PATIENT INFORMATION
Please review this important information before beginning your treatment.

This patient information leaflet explains what to expect from a Microneedling treatment for the treatment of facial wrinkles using the Exceed Microneedling device.

If you have any questions relating to the information in this leaflet, please contact the manufacturer MT.DERM GmbH or its US office Amiea Med Inc. The contact details are printed at the end of this leaflet.

Glossary
Acetaminophen: is a medicine used to treat pain and fever. It is typically used for mild to moderate pain relief.

Acne: Acne is a skin disease that occurs when hair follicles are clogged with dead skin cells and oil from the skin. It is characterized by blackheads or whiteheads, pimples and oily skin.

Adverse event or incident: a side effect of the treatment.

Anticoagulant therapies: often called blood thinners, these are chemical substances that prevent or reduce coagulation or clotting of blood. They are used to treat certain heart conditions.

Chemotherapy: treatment of a disease with chemical agents. Often used to treat cancers and kill malignant cells.

Corticosteroids a type of steroid. Steroids alter the immune response of the body and can be applied to the skin, taken in tablets or injected.

Cosmeceuticals: a type of cosmetic skincare product, often stronger than normal skincare.

Diabetes: a condition where the sufferer has high blood sugars, caused by either the pancreas not making the hormone insulin or not making it in the correct amount or cells in the body not responding to insulin. This leads to high blood sugars.

Eczema: A type of skin condition that leads to inflammation of the skin. These conditions are often characterized by itchiness, red skin and a rash.

Epidermis: The upper layer of the skin.

Fitzpatrick skin types: is a classification system of skin color in humans. The scale is used by skincare specialists to estimate the response of different types of skin to sunlight. Lower skin types represents lighter skin types. Higher values represent darker skin types.

Hemophilia: is a genetic disorder that affects the body’s ability to make blood clots, a process needed to stop bleeding. This results in people bleeding longer after an injury, are easily bruised, and have an increased risk of bleeding.

Hepatitis: inflammation of the liver tissue, predominantly caused by a virus.

Herpes simplex virus type 1: commonly known as the cold sore or fever blister virus, this is the virus that causes fever blisters.

HIV: or Human immunodeficiency virus infection and acquired immune deficiency syndrome (HIV/AIDS). The condition is caused by a virus. HIV is spread primarily by unprotected, contaminated blood transfusions, hypodermic needles, and from mother to child during pregnancy, delivery, or breastfeeding.

Keloid scars: are a type of scar that is formed after surgery or injury. Keloid scars are firm, rubbery shiny scars. A keloid scar is benign and not contagious Studies have shown that those with darker skin color are at a higher risk of keloid scarring as a result of skin trauma.

Lasers: a device that emits light and used for skin rejuvenation, cutting, cauterize or abrade the skin.

Malignancy: a term often used to describe cancer or tumor that spreads versus a benign tumor.

NSAIDS: Nonsteroidal anti-inflammatory drugs (NSAIDs) are drugs that reduce pain, decrease fever, prevent blood clots and, in higher doses, decrease inflammation.

Pigmentation/pigmented: a general term used to describe the darkening or lightening of an area of skin or nails caused by increased or decreased levels of melanin (a natural pigment that gives skin its color).

Radiofrequency: is a type of aesthetic treatment that uses radio waves to treat the signs of aging.

Radiotherapy: is a type of therapy that uses ionizing radiation, generally as part of cancer treatment to control or kill malignant cells.

Fitzpatrick skin types
Type I: always burns, never tans (pale white; blond or red hair; blue eyes; freckles).
Type II: usually burns, tans minimally (white; fair; blond or red hair; blue, green, or hazel eyes)
Type III: sometimes mild burn, tans uniformly (cream white; fair with any hair or eye color)
Type IV: burns minimally, always tans well (moderate brown)
Type V: very rarely burns, tans very easily (dark brown)
Type VI: Never burns, never tans (deeply pigmented dark brown to darkest brown)

Aging skin
As we age, our skin shows visible signs of the aging process such as lines and wrinkles. Our skin loses its springiness and firmness and appears blotchy or pigmented. Many treatments are available to help slow down this process. Some take the form of over the counter creams while others require treatments from a physician using drugs, and some products that may be referred to as cosmeceuticals or specialist treatments with devices such as Lasers or radiofrequency.

The Exceed device is a type of “Microneedling device”. A Microneedling device is a medical device that is used by physicians to create many, very tiny, microscopic punctures in the epidermis of the skin using very fine sterile stainless-steel needles. To do this, the device is moved over the skin repeatedly to puncture the epidermis. This creates many tiny wounds in the skin which has been reported to help smooth wrinkles.

There are many alternatives treatments to the Exceed Microneedling device and therefore, it’s important that you discuss with your physician whether microneedling is right for you.

Indications for use
The Exceed is a Microneedling device and accessories is intended for the treatment of wrinkles in Fitzpatrick skin types I, II and/or III in the following facial areas: glabellar brown lines, periorbital lines and cheek folds in adults aged 22 years or older.

Caution: Federal law restricts this device to sale by or on the order of a physician.
The Exceed Microneedling device can be used to treat wrinkles in the following facial areas:

- Glabellar frown lines
- Periorbital lines
- Cheek folds

NOTE: This product is not intended for transdermal (under the skin) delivery of topical products such as cosmetics, drugs, or biologics.

Is the treatment suitable for you?
The treatment may NOT be suitable for you if any of the following apply directly to you:
- You have a known history of clotting or bleeding disorders such as hemophilia.
- You suffer from uncontrolled diabetes.
- You are taking anticoagulant therapies such as warfarin or heparin or low dose aspirin as prescribed by your physician.
- You are suffering from an active skin infection including bacterial, viral, or fungal.
- You have eczema, psoriasis, rosacea, a collagen vascular disease, or skin rashes on the face.
- You are suffering from active acne of the face or you are currently taking acne medication with the ingredient isotretinoin (such as Accutane™).
- You have actinic (solar) keratoses, keloid scars (or a history of keloid scars), warts (HPV) or birthmarks or moles in the treatment area.
- You are suffering from a known malignancy or are undergoing or about to undergo treatments using chemotherapy, radiotherapy or high dose corticosteroids.
- You suffer from a systemic infection such as hepatitis or human immunodeficiency virus (HIV).
- If you are pregnant or are currently breastfeeding.
- You are allergic to stainless steel or topical or local anesthetics or have a history of contact dermatitis to these products.
- You are allergic to or have a history of contact dermatitis to the ingredients in Supragel™ which consists of Calcium chloride, Propylene glycol, Deionized water, Sodium Hydroxide, Sucrose, Pectin and Cellulose gum (Blanose).
- You have undergone plastic surgery of the face including dermal fillers within the last 12 months or have any facial surgical scars < 12 months old.
- You have undergone Botox or other neuromodulator injections in the face within the last 3 months.

Patients with Darker skin types
If you have darker skin (Fitzpatrick skin types IV, V, and/or VI), please talk to your doctor to determine if treatment is right for you. This device has not been studied in patients with darker skin types (Fitzpatrick skin types IV, V, and/or VI).

How was the device studied?
The following is a summary of a clinical study that was performed to investigate the effectiveness and safety of the Exceed Microneedling device for the treatment of facial wrinkles.

The objective of the study was to assess the effectiveness of the Exceed micro needling system in reducing the signs of skin aging as measured by the improvement in wrinkles, after 4 standardized treatment sessions and to assess the safety of the system as measured by the number of adverse events.

The study was conducted at a single center. Subjects were treated 4 times, 30 days apart (Day 0, 30, 60 and 90) with final assessment 60 days after the last treatment at 150 days. Treatments were conducted by medically trained healthcare professionals.

How the study measured the effect of the treatment?
At each visit, digital photographic images were taken of the subject’s face and the investigating physician assessed facial wrinkles using an authenticated (validated) scale. At the end of the study the digital images of the subject’s face were collected, randomized and analyzed independently by 3 physicians using the same grading scale.

How the study measured safety – what side effects were seen in the clinical study?
Immediately after each micro needling treatment the physician was asked to grade the amount of visible skin redness in the treatment area. Grading was carried out using a grading scale where:

i. None: No skin redness Skin is normal color
ii. Minor: very faint skin redness
iii. Mild: blotchy, visible redness that does not cover the entire face.
iv. Moderate: Skin has a very definite redness to it.
v. Severe: Skin is severely red.

Subjects also graded their skin redness immediately after each micro needling treatment and in addition graded pain and discomfort experienced during the treatment. A scale was used for subjects to evaluate their skin redness that contained photographs showing grades of skin redness in different skin types. This scale was also used for subjects to record their skin redness at home.

Pain and discomfort were recorded using a scale (0–10) where 0 was equivalent to “no pain” or “no discomfort” to 10, which represented “most intense pain ever” and “most discomfort ever”. This grading structure was also used to record changes to pain and discomfort from the evening of the treatment to Day 8 (7 days after the treatment). In addition, skin peeling was assessed by the subject from day 3 to day 8 using a scale where 0 represented “no skin peeling or flakiness” to 10 “heavy skin peeling over the whole face.”

During all times any potential adverse incidents were recorded by the research staff.
Results of the study

Safety – Physician reported outcomes

There were 9 adverse incidents (side effects) that were related to the treatment that were observed during the study and 4 incidents not related to the treatment.

There were 8/48 (17%) recorded adverse incidents, where the treatment triggered fever blisters (also called cold sores) due to the virus herpes simplex virus I (HSV I). Of the 8 fever blister outbreaks, 5 occurred in subjects with Fitzpatrick skin type 2, 2 occurred in skin type 3 and 1 occurred in skin type V. Thirteen, 13/48 (27%) of subjects reported a history of fever blisters at the beginning of the study. Within this population 8 patients reported an outbreak of virus herpes simplex virus I (HSV I), this represented an occurrence rate of 62% or approximately 6/10 in people who have a history of fever blisters. Subjects who had a fever blister outbreak were treated using antiviral medication and for the rest of the study subjects were given antiviral medication to take before the micro needling treatment. There were no further reported outbreaks of fever blisters.

One subject reported extremely dry skin which did not need any further treatment from the doctor. The subject did not report dry skin again during the study. This subject’s skin type was skin type 2.

Patient reported outcomes

Subjects were also asked to grade their erythema immediately at the end of the treatment. Nineteen out of 48 (40%) subjects graded their skin redness as moderate and 29/48 (60%) subjects as severe (table iii).

Table iii: Erythema assessment by physician and subject immediately after treatment

<table>
<thead>
<tr>
<th>Grading of erythema immediately after treatment</th>
<th>Grading of erythema immediately after treatment</th>
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<tbody>
<tr>
<td>Physician</td>
<td>Subject</td>
</tr>
<tr>
<td>Minor</td>
<td>34/48 (70%)</td>
</tr>
<tr>
<td>Moderate</td>
<td>14/48 (29%)</td>
</tr>
<tr>
<td>Severe</td>
<td>0</td>
</tr>
<tr>
<td>10/48 (20%)</td>
<td>30/48 (62%)</td>
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</table>

Subjects indicated that although the treatment appeared to be moderately painful it was not particularly uncomfortable (table iv).

Table iv: Pain and discomfort experienced during the treatment

| Subject assessment of pain and discomfort during the treatment (average over 4 treatments) | Pain score
<table>
<thead>
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<tbody>
<tr>
<td>Pain during treatment</td>
<td>≤2 (0-8 (0-6))</td>
</tr>
<tr>
<td>Discomfort during treatment</td>
<td>1.3 (0.1-1.8)</td>
</tr>
</tbody>
</table>

Redness (erythema), pain, discomfort, and skin peeling were recorded by the subjects up to 8 days after treatment.

- Erythema was experienced by 48 out of 48 subjects (100%) immediately after the treatment lasting 8 days. Eight days after the treatment 39/48 (81%) subjects reported no erythema, 9/48 (19%) subjects reported mild erythema and 1/48 (2%) subjects mild erythema.

- Pain was experienced by 48 out of 48 subjects (100%) to some degree during the treatment lasting 8 days. By day 3, 37/48 (77%) of subjects still reported pain. By day 8, 2/48 (4%) still reported some pain. These symptoms can be alleviated with Nonsteroidal anti-inflammatory drugs (NSAIDs) and moisturizing cream.

- Discomfort was experienced by 48 out of 48 subjects (100%) to some degree during the treatment lasting 8 days. Eight days after the treatment, discomfort was still reported by 9/48 (20%).

- Skin peeling was experienced by 48 out of 48 subjects (100%) from day 3 lasting 8 days. The amount of skin peeling reached a maximum of 3.4 by day 4. Skin peeling was still reported in 31/48 (65%) subjects by the evening of day 8. (figure i).

Figure i: Subject assessment of pain, discomfort and peeling immediately after the treatment to day 8

What will the treatment accomplish, and what did the clinical study show?

Effectiveness – Physician reported outcomes

Three areas of the face were excluded for evaluation by the blinded physicians because they were difficult to assess by photography. The following six areas were therefore assessed for wrinkles: horizontal forehead lines, glabella frown lines, periorbital lines, cheek folds, nasolabial folds and upper lip lines.

Of the six facial areas which were evaluated, three areas achieved a clinically meaningful result, while three areas did not show improvement. For glabella frown lines, periorbital lines and cheek folds the mean values of change was ≥ 1 grade improvement in the grading scale. This change was statistically significant. For horizontal forehead lines, nasolabial folds, and upper lip lines, the results did not demonstrate a clinically meaningful improvement at day 150. The number of subjects whose wrinkle grade improved by ≥ 1 grade is shown in table v as well as the number of subjects seeing no change in their wrinkle grade or whose wrinkles worsened.

Table v: Change in wrinkle grading from the beginning of the study to 2 months after the last treatment

<table>
<thead>
<tr>
<th>Glabella Frown Lines</th>
<th>Periorbital Lines</th>
<th>Cheek Folds</th>
</tr>
</thead>
<tbody>
<tr>
<td>≥ 1 grade improvement</td>
<td>41/48 (85.4%)</td>
<td>43/48 (90.5%)</td>
</tr>
<tr>
<td>Change = 0</td>
<td>7/48 (14.6%)</td>
<td>5/48 (10.4%)</td>
</tr>
<tr>
<td>≥ 1 grade worsened</td>
<td>0/48 (0%)</td>
<td>0/48 (0%)</td>
</tr>
</tbody>
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What happens during the treatment?

1. You will have your face cleansed to remove any traces of make-up.
2. You will have a numbing cream applied to your face. You will need to wait (typically 30 minutes) while the numbing cream works.
3. After your face is numb the cream is removed from your face and your face will be cleansed again.

4. You will undergo the treatment. The treatment involves making many, very tiny, microscopic punctures into the epidermis of the skin using very fine sterile needles. To do this the device is moved over your skin repeatedly to puncture the epidermis. People who experience the treatment say that it feels like their skin is being rubbed with fine sandpaper while others describe the feeling of an electronic toothbrush being moved across your skin.

5. The treatment takes 15–20 minutes. After the treatment your skin will be cleansed again, and a high sun protection factor (SPF) sunscreen will be applied to your skin.

What happens after the treatment?
During a clinical study on 48 people the following side effects were reported:

- Some pinpoint bleeding after the treatment, but this will stop within 5–10 minutes

Erythema, pain, discomfort and skin peeling were recorded by the subjects up to 8 days after treatment. A full description of the side effects are described in “Patient reported outcomes”.

If you experience any side effects or symptoms that are NOT listed above and/or symptoms that appear to be worse than those listed above, please contact your physician immediately. Please contact your physician if you have any concerns in general about the treatment.

Care of your skin after the treatment

a. Your doctor may give a sunscreen to use after the treatment and a moisturizer to use only in extreme cases of your skin feeling excessively dry. Follow the instructions given to you by your healthcare provider.

b. Apply the sunscreen in the morning and if directly in the sun every 2 hours.

c. Pat the sunscreen onto the face for the first 3 days while the skin may be red and uncomfortable. DO NOT massage the sunscreen into the skin.

d. Avoid direct sun exposure for 5 days.

If you experience any side effects or symptoms that are NOT listed above and/or symptoms that appear to be worse than those listed above, please contact your Physician immediately. Please contact your physician if you have any concerns in general about the treatment.