

Microdermabrasion & Skin Needling

Surface renewal and collagen induction.

Skin needling, also known as microneedling, creates controlled micro-injuries in the skin to stimulate a wound-healing response. It may be considered for selected texture concerns, acne scarring, enlarged pores, fine lines and overall skin-quality concerns. Suitability depends on skin type, active skin conditions, scarring tendency and individual treatment goals.

Microdermabrasion is a non-invasive surface exfoliation treatment used to smooth the outer skin layer and improve the appearance of dullness, congestion and mild textural roughness. It is generally a low-downtime treatment, but it still requires skin assessment so that irritated, fragile or recently treated skin is not over-exfoliated.

WHAT IT TREATS

Skin needling may be considered for selected acne scarring, rough texture, enlarged pores, fine lines and mild overall skin-quality concerns. It is not a quick fix and is usually planned as a course of treatments. Active acne, infection, dermatitis or unstable pigmentation may need to be treated or stabilised before needling is appropriate.

HOW IT WORKS

A device with fine needles creates controlled channels in the skin. This triggers natural repair pathways and gradual collagen remodelling. The treatment does not remove skin in the way an ablative laser does, but it still relies on a controlled wound-healing response — so careful preparation and aftercare matter.

WHAT TO EXPECT DURING TREATMENT

The skin is cleansed and a topical anaesthetic may be applied for comfort. The needling device is passed evenly over the treatment area. Redness, warmth, pinpoint bleeding and a sunburn-like sensation can occur during treatment. A soothing product is usually applied afterwards, and the skin may feel tight or hot for several hours.

DOWNTIME AND RECOVERY

Redness and warmth are expected for 24-48 hours, though this varies with treatment depth. Mild swelling, tightness, dryness, flaking or pinpoint bruising can occur over

the following days. Makeup, exercise, heat and active skincare are usually avoided initially to reduce irritation and infection risk.

RISKS AND COMPLICATIONS

Common side effects. Redness, warmth, swelling, tightness, dryness, pinpoint bleeding, mild bruising and temporary sensitivity. Some patients experience a temporary acne flare, milia or roughness as the skin recovers. Visible improvement is gradual and often requires a series of treatments.

RARE / SERIOUS RISKS — MATERIAL RISKS

Please read carefully — these form part of your informed consent.

Infection, cold sore reactivation, post-inflammatory hyperpigmentation, prolonged redness, scarring, worsening irritation or an unsatisfactory result are uncommon but recognised. These risks increase if treatment is performed over active infection or inflammation, or if aftercare is not followed carefully.

PRE-TREATMENT INSTRUCTIONS

Avoid tanning and active skin irritation before treatment. Pause retinoids, exfoliants and strong acids as advised. Tell your clinician about cold sores, keloid tendency, poor wound healing, immune suppression, recent cosmetic procedures and any active acne or dermatitis in the treatment area.

POST-TREATMENT INSTRUCTIONS

Use only the recommended gentle skincare initially. Avoid makeup, strenuous exercise, heat, swimming, saunas, retinoids and exfoliants until advised. Do not pick, scratch or exfoliate flaking skin. Use sunscreen once appropriate and avoid direct sun exposure while the skin is healing.

EXPECTED RESULTS AND TIMELINE

An early glow may appear after redness settles, but texture and scar changes develop gradually over weeks to months as collagen remodelling occurs. A course of treatments is usually needed for acne scarring or more visible texture goals, with review between sessions.

CONTRAINDICATIONS

Needling may not be suitable with active infection, cold sores, open wounds, significant dermatitis, active inflammatory acne in the treatment area, keloid tendency, poor wound healing, immune suppression, or during pregnancy and breastfeeding unless clinically cleared.

QUESTIONS BEFORE CONSENT

If anything in this document is unclear, please ask before signing your consent form. Your clinician will confirm suitability, expected response and risks specific to your skin.

WHAT IT TREATS

Microdermabrasion may be considered for dull skin, rough surface texture, mild congestion, superficial dryness or flaky build-up. It can be part of a maintenance skin plan or used to prepare the skin before selected skincare programs. It does not replace medical acne care, laser, needling or resurfacing when deeper scarring, pigmentation or ageing changes are the main concern.

HOW IT WORKS

The treatment mechanically exfoliates the outermost skin surface and removes loosened debris using controlled abrasion and suction. This can leave the skin feeling smoother and fresher. Because it works mainly on the surface, results are usually subtle and are best considered as part of a broader skin-quality plan.

WHAT TO EXPECT DURING TREATMENT

The skin is cleansed before treatment. A handpiece is passed over the skin with controlled suction and exfoliation. Sensation is usually scratchy or mildly abrasive but should be tolerable. After treatment, soothing skincare and sunscreen are applied; your clinician may adjust intensity for more sensitive areas.

DOWNTIME AND RECOVERY

Most patients return to normal activity immediately. Mild redness, tightness, dryness or sensitivity can occur for several hours to a couple of days. The skin may feel more reactive to active skincare temporarily, so a gentle routine is usually recommended while the barrier settles.

RISKS AND COMPLICATIONS

Common side effects. Temporary redness, tightness, dryness, mild stinging with skincare and sensitivity. Reactive skin may flare temporarily, especially in patients with rosacea, dermatitis or active acne. Results may be limited if the concern is deeper than the surface skin layer.

RARE / SERIOUS RISKS — MATERIAL RISKS

Please read carefully — these form part of your informed consent.

Abrasions, broken capillaries, post-inflammatory pigmentation, infection, acne flare, dermatitis flare or prolonged irritation are uncommon but recognised. These risks are more likely if the skin barrier is impaired, if treatment is too aggressive, or if active skincare and sun exposure are not managed appropriately afterwards.

PRE-TREATMENT INSTRUCTIONS

Pause retinoids, exfoliants, strong acids and other active products as advised. Avoid waxing, sunburn, aggressive exfoliation or recent resurfacing before treatment. Tell your clinician about sensitive skin, rosacea, acne flares, dermatitis, recent cosmetic treatments and medication changes.

POST-TREATMENT INSTRUCTIONS

Use a gentle cleanser and moisturiser for the first 24-48 hours or as advised. Avoid exfoliants, retinoids, strong acids, heat and harsh scrubs while the skin feels sensitive. Apply sunscreen daily and avoid unnecessary sun exposure. Do not scrub the skin if it feels dry or tight.

EXPECTED RESULTS AND TIMELINE

Skin often feels smoother immediately, with best results usually seen as part of repeated maintenance treatments. Microdermabrasion is not designed for dramatic correction of deeper pigmentation, wrinkles or scarring — your clinician may recommend alternative treatments if your goals require more intensive correction.

CONTRAINDICATIONS

Treatment may not be suitable with active infection, open wounds, significant dermatitis, sunburn, fragile skin, poorly controlled inflammatory skin conditions, recent aggressive peel, laser or resurfacing, or recent isotretinoin use without medical review.

QUESTIONS BEFORE CONSENT

If anything in this document is unclear, please ask before signing your consent form. Your clinician will confirm suitability and tailor intensity for your skin.

Disclaimer: This document provides general information and does not replace a formal medical consultation. Please discuss any questions with your treating practitioner prior to signing your consent form.

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