Synergistic Skin Remodeling with GENTLO™ (a.k.a. SILKRO). Webinar Summary.



Presented by **Dr Rehanna Beckhurst***, Doctor of Dental Surgery & Cosmetic Dermatology, co-owner of ifab clinic, Devon, UK — how cold plasma and RF microneedling on one platform treat every skin layer and every skin type.

1 The Platform

One device for (almost) every skin concern — five modalities, Fitzpatrick I to VI

PS Cold Plasma	Sterilisation, regeneration, transdermal delivery
RM RF Microneedling	Multipolar · insulated / non-insulated · 25 or 49 pins
RN RF Needle	Single-pin monopolar RF for targeted lesions
RC RF Circle	Bulk-heating RF with built-in temperature sensor
RV RF Venus	Monopolar RF for intimate (mucosal) rejuvenation

Built for precision: depth 0.5–3.5 mm in 0.1 mm steps · up to 2,000 shots · light handpiece that glides in without kick-back · saved patient settings and BMI-based skin estimate → uniform results between therapists.

$320M → $707M	**39%**	**96%+**	**FST I–VI**
RF MICRONEEDLING MARKET	OF DEMAND	PATIENT SATISFACTION	ALL SKIN TYPES
2024 value → projected by 2035	acne & acne scarring; rejuvenation is #2	minimal discomfort and downtime	safe with the correct protocols

2 Cold Plasma

The underused hero — a gentle "cold plasma shower", not hot plasma that burns the skin

Plasma is ionised atmospheric gas — the fourth state of matter. Reactive oxygen and nitrogen species (RONS) temporarily loosen the desmosomes between keratinocytes and destroy bacterial membranes — at epidermal level, painless, no downtime.

500 Da → 2–5 kDa	**6–8 h**	**~15 min**
MOLECULE SIZE THAT PENETRATES	DELIVERY WINDOW	NUMBING TIME
≈10× larger — exosomes, peptides, low-MW HA	the skin stays open after treatment	plasma first — no cling-film occlusion needed

Pigmentation & melasma: melanocytes sit on the basal layer, so plasma carries tyrosinase inhibitors through the epidermis. "We don't bleach the skin — we suppress melanogenesis and speed up turnover."

Acne: antibacterial and sterilising — a strong option when isotretinoin is not possible.

Under-eyes & beyond: delicate, bruise-prone skin tolerates plasma well; colleagues now treat nail fungus and psoriasis.

3 RF Microneedling

Controlled injury and repair — energy delivered exactly where it is needed

Skin is a barrier, not a repair priority. Hair-thin needles make the body "see" an injury; RF coagulates the preset dermal layer (≈40–43°C) → fibroblasts, new collagen, elastin, HA — without breaking or burning the surface.

Needle / tip	How it works	Best for
Insulated needles	Energy only at the 0.3 mm tip — spares the basal layer	Darker skin (avoids PIH), dermal remodelling
Non-insulated needles	Energy along the full shaft, epidermis → dermis	Lighter skin, resurfacing — one depth, faster
Small tip, 25-pin (5×5)	Wider spacing → energy travels deeper	Crow's feet, scars, jawline & submental fat
Large tip, 49-pin (7×7)	Closer needles → shallower coagulation	General rejuvenation, skin tightening

Source: "Synergistic Skin Remodeling — Combining RF Microneedling and Plasma" — H-WEBINAR by Dr Rehanna Beckhurst*, ifab clinic, Devon, UK.

4 Protocol & Practical Tips

How Dr Beckhurst runs a combined plasma + RF microneedling session

1 Plasma
Always first — opens the gateway for topical anaesthetic and sterilises the field.

→

2 Numbing
10–15 min, no occlusion. Then cleanse with an alcohol cleanser.

→

3 RF microneedling
Zone by zone on the marked face, changing settings per zone.

→

4 Serum cocktail
Tailored actives — diffusion boosted by plasma.

Mark the face: forehead, temples, nose, cheeks, perioral, jawline & chin, neck — and watch the shot alarm, so the eyes are never treated at forehead depth.

Depth & fat: "in skin, every millimetre is a mile." Keep RF low where fat must be preserved (mid-face); raise it on jowls, submental area, jawline and lower abdomen — 3.5 mm is enough even for the abdomen.

Spacing: 2 weeks before and after any other skin modality; 3–5 days for botulinum toxin. Cold sores: aciclovir 800 mg the day before, the day of and the day after.

Photos sell results: a black cape, head cover and black background give uniform before/after photos for your portfolio.

5 Clinical Results

Cases from ifab clinic, Devon



Uneven pigmentation
Plasma + Plurya Mesoline Shine · 2 treatments, 3 weeks apart



Cystic inflammatory acne
Plasma + Mesoline Clear · 6 treatments, 2 weeks apart · PCA Skin Awards 2023 winner



Jawline contouring
RF MN insulated 49-pin, 1.7 / 2.5 / 3 mm, RF 7–8 · 3 sessions, 6 weeks apart



Melasma on cheeks, Fitzpatrick IV
Primed 3 weeks · RF MN 40%, 1.5 mm, insulated · 2 sessions



Scar after BCC removal
Plasma + RF MN (40%, 1.8 mm) + polynucleotides · 3 sessions



Rosacea & dilated capillaries
Plasma + RF MN + single-needle RF · 3 sessions · award-winning case

BOTTOM LINE — PROGRESSIVE, NOT AGGRESSIVE TREATMENT

1. **Very versatile technology**
2. **Follow the latest research**
3. **Always prime the skin**
4. **Reinforce the correct aftercare**
5. **Combine treatments**
6. **Progressive, not aggressive!**

"Be brave, combine treatments, try new protocols — and you will drive your clinic to success."

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