses the mobility of a proton in a simple aqueous solution of an acid.

Comparison between the electrochemical variables of Pyruvic Acid in the ENERPEEL® system and in a normal aqueous solution





ENERPEEL®:

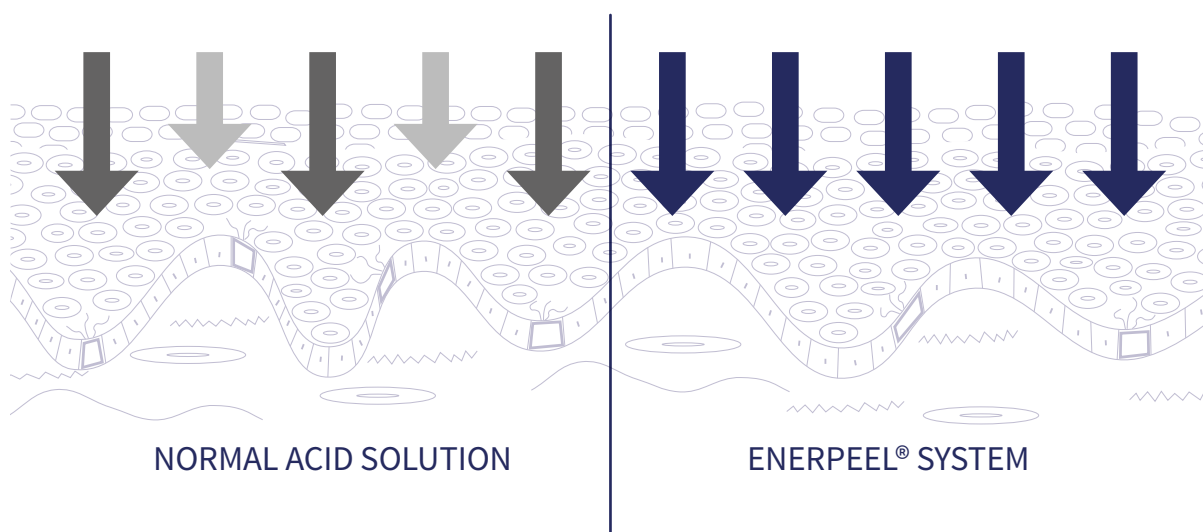
a complete series of
functional evaluations

ENERPEEL®: MORE HOMOGENEOUS ABSORPTION

Profile of the acid absorption

In the first figure: the absorption of a normal acid solution.

In the second figure: the action of ENERPEEL® Technology that ensures a more homogeneous absorption of the acid in the skin.

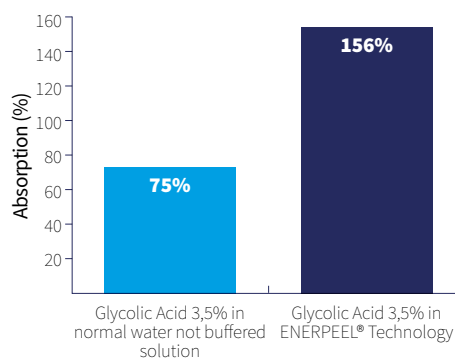


With the ENERPEEL® Technology it is possible to make more uniform the permeation through the skin of polar compounds like the organic acids.

Thanks to the use of a carrier, a particular patented molecule by General Topics that is able to permeate both the polar and apolar skin structures (corneal lipids), it is possible to obtain a more homogeneous absorption of the organic acids used in chemoexfoliant procedures.

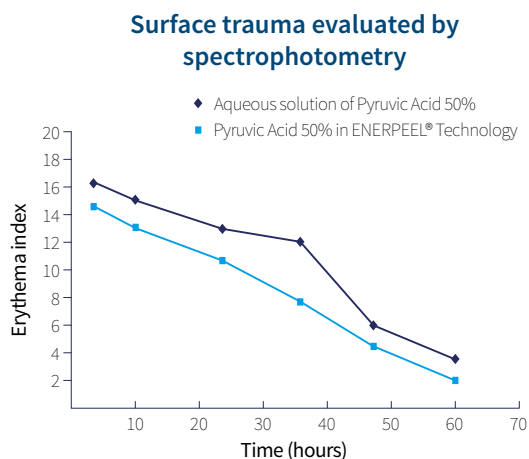
In the trial in question, the rate of absorption of Glycolic Acid carried out with ENERPEEL® Technology, results increased by more than 100%.

Absorption through the membrane of the stratum corneum /epidermis



Data on file General Topics: University of Catania, Department of Pharmaceutical Sciences, Prof. Francesco Bonina

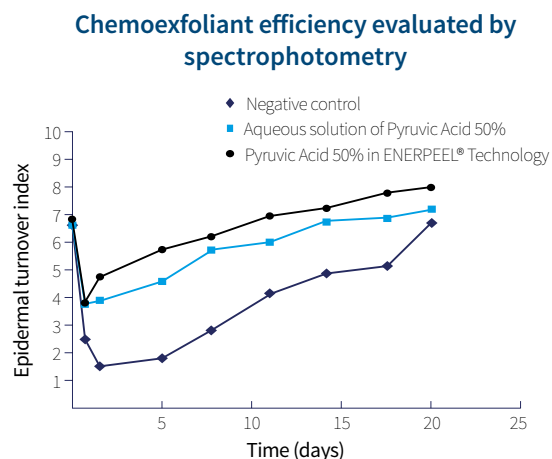
ENERPEEL®: LESS SURFACE TRAUMA



Data on file General Topics: University of Catania, Department of Pharmaceutical Sciences, Prof. Francesco Bonina

The graphic at the right shows that the intensity of the surface trauma (expressed as erythema index, I.E.) is always less, in a time between 4 and 60 hours after peeling, when the acid is conveyed by ENERPEEL® Technology. After 60 hours, the intensity of the surface trauma is reduced about 50%.

ENERPEEL®: INCREASES THE EPIDERMAL TURNOVER

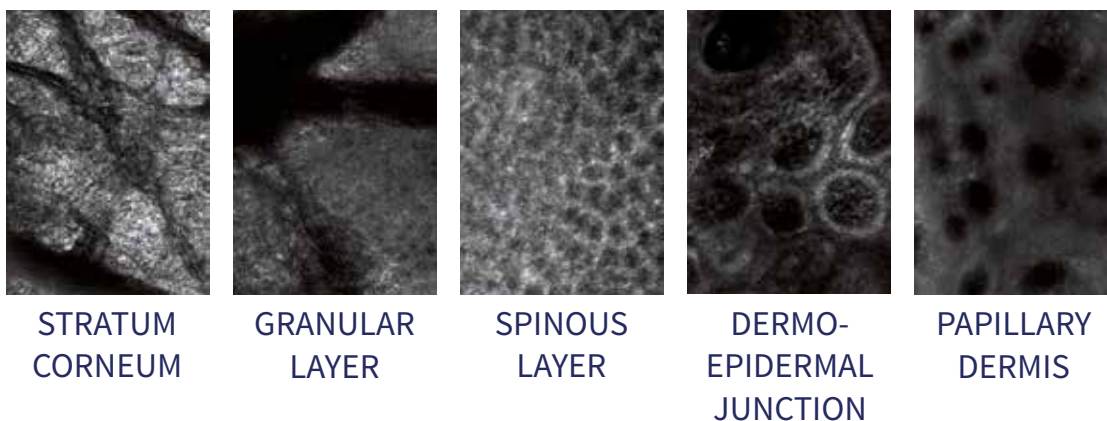


Data on file General Topics: University of Catania, Department of Pharmaceutical Sciences, Prof. Francesco Bonina

The chemoexfoliant efficiency has been evaluated according to an innovative procedure that can test the speed of epidermal turnover. The application of dihydroxyacetone (DHA) on the skin causes the formation of a coloured compound called Schiff base, which has an absorption spectrum similar to that of melanin. By means of reflectance spectrophotometry was evaluated at different times, the intensity of skin colour after application of ENERPEEL® PA (Pyruvic Acid 50%) and of a simple aqueous solution of the same acid at the same concentration. The greater the colour intensity (I.M.) is, the lower the cutaneous desquamation and therefore the chemoexfoliant efficiency is. The graphic at the right points out that the amount of desquamated cells is, at any time (from the 2nd to the 20th day following the treatment), increased when the acid is conveyed by ENERPEEL® Technology.

ENERPEEL®: PROVEN EFFECTIVENESS WITH CUTTING EDGE TECHNIQUES

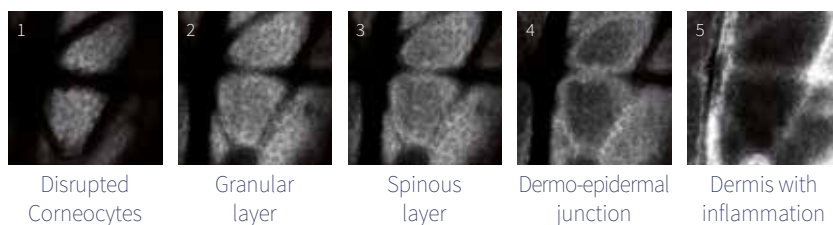
Epidermal-dermal morphology changes after application of ENERPEEL® TCA Strong



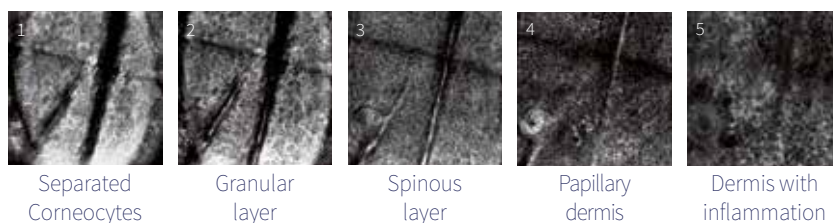
Data on file General Topics: Prof. Enzo Berardesca-Istituto Ospitaliero Dermosifilopatico of S.Maria e S.Gallicano – Rome

Confocal laser microscopy is an innovative instrumental method to analyse in vivo the skin, in a non-invasive way, with an almost histological resolution to the depth of the papillary dermis. By using this technique, changes on cellular level were verified immediately after application of ENERPEEL® products and after 24 hours.

Images below are obtained with confocal laser microscopy of the different skin layers after application of ENERPEEL® TCA Strong, Trichloroacetic Acid 40%.



Images taken immediately after application of ENERPEEL® TCA Strong, Trichloroacetic Acid 40%.



Images taken 24 hours after application of ENERPEEL® TCA Strong, Trichloroacetic Acid 40%.

Vialbrush System

medical devices

TECHNICAL SHEETS





20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® MA
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® MA
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

Indications

Rosacea
(erythematous-telangiectatic phase)

Post-laser treatment (after a
complete re-epithelialization)

Chemoexfoliation of sensitive and
hyper-reactive skin

Refreshing all year round*

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermilion.

** In the absence of excessive UV radiation.*

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.



pH (10% dilution in aqueous solution): 2,00-2,15

Electrical conductivity (10% dilution in aqueous solution): 2,50-3,10 mS/cm

Appearance: pale yellow transparent aqueous solution

27

ENERPEEL® MA



chemoexfoliant solution based on **MANDELIC ACID**

Composition	MANDELIC ACID 40%; MSM (Dimethyl Sulfone)
Chemoexfoliation	Very superficial, superficial
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	2-5 minutes between one layer and the other; 2-10 minutes before neutralization. According to the patient's reaction
N° of suggested procedures	2-4, every minimum 10-20 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: mild erythema may occur immediately after the chemoexfoliation, but generally it is of low intensity and short duration.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.)
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components (particularly Mandelic Acid).
- Other medical considerations.

Indications



Main use in the cosmetic field for:

Mild chrono-aging

Mild photo-aging

20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® GA-30
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® GA-30
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

GA-30

CE 0373



pH (10% dilution in aqueous solution): 1,75-2,10
Electrical conductivity (10% dilution in aqueous solution): 2,20-3,80 mS/cm
Appearance: colourless transparent aqueous solution

ENERPEEL® GA-30



chemoexfoliant solution based on
GLYCOLIC ACID

Composition	GLYCOLIC ACID 30%
Chemoexfoliation	Very superficial, superficial
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	1-3 minutes between one layer and the other; 1-5 minutes before neutralization. According to the patient's reaction. If "frosting" appears when it is undesired, proceed immediately to remove
N° of suggested procedures	1-4, every minimum 15 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, Herpes and bacterial infections, post inflammatory hyperpigmentation (usually temporary), acneiform eruptions, changes in the skin texture.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Other medical considerations.



Indications

Main use in the cosmetic field for:

Mild chrono-aging

Mild photo-aging

20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® GA-40
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® GA-40
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

GA-40

CE 0373



pH (10% dilution in aqueous solution): 1,60-2,10
Electrical conductivity (10% dilution in aqueous solution): 3,30-4,90 mS/cm
Appearance: colourless transparent aqueous solution

ENERPEEL® GA-40



chemoexfoliant solution based on
GLYCOLIC ACID

Composition	GLYCOLIC ACID 40%
Chemoexfoliation	Very superficial, superficial
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	1-3 minutes between one layer and the other; 1-5 minutes before neutralization. According to the patient's reaction. If "frosting" appears when it is undesired, proceed immediately to remove
N° of suggested procedures	1-4, every minimum 15 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, Herpes and bacterial infections, post inflammatory hyperpigmentation (usually temporary), acneiform eruptions, changes in the skin texture.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Other medical considerations.



Indications

Main use in the medical field for:

Moderate chrono-aging

Moderate photo-aging

20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® GA-50
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® GA-50
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

GA-50

CE 0373



pH (10% dilution in aqueous solution): 1,60-2,10
Electrical conductivity (10% dilution in aqueous solution): 3,30-4,90 mS/cm
Appearance: colourless transparent aqueous solution

ENERPEEL® GA-50



chemoexfoliant solution based on
GLYCOLIC ACID

Composition	GLYCOLIC ACID 50%
Chemoexfoliation	Superficial, superficial-medium
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	1-2 minutes between one layer and the other; 1-3 minutes before neutralization. According to the patient's reaction. If "frosting" appears when it is undesired, proceed immediately to remove
N° of suggested procedures	1-3, every minimum 15 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, Herpes and bacterial infections, post inflammatory hyperpigmentation (usually temporary), acneiform eruptions, changes in the skin texture.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Cigarette smoke.
- Frequent sun exposure.
- Connective tissue disorders.
- Oral estrogen intake.
- Other medical considerations.

Indications

Main use in the medical field for:

Moderate chrono-aging

Moderate photo-aging



20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® GA-70
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® GA-70
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

GA-70

CE 0373



pH (10% dilution in aqueous solution): 1,60-1,90
Electrical conductivity (10% dilution in aqueous solution): 5,10-6,70 mS/cm
Appearance: colourless transparent aqueous solution

ENERPEEL® GA-70



chemoexfoliant solution based on
GLYCOLIC ACID

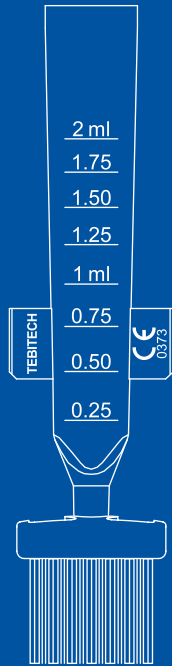
Composition	GLYCOLIC ACID 70%
Chemoexfoliation	Superficial, superficial-medium
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	1-2 minutes between one layer and the other; 1-3 minutes before neutralization. According to the patient's reaction. If "frosting" appears when it is undesired, proceed immediately to remove
N° of suggested procedures	1-3, every minimum 15 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, Herpes and bacterial infections, post inflammatory hyperpigmentation (usually temporary), acneiform eruptions, changes in the skin texture.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Cigarette smoke.
- Frequent sun exposure.
- Connective tissue disorders.
- Oral estrogen intake.
- Other medical considerations.

Indications



**Suitable for oily skin
characterized by:**

Seborrhoea

Acne scars and hyperkeratosis

Mild actinic keratosis

Moderate crono and photo-aging

20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® PA
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® PA
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion. Pyruvic Acid releases vapours that can be irritating to the respiratory system; apply the device in a well ventilated environment. During its application in the upper lip area, place cotton balls in the nostrils in order to reduce the risk of respiratory irritation.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.



pH (10% dilution in aqueous solution): 0,55-1,45

Electrical conductivity (10% dilution in aqueous solution): 14,00-27,00 mS/cm

Appearance: pale yellow transparent aqueous solution

37

ENERPEEL® PA



chemoexfoliant solution based on PYRUVIC ACID

Composition	PYRUVIC ACID 50%
Chemoexfoliation	Superficial, superficial-medium
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	1-3 minutes between one layer and the other; 1-5 minutes before neutralization. According to the patient's reaction. If "frosting" appears when it is undesired, proceed immediately to remove
N° of suggested procedures	2-3, every minimum 20 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, herpetic and bacterial infections, post-inflammatory hyperpigmentation (usually temporary), epidermolysis.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Dry skin with the presence of microlesions.
- Other medical considerations.

Indications



Mild-moderate comedonic and inflammatory acne located on the face
(indicated in the early adolescence and on sensitive skins)

20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® SA-15
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® RW Remover wipes
3 ml remover wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® SA-15
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® RW Remover wipes
3 ml remover wipes

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermilion. It is recommended to keep the patient hydrated with 8-10 glasses of water during the day when chemoexfoliation with ENERPEEL® SA-15 is performed. Due to the presence of Salicylic Acid, it is recommended to use the medical device on limited skin areas (for example, for each peel only face or neck). When the medical device is applied on large areas, the doctor should carefully evaluate the possibility of getting a higher absorption of Salicylic Acid: consequently, the time between one treatment and the following one should be cautiously prolonged. The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

SA-15

CE 0373

ENERPEEL® SA-15



chemoexfoliant solution based on SALICYLIC ACID

Composition	SALICYLIC ACID 15% Triethyl Citrate; Ethyl Linoleate; GT-peptide-10
Chemoexfoliation	Very superficial, superficial
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or removal	1-3 minutes, according to the patient's reaction. The formation of a white precipitate (Salicylic acid) is due to the evaporation of the solution, not to be confused with the "frosting"
N° of suggested procedures	4, every minimum 10 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then remove the precipitate with ENERPEEL® RW Remover Wipes

Possible complications: erythema usually of short duration (3-4 days), dry skin. A sensation of itching and burning of medium intensity can be felt by the patient during the application.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components (particularly Salicylic Acid).
- Salicylism.
- Do not use in patients younger than 14 years old.
- Do not perform chemoexfoliation in case of anticoagulant therapy.
- Other medical considerations.

Indications

Mild-moderate comedonic and inflammatory acne localized on the face



20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® SA
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® RW Remover wipes
3 ml remover wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® SA
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® RW Remover wipes
3 ml remover wipes

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermilion. It is recommended to keep the patient hydrated with 8-10 glasses of water during the day when chemoexfoliation with ENERPEEL® SA is performed. Due to the presence of Salicylic Acid, it is recommended to use the medical device on limited skin areas (for example, for each peel only face or neck). When the medical device is applied on large areas, the doctor should carefully evaluate the possibility of getting a higher absorption of Salicylic Acid: consequently, the time between one treatment and the following one should be cautiously prolonged. The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

ENERPEEL® SA



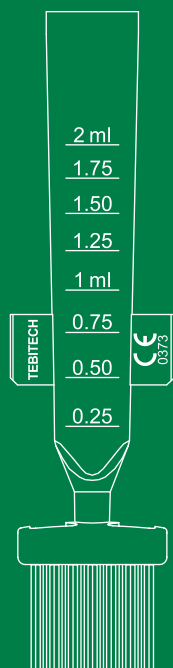
chemoexfoliant solution based on SALICYLIC ACID

Composition	SALICYLIC ACID 30% Triethyl Citrate; Ethyl Linoleate; GT-peptide-10
Chemoexfoliation	Superficial, superficial-medium
Chemoexfoliant solution layers	<i>Monolayer</i> : ~ 0,5 ml <i>Multilayer (max 3 layers)</i> : from 0,5 ml to 2 ml
Suggested application time before the next layer and/or removal	1-3 minutes, according to the patient's reaction. The formation of a white precipitate (Salicylic acid) is due to the evaporation of the solution, not to be confused with the "frosting"
N° of suggested procedures	4, every minimum 10 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then remove the precipitate with ENERPEEL® RW Remover Wipes

Possible complications: erythema usually of short duration (3-4 days), dry skin. A sensation of itching and burning of medium intensity can be felt by the patient during the application of the medical device.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components (particularly Salicylic Acid).
- Salicylism.
- Do not use in patients younger than 14 years old.
- Do not perform chemoexfoliation in case of anticoagulant therapy.
- Other medical considerations.



20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® JR
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® RW Remover wipes
3 ml remover wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® JR
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® RW Remover wipes
3 ml remover wipes

Indications

Superficial hyperpigmentation and melasma

Moderate chrono-aging

Moderate photo-aging

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermilion. It is recommended to keep the patient hydrated with 8-10 glasses of water during the day when chemoexfoliation with ENERPEEL® JR is performed. Due to the presence of Salicylic Acid and Resorcinol, it is recommended to use the medical device on limited skin areas (for example, for each peel only face or neck or arms or back). When the medical device is applied on large areas, the doctor should carefully evaluate the possibility of getting a higher absorption of Salicylic Acid: consequently, the time between one treatment and the following one should be cautiously prolonged. The combination of ENERPEEL® JR with other medical devices, for example ENERPEEL® TCA, can induce a more intense response of the skin during the successive treatment. For this reason, intervals of time between one treatment or one peel and the following ones should be carefully evaluated by the doctor according to the subjective characteristics of the patient.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

ENERPEEL® JR



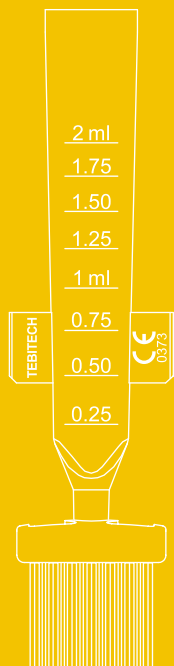
chemoexfoliant solution based on
**SALICYLIC ACID, LACTIC ACID,
 RESORCINOL**

Composition	SALICYLIC ACID 15% LACTIC ACID 20%; RESORCINOL 14%
Chemoexfoliation	Superficial, superficial-medium
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or removal	2-3 minutes, according to the patient's reaction. The formation of a white precipitate (Salicylic acid) is due to the evaporation of the solution, not to be confused with the "frosting", possible eventuality in case of multilayer application
N° of suggested procedures	1-3, every minimum 20 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then remove the precipitate with ENERPEEL® RW Remover Wipes

Possible complications: erythema usually of short duration (3-4 days), dry skin. A sensation of itching and burning of medium intensity can be felt by the patient during the application.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components (particularly Salicylic Acid and Resorcinol).
- Salicylism.
- Do not use the product in patients under 14 years old.
- Do not perform chemoexfoliation in case of anticoagulant therapy.
- Thyroid disturbances.
- The continued use of resorcinol can induce contact dermatitis.
- Other medical considerations.



20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® TCA
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® TCA
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

Indications

Moderate hyperpigmentation

Moderate actinic keratosis

Moderate post-acne scars

Moderate/severe chrono-aging

Moderate/severe photo-aging

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion. Avoid the application on cutaneous units characterized by sebaceous hyperplasia or thin areas that present seborrhoeic keratosis.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

pH (10% dilution in aqueous solution): 0,95-1,10

Electrical conductivity (10% dilution in aqueous solution): 46,00-66,00 mS/cm

Appearance: pale yellow transparent aqueous solution

45

ENERPEEL® TCA



chemoexfoliant solution based on TRICHLOROACETIC ACID

Composition	TRICHLOROACETIC ACID 25%
Chemoexfoliation	Superficial, superficial-medium, medium
Chemoexfoliant solution layers	<i>Monolayer: ~ 0,5 ml</i> <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	1-4 minutes, according to the patient's reaction. Neutralize before "frosting" appears
N° of suggested procedures	1-2, every minimum 30 days
N° of suggested sessions	1-2, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, Herpes and bacterial infections, post inflammatory hyperpigmentation (usually temporary), acneiform eruptions, prolonged sensitiveness to environmental agents (light, wind, etc.), telangiectasia, atrophic scars, permanent hypopigmentation, change in skin texture, increased pore size, hypertrophic scars, demarcation lines of the areas subjected to chemoexfoliation.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Other medical considerations.



20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® TCA-LP
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® TCA-LP
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

Indications

Moderate hyperpigmentation

Moderate actinic keratosis

Moderate post-acne scars

Moderate/severe chrono-aging

Moderate/severe photo-aging

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion. Avoid the application on cutaneous units characterized by sebaceous hyperplasia or thin areas that present seborrhoeic keratosis.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

TCA-LP

CE 0373

pH (10% dilution in aqueous solution): 0,85-1,35

Electrical conductivity (10% dilution in aqueous solution): 22,50-62,50 mS/cm

Appearance: pale yellow transparent aqueous solution

47

ENERPEEL® TCA-LP



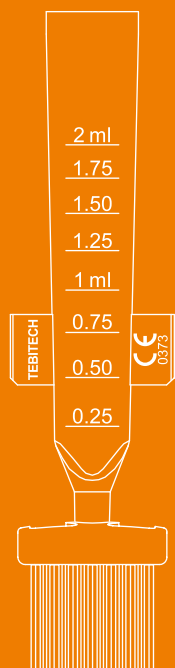
chemoexfoliant solution based on TRICHLOROACETIC ACID

Composition	TRICHLOROACETIC ACID 25% MSM (Dimethyl Sulfone)
Chemoexfoliation	Superficial, superficial-medium, medium
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 3 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	1-4 minutes, according to the patient's reaction. Neutralize before "frosting" appears
N° of suggested procedures	1-2, every minimum 30 days
N° of suggested sessions	1-2, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, Herpes and bacterial infections, post inflammatory hyperpigmentation (usually temporary), acneiform eruptions, prolonged sensitiveness to environmental agents (light, wind, etc.), telangiectasia, atrophic scars, permanent hypopigmentation, change in skin texture, increased pore size, hypertrophic scars, apparition of demarcation lines on the areas submitted to chemoexfoliation.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Other medical considerations.



20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® TCA Strong
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® TCA Strong
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

Indications

Severe hyperpigmentation

Severe actinic keratosis

Severe post-acne scars

Severe chrono-aging

Severe photo-aging

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion. Avoid the application on cutaneous units characterized by sebaceous hyperplasia or thin areas that present seborrhoeic keratosis.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.



pH (10% dilution in aqueous solution): 0,75-0,90

Electrical conductivity (10% dilution in aqueous solution): 87,50-157,50 mS/cm

Appearance: pale yellow transparent aqueous solution

49

ENERPEEL® TCA STRONG



chemoexfoliant solution based on TRICHLOROACETIC ACID

Composition	TRICHLOROACETIC ACID 40%
Chemoexfoliation	Superficial-medium, medium
Chemoexfoliant solution layers	<i>Monolayer:</i> ~ 0,5 ml <i>Multilayer (max 2 layers):</i> from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	1-4 minutes, according to the patient's reaction. Neutralize before "frosting" appears
N° of suggested procedures	1-2, every minimum 30 days
N° of suggested sessions	1-2, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, Herpes and bacterial infections, post inflammatory hyperpigmentation (usually temporary), acneiform eruptions, prolonged sensitiveness to environmental agents (light, wind, etc.), telangiectasia, atrophic scars, permanent hypopigmentation, change in skin texture, increased pore size, hypertrophic scars, apparition of demarcation lines on the areas submitted to chemoexfoliation.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Cigarette smoke.
- Frequent sun exposure.
- Connective tissue disorders.
- Oral estrogen intake.
- Other medical considerations.



20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® HANDS
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® HANDS
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

Area of use

Back of hands

Indications

Superficial-medium
hyperpigmentation

Actinic keratosis

Chrono-aging

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion. This device is exclusively dedicated to treat the hands. The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.



pH (10% dilution in aqueous solution): 0,85-1,25

Electrical conductivity (10% dilution in aqueous solution): 23,00-53,00 mS/cm

Appearance: pink/light orange transparent aqueous solution

ENERPEEL® HANDS



chemoexfoliant solution based on
**TRICHLOROACETIC ACID,
LACTIC ACID, KOJIC ACID**

Composition	TRICHLOROACETIC ACID 20%; LACTIC ACID 10%; KOJIC ACID
Chemoexfoliation	Superficial, superficial-medium,
Chemoexfoliant solution layers	<i>Monolayer</i> : ~ 0,5 ml <i>Multilayer (max 3 layers)</i> : from 0,5 ml to 2 ml
Suggested application time before the next layer and/or neutralization	1-2 minutes between one layer and the other; 2-4 minutes before neutralization. According to the patient's reaction. Neutralize as soon as "frosting" appears
N° of suggested procedures	1-3, every minimum 20 days
N° of suggested sessions	2-3, every minimum 2 months
Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment.
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Other medical considerations.



20 VIALS KIT:

- n° 32 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 20 ENERPEEL® NECK
2 ml vials
- n° 32 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 32 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

5 VIALS KIT:

- n° 8 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n° 5 ENERPEEL® NECK
2 ml vials
- n° 8 ENERPEEL® Brush Applicators
for Vialbrush system
- n° 8 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

Area of use

Neck and décolletage

Indications

Superficial-medium
hyperpigmentation

Moderate actinic keratosis

Chrono and photo-aging

IMPORTANT WARNINGS

Do not let the solution come into contact with the cornea or vermillion. This device is exclusively dedicated to treat the neck and décolletage area.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

ENERPEEL® NECK

CE 0373

pH (10% dilution in aqueous solution): 1,25-1,50

Electrical conductivity (10% dilution in aqueous solution): 10,50-19,50 mS/cm

Appearance: pale yellow transparent aqueous solution

53

ENERPEEL® NECK



chemoexfoliant solution based on
**PYRUVIC ACID, LACTIC ACID
FERULIC ACID**

Composition

PYRUVIC ACID 30%;
LACTIC ACID 10%;
FERULIC ACID

Chemoexfoliation Superficial, superficial-medium,

Chemoexfoliant solution layers

Monolayer: ~ 0,5 ml
Multilayer (max 3 layers):
from 0,5 ml to 2 ml

Suggested application time before the next layer and/or neutralization

2-5 minutes, according to the patient's reaction

N° of suggested procedures

3, every minimum 20 days

N° of suggested sessions

2-3, every minimum 2 months

Application method

Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant solution using the special applicator brush. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, usually of short duration.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment.
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Other medical considerations.

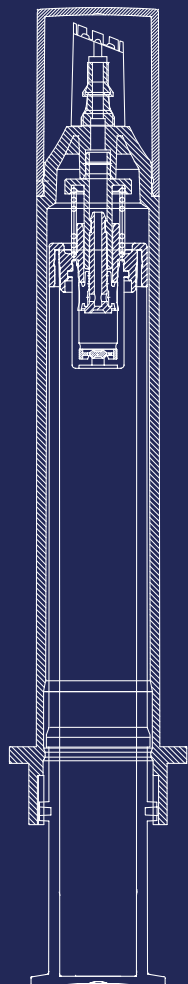


TebiPen™ System

medical devices

TECHNICAL SHEETS





Area of use

Peri-ocular and peri-labial area

Indications

Moderate hyperpigmentation

Chrono-aging

Photo-aging

THE KIT CONTAINS:

- n°20 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n°1 ENERPEEL® EL
Syringe-shaped delivery device
- n°2 ENERPEEL® EL
12,5 ml cartridges
- n°20 ENERPEEL® Brush Applicators
for Vialbrush system
- n°20 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

IMPORTANT WARNINGS

Do not apply the device on damaged skin. Do not let the solution come into contact with the cornea or vermillion. Avoid areas of thin skin with sebaceous hyperplasia and areas characterized by seborrhoeic keratosis.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

pH (pure solution): 0,70-2,70

Appearance: pale yellow, slightly opalescent, gel

57

ENERPEEL® EL



chemoexfoliant gel based on
**TRICHLOROACETIC ACID,
LACTIC ACID**

Composition	TRICHLOROACETIC ACID 3,75%, LACTIC ACID 15%
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Chemoexfoliation	Superficial-medium, medium
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Suggested n° of layers	<i>Multilayer (max 4 layers):</i> 0,15 ml each
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Suggested application time before the next layer and/or neutralization	1-2 minutes, between each layer; 1-5 minutes before neutralization. According to the patient's reaction. Quickly neutralize in case of unexpected "frosting"
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N° of suggested procedures	4, every minimum 7-14 days
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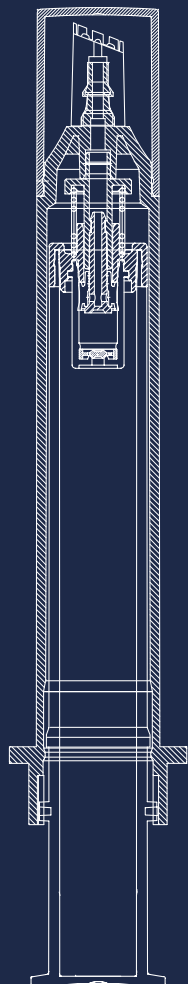
N° of suggested sessions	2-3, every minimum 2 months
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Application method	Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant gel onto the periocular and perilabial portion using the appropriate device. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes
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Possible complications: swelling, erythema, usually of short duration.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Other medical considerations.



Area of use

Peri-ocular and peri-labial area

Indications

Superficial hyperpigmentation

Chrono-aging

Photo-aging

Features

THE KIT CONTAINS:

- n°20 ENERPEEL® PS Preparatory Solution
3 ml delipidating wipes
- n°1 ENERPEEL® EL-PLUS
Syringe-shaped delivery device
- n°2 ENERPEEL® EL-PLUS
12,5 ml cartridges
- n°20 ENERPEEL® Brush Applicators
for Vialbrush system
- n°20 ENERPEEL® NEU Neutralizer
3 ml neutraliser wipes

Exerts a more intense but less lasting action than ENERPEEL® EL

IMPORTANT WARNINGS

Do not apply the device on damaged skin. Do not let the solution come into contact with the cornea or vermilion. Avoid areas of thin skin with sebaceous hyperplasia and areas characterized by seborrhoeic keratosis.

The provided information is meant as an indication. It is up to the doctor to decide how to proceed depending on the characteristics of the patient and the skin problem to be treated.

EL-PLUS^{CE}

pH (pure solution): 1,00-2,00

Appearance: pale yellow, slightly opalescent, gel

ENERPEEL® EL-PLUS



chemoexfoliant gel based on
MANDELIC ACID,
MALIC ACID, LACTIC ACID

Composition

MANDELIC ACID 20%,
MALIC ACID 15%
LACTIC ACID 10%

Chemoexfoliation

Superficial-medium

Suggested n° of layers

Multilayer (from 2 to 4 layers):
0,15 ml each

Suggested application time before the next layer and/or neutralization

1-2 minutes, between each layer; 1-5 minutes before neutralization. According to the patient's reaction. Quickly neutralize in case of unexpected "frosting"

N° of suggested procedures

2, every minimum 10-20 days

N° of suggested sessions

2-3, every minimum 2 months

Application method

Prepare the skin removing the lipids with ENERPEEL® PS Preparatory Solution wipes, apply the chemoexfoliant gel onto the periocular and perilabial portion using the appropriate device. Wait until the set time has passed, then neutralize with ENERPEEL® NEU Neutralizer wipes

Possible complications: swelling, erythema, usually of short duration.

Contraindications:

- Presence and/or family history of Herpes simplex in the area to be treated, 4-6 weeks after healing.
- Recent (less than 6 months ago) surgical or laser treatment (blepharoplasty, facial lift etc.).
- Botulinum toxin (botox): 1-2 weeks after.
- Wax, depilation: 3 weeks after.
- Collagen injections: before or after 2 weeks.
- Combined therapy with isotretinoin (at least 6 months after discontinuation of taking the drug).
- Immunosuppressive diseases.
- Previous radiotherapy of the skin portion to be exfoliated that might compromise the physiological regeneration of the skin.
- Family history of developing keloids or hypertrophic scars.
- Family history of developing post-inflammatory hyperpigmentation.
- Pregnancy.
- Breastfeeding.
- Allergy and/or known hypersensitivity to one or more of the components.
- Other medical considerations.

fields
OF USE



Mandelic Acid

MSM Dimethyl Sulfone



MA

- Rosacea (erythematous-telangiectatic phase)
- Post-laser treatment (after a complete re-epithelialization)
- Chemoexfoliation of sensitive and hyper-reactive skin
- Refreshing all year round

Glycolic Acid



GA-30 GA-40

Main use in the
cosmetic field for:

- Mild chrono-aging
- Mild photo-aging

GA-50 GA-70

Main use in the
medical field for:

- Moderate chrono-aging
- Moderate photo-aging

Pyruvic Acid



PA

Suitable for **oily skin** characterized by:

- Seborrhoea
- Acne scars and hyperkeratosis
- Mild actinic keratosis
- Moderate chrono and photo-aging

Salicylic Acid

Triethyl Citrate,
Ethyl Linoleate,
GT-Peptide-10



SA-15 SA

- Mild-moderate comedonic and inflammatory acne located on the face

Salicylic acid Lactic acid Resorcin

Modified jessner solution



JR

- Superficial hyperpigmentation and melasma
- Moderate chrono-aging
- Moderate photo-aging

Trichloroacetic Acid



TCA TCA-LP

- Moderate hyperpigmentation
- Moderate actinic keratosis
- Moderate post-acne scars
- Moderate/severe chrono-aging
- Moderate/severe photo-aging

TCA STRONG

- Severe hyperpigmentation
- Severe actinic keratosis
- Severe post-acne scars
- Severe chrono-aging
- Severe photo-aging

area OF USE

Periocular and
labial areas



EL

- Moderate hyperpigmentation
- Chrono-aging
- Photo-aging

EL-PLUS

- Superficial hyperpigmentation
- Chrono-aging
- Photo-aging

Neck and
décolletage



NECK

- Superficial-medium hyperpigmentation
- Moderate actinic keratosis
- Chrono and photo-aging

Back of hands



HANDS

- Superficial-medium hyperpigmentation
- Actinic keratosis
- Chrono-aging

pathologies to treat SPECIFIC ENERPEEL®

Rosacea

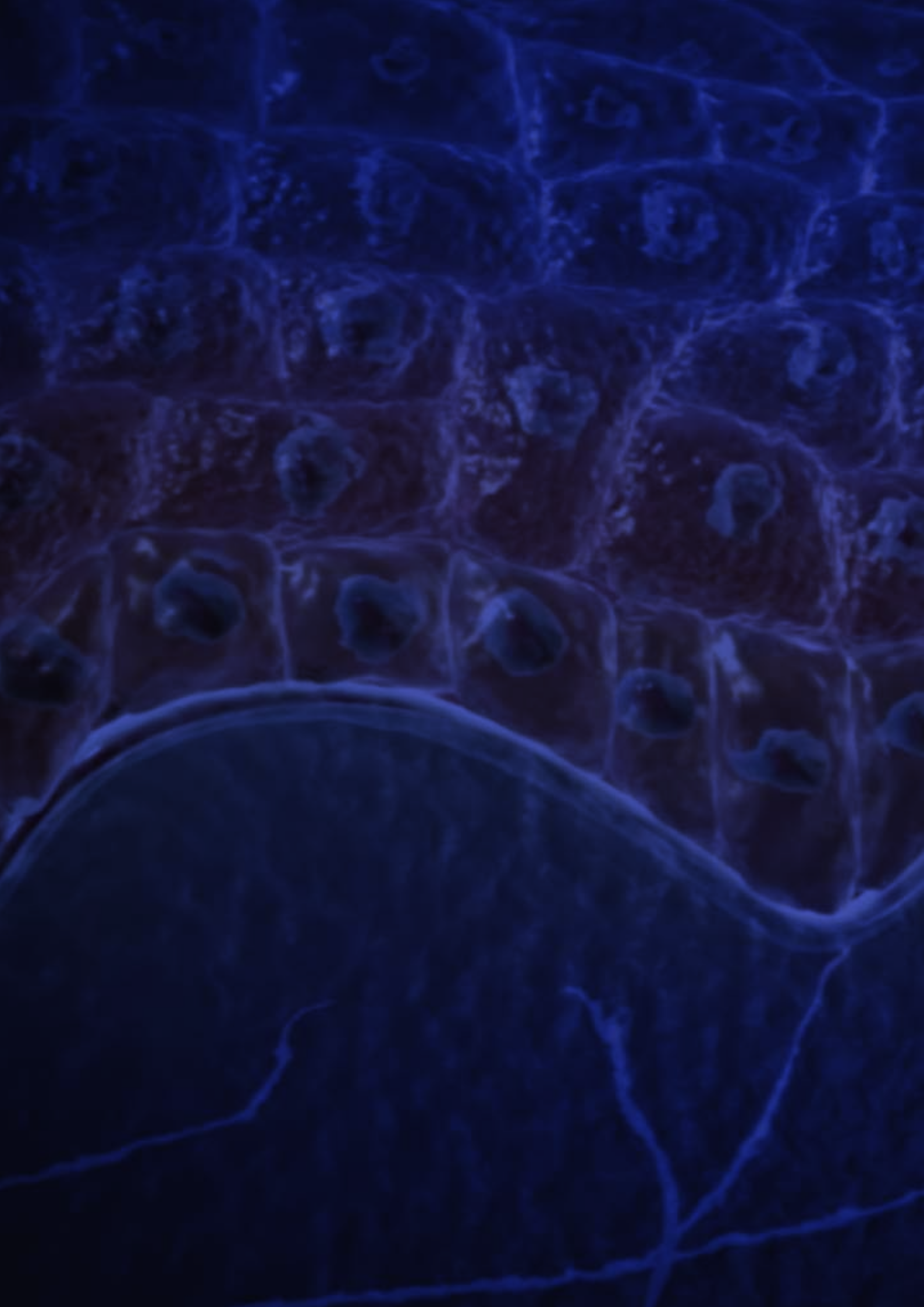


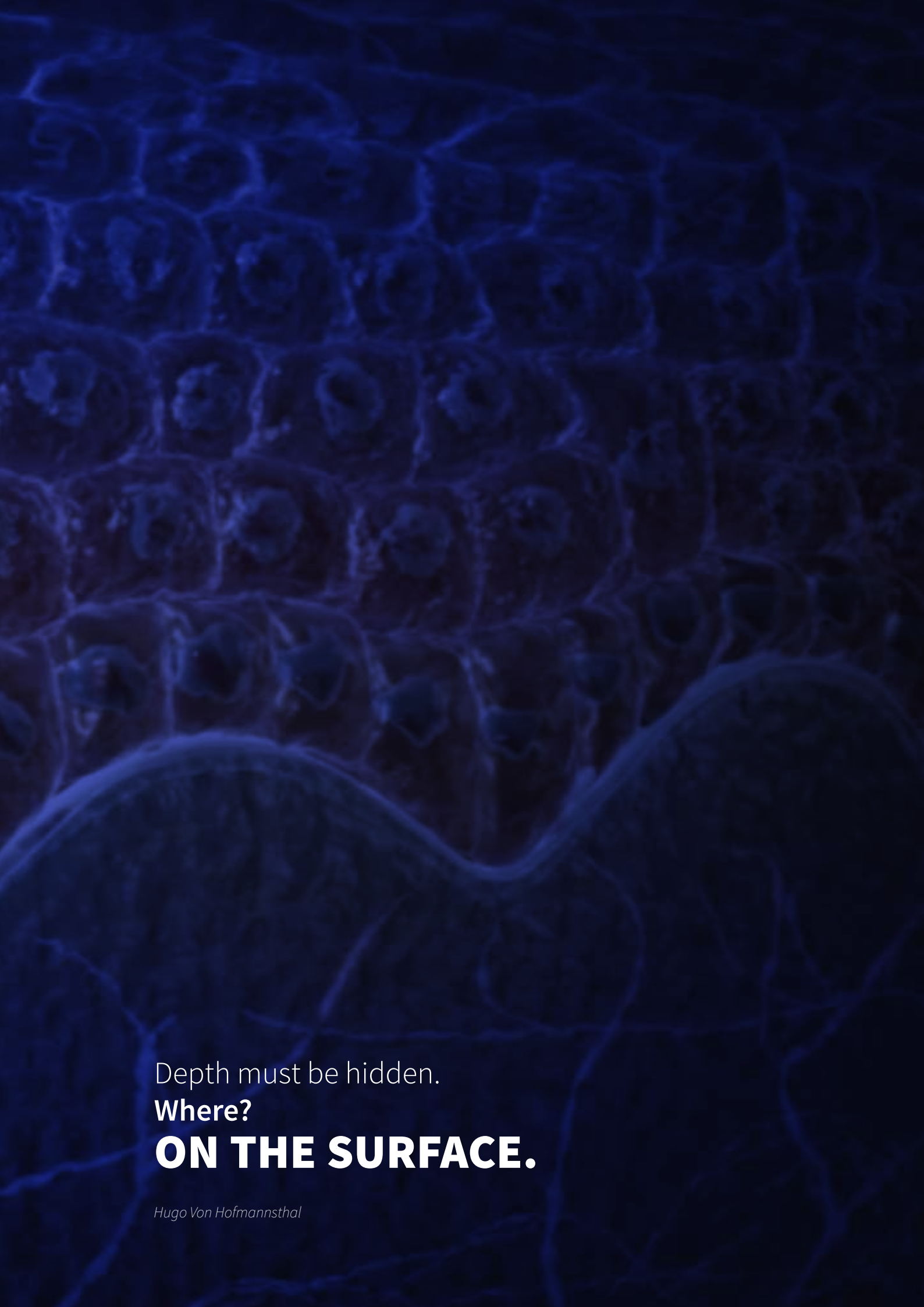
MA

Mild-moderate
comedonic and
inflammatory acne



SA-15 SA





Depth must be hidden.

Where?

ON THE SURFACE.

Hugo Von Hofmannsthal



www.tebitech.com

Researched and developed by



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