

A Breakthrough In The Non-Hormonal Treatment Of Vulvo-Vaginal Atrophy

Now Available In Waikato and the Bay of Plenty



Dr Naylin Appanna
Gynaecologist and Laparoscopic Surgeon
Phone: Hamilton 07-838 3400
Tauranga 07-577 9800
0800 696 2496 (0800 MYOBYGN)
www.obgyn.co.nz

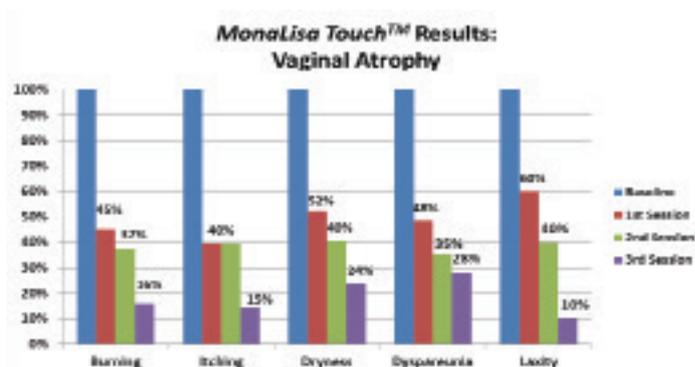
- Vaginal Itching & Burning
- Vaginal Dryness
- Loss Of Lubrication
- Vaginal Laxity
- Some Incontinence Symptoms
- Dyspareunia

MonaLisa Touch At Our Hamilton Clinic...

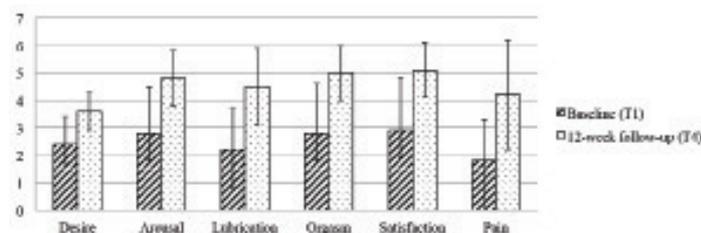
MonaLisa Touch is a non-surgical, non-hormonal alternative for the treatment of Vaginal Atrophy. It is quick, pain-free, requires no downtime and provides patients with relief for up to 12 – 18 months. MonaLisa Touch can be used in conjunction with or instead of hormonal therapy, and is suitable for cancer patients. The treatment is supported by published research and over 5000 treatments have been performed in Australia.

MonaLisa Touch works by stimulating the body's regenerative processes to create more hydrated and healthy cells, and to improve the vascularity of the vaginal mucosa. This improves the integrity and elasticity of the vaginal wall and normalises pH (increases the acidity) of the vaginal environment. MonaLisa Touch improves the health and function of the vagina.

MonaLisa Touch provides many patients with relief from symptoms for 12-18 months. The treatment can be used in conjunction with Hormone Therapy, as an alternative treatment for patients who are not suitable for Hormone Therapy, or for those patients who have found Hormone Therapy to be ineffective.



Improvements in Dyspareunia & Sexual Function ⁴



Histological preparation of vaginal mucosa sections stained with haematoxylin and eosin (H&E)

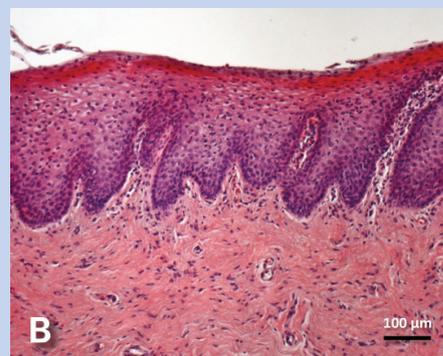
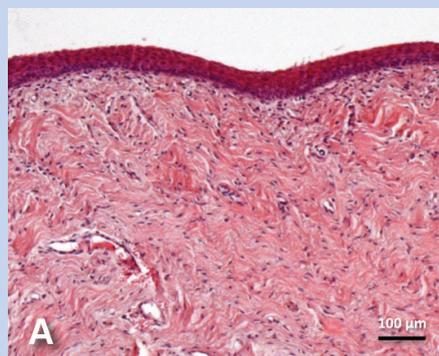
Patient data

Age: 59

Age at menopause: 48

Note: The patient was not treated with HRT.

Courtesy of: Prof. A. Calligaro, MD - Professor of Histology and Embryology at the University of Pavia, Italy



(A) Vaginal wall in the basal condition with a thinner epithelium typical of atrophic vaginitis. Never treated with HRT. (B) Same magnification two months after one MonaLisa Touch® session showing significantly thicker epithelium of the vaginal wall.

Contact our clinic to receive a detailed information pack including published research on MonaLisa Touch

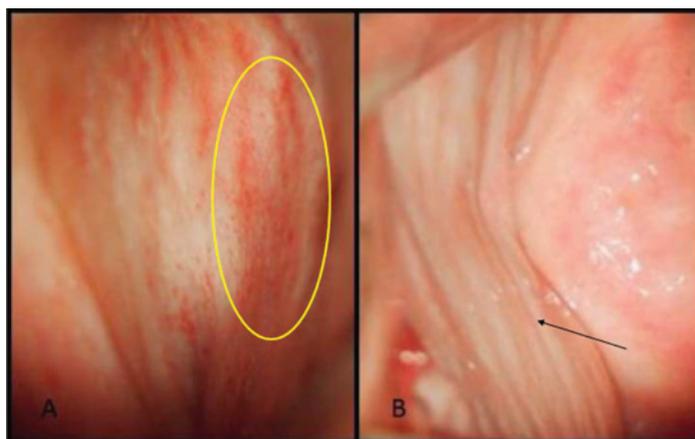


- Address: 83B Tristram St, Hamilton 3204
- Phone: Hamilton 07-838 3400
- Freephone 0800 696 2496 (0800 MYOBYGN)

- 49 Fraser St, Tauranga 3112
- Tauranga 07-577 9800
- Website: www.obgyn.co.nz

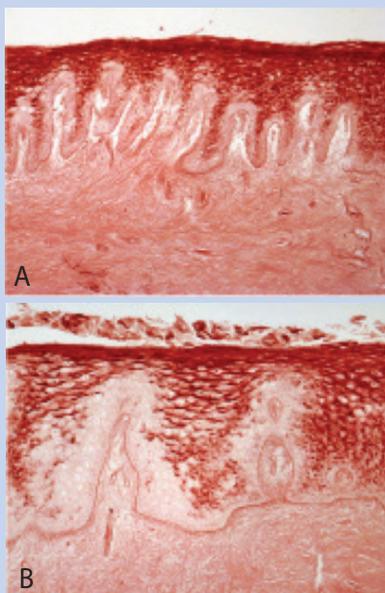
Key Benefits Of MonaLisa Touch

- Non-hormonal
- Low risk of side effects
- Suitable for patients of all ages
- Five-minute procedure
- High patient satisfaction
- More than 5000 treatments performed in Australia
- Suitable for patients who have undergone treatment for cancer
- Can be used in conjunction with, or independent of hormone therapy
- Supported by published research
- Over 6 years of development



At T0 before the MonaLisa Touch treatment, vaginal walls are thinner and less elastic with loss of rugations (A); yellow ring highlights petechial atrophy. At T1, the regeneration of the vaginal wall is observed (B); arrow indicates restored vaginal mucosa.⁵

Changes Observed Two-Months After One MonaLisa Touch Treatment



Histochemical PAS reaction for glycogen identification (red). (A) Before treatment. (B) After treatment, the high content of glycogen in the epithelial cells of the intermediate and superficial layers and the numerous large cells shedding at the epithelial surface are clearly visible. The epithelial-connective junction is well identified by the PAS positivity of the basal membrane (red line). In the connective tissue of the papilla, small vessels penetrating the papilla are clearly identifiable. Original magnification 200x; periodic acid Schiff reagent reaction.

Improvements Observed In Mucosa Post-Treatment²

- A thicker (non-atrophic) epithelium with a basal layer of closely packed (proliferating) cells.
- Significant storage of glycogen in the large epithelial cells forming the intermediate and superficial layers.
- A high degree of epithelial exfoliation of superficial cells filled with glycogen.
- Increased synthesis of the molecular components of the extracellular matrix.
- A rich content of blood vessels in the connective tissue stimulating and supporting the activity of fibroblasts and capillaries.

History Of Fractional Laser Therapy In Dermatology

- Developed in the early 2000's, fractional laser has been used successfully in dermatology for scar reduction and skin texture improvement on delicate areas such as the face, eyelids and neck.
- Fractional laser improves the structure of the epithelium by delivering heat into the tissue to stimulate 'heat-shock' proteins that increase the activity of fibroblasts.
- Fractional laser ablates small dots of tissue on the epithelium (around 5%) surrounded by areas of untreated tissue. This leads to rapid healing with low-risk of side effects.
- Improvements in the epithelium can continue for up to 6-months after a single treatment and results last longer than 12-months.
- MonaLisa Touch is an evolution of the proven Smartxide DOT Therapy fractional laser system, one of the most widely-used fractional lasers in dermatology.

1. S. Salvatore, R. E. Nappi*, N. Zerbinati†, A. Calligaro‡, S. Ferrero**, M. Origoni, M. Candiani and U. Leone Roberti Maggiore (2014) A 12-week treatment with fractional CO2 laser for vulvovaginal atrophy: a pilot study. CLIMACTERIC 2014;17:1-7
2. N. Zerbinati, M. Serati, M. Origoni, M. Candiani, T. Iannitti, S. Salvatore, F. Marotta, A. Calligaro (2014) Microscopic and ultrastructural modifications of postmenopausal atrophic vaginal mucosa after fractional carbon dioxide laser treatment. Lasers Med Sci 2014 Nov 20.
3. S. Salvatore, U.L. Roberti Maggiore, M. Origoni, M. Parma, L. Quaranta, F. Sileo, A. Cola, I. Bainsi, S. Ferrero, M. Candiani, N. Zerbinati (2014) Microablative fractional CO laser improves dyspareunia related to vulvovaginal atrophy: a pilot study. Journal of Endometriosis and Pelvic Pain Disorders 2014. Ol:10.5301/je.5000184.
4. S. Salvatore R.E. Nappi, M. Parma, R. Chionna, F. Lagona, N. Zerbinati, S. Ferrero, M. Origoni, M. Candiani, U.L. Maggiore. (2014) Sexual function after fractional microablative CO2 laser in women with vulvovaginal atrophy. Climacteric Oct 2014, 21:1-21.
5. Antonino Perino, Alberto Calligaro, Francesco Forlani, Corrado Tiberio, Gaspare Cucinella, Alessandro Svelato, Salvatore Saitta, Gloria Calagna (2015) Vulvo-vaginal atrophy: A new treatment modality using thermo-ablative fractional CO2 laser. Maturitas 2015 Mar 25;80(3):296-301.