Skin-toned tattoo ink: what should one expect in terms of ink darkening and removal when treated with a 755 nm pico-second laser?

Candice Menozzi-Smarrito¹, Stéphane Smarrito¹ ¹RIVERAClinic, Quai Perdonnet 3, 1800 Vevey, Switzerland

Abstract. *Background:* picosecond lasers have proved to be effective for the removal of tattoos. However, the removal of micropigmentation remains challenging due to the complexity of cosmetic skin-toned inks that contain titanium and iron oxides. *Aim:* the following study aims at further investigating how the concentration of mineral oxides and the fluence can impact the color change, assessing the darkening process and the removal efficiency which occurs when a skin-toned cosmetic tattoo is treated with a picosecond laser. *Methods:* Model ink samples as well as a skin-toned eyebrow tattoo were treated with a picosecond laser using fluences from 0.21 to 5.25 J/cm². Digital photographs were taken and the color contrast was analyzed with ImageJ software. Analyses of variance were performed with the Excel software. *Results:* At a fluence threshold, the greyish discoloration of TiO₂ model inks occurred, then the color contrast increased with the fluence until reaching a plateau. Interestingly, a synergetic effect between iron and titanium oxides became a possible occurrence. Darkening was also observed *in vivo* during the treatment of an eyebrow tattoo containing flesh inks. The tattoo became first greenish, then darker and finally the pigmentation started decreasing after the 8th session. 11 treatments were necessary to completely remove the tattoo. *Conclusion:* The 755 nm picosecond laser has demonstrated its efficiency to remove complex tattoos containing flesh pigments. Ink darkening seems to be inevitable during the treatment, however, it should not be seen as a complication but as a part of the elimination process.

Keywords: Picosecond laser, tattoo removal, cosmetic tattoo, mineral pigment, metal oxide

Introduction

Picosecond (PS) lasers have demonstrated their efficiency in tattoo removal¹⁻⁴. Their very short pulse length, close to the thermal relaxation time of pigment particles, makes possible the significant photomechanical breakup of pigments while preventing collateral adverse effects⁵. Nevertheless, the removal of cosmetic micropigmentation remains challenging due to the complexity of cosmetic inks, particularly skin-toned inks. Micropigmentation is typically used to redraw areolas following breast surgery and to camouflage scars or old cosmetic eyebrow tattoos^{6,7}. Skin-toned inks include high concentrations of titanium oxide TiO₂ (CI 77891, white pigment), iron oxides Fe_2O_3 (CI 77491, red pigment) and Fe_2O_3 . H₂O (CI 77492, yellow). These metal oxides are known to cause a darkening of cosmetic tattoos during laser treatments⁸⁻¹⁵.

With the development of cosmetic tattooing, the demand for removing flesh inks has grown. The present study had two objectives: First, to further investigate, by means of a simple model, how the concentration of mineral oxides and the fluence can impact the color change of flesh inks during laser treatments; second, to assess the darkening process and removal efficiency when a skin-toned cosmetic tattoo has been treated with a picosecond laser.

Materials and methods

Model inks

Iron oxide and titanium oxide (100% purity, Gerstaecker Switzerland) were suspended in tattoo ink thinner (AUA Fee Shading solution) in order to prepare the following inks: TiO_2 50%, TiO_2 25% and Fe_2O_3 4% (w/w). The suspensions were stirred vigorously before use. Model inks were deposited in a very thin layer (one passage) on a white sheet in a predefined rectangular area (4 x 2 cm) using a cotton swab. The resulting samples were then air-dried.

Laser treatments

All samples were treated with a picosecond laser (650 ps, Cynosure, USA) using fluences ranging from 0.21 to 5.25 J/cm². Six replicates were performed.

Color analyses

Digital photographs were taken under the same conditions (light source and room) before and immediately after treatment. The grayscale intensity before and after laser treatment was analyzed with ImageJ software (US National Institutes of Health). The color variation was calculated using the following formula:

 $I_{untreated ink}$ is the mean grayscale intensity for five untreated ink sites selected randomly. $I_{treated ink}$ is the grayscale intensity of laser-treated sites. Two measurements per replicate were performed (2 x 6 = 12 measurements per experiment).

Statistical analyses

Analyses of Variance (ANOVA, one factor) were carried out with the Excel software. Differences were considered as significant when $\rho \neq 0.05$.

Clinical case

The patient (49 years old, Fitzpatrick skin type II) came with an eyebrow tattoo created with dark permanent make-up (12-months aged) camouflaged by a skin-toned ink (7-months aged). Prior to the first laser treatment, a consultation was carried out in order to review the medical history and explain the procedure. Informed explanatory consent was obtained in writing. Laser treatments were carried out with a Picosure Laser (755 nm, 650 ps) using fluences of 1.45 - 5.25 J/cm². The patient received 11 treatments at 4-week or 8-week intervals when a fluence of 5.25 J/cm² was used. The patient was contacted 24 hours after each treatment to determine any side effects.

Results

Since 50 to 10% titanium oxide and 2 to 6% iron oxide can be found in commercially-available skintoned inks, we assessed the chemical behavior of TiO₂ 50%, 25%, 12.5 % and Fe₂O₃ 4% model inks at fluences ranging from 0.21 to 3.36 J/cm². The resulting color contrasts were analyzed and are shown in Figures 1 and 2. In Figure 1, regardless of the TiO₂ concentration, the curves followed a similar pattern: At a fluence threshold a greyish discoloration occurred, after which the darkening increased with the fluence until reaching a plateau. The thresholds for which the white pigment turned grey were between 0.25 and 0.33 J/cm² for TiO₂ 50% and 25%, and between 0.33 and 0.57 J/ cm^2 for TiO₂ 12,5%. When inks were treated using the same fluence, the greater the concentration of titanium oxide, the greater the importance of the darkening. Above a fluence value, 1.31 and 2.33 J/cm² for TiO_2 50% and TiO₂ 25% respectively, the resulting color contrast remained stable around 40-50%. No grey discoloration was observed when Fe₂O₃ 4% ink was treated with a fluence ranging from 0.21 to 5.25 J/cm² (Figure 2, only results below 0.85 J/cm² are shown). This suggests that, under our experimental conditions, iron oxide Fe₂O₃ might not interact with the laser.

 Fe_2O_3/TiO_2 (4%/50% and 4%/12.5%) model inks were treated with picosecond laser at fluences ranging from 0.21 to 0.85 J/cm². As shown in Figure 2, a grey discoloration occurred in the mixed oxide inks. Interestingly, the color change was observed at a lower fluence when TiO₂ was associated to Fe₂O₃. Thus, grey discoloration was detected at 0.21 J/cm² for Fe₂O₃/ TiO₂ 4%/50% (*vs.* 0.33 J/cm² for TiO₂ 50%) and at 0.33 J/cm² for Fe₂O₃/TiO₂ 4%/12.5% (*vs.* 0.57 J/cm²

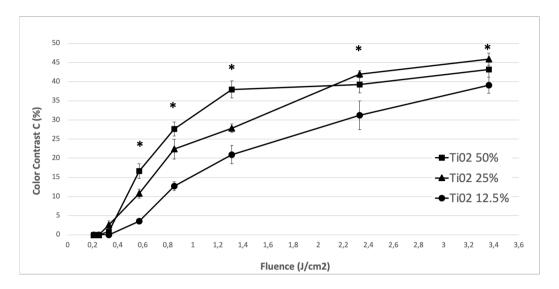


Figure 1. Color variation of titanium oxide inks as a function of laser fluence (* means p < 0.05, significant statistical differences).

for TiO₂ 12.5%). Overall, the color variations were more important than those obtained only with titanium oxide (Fe₂O₃ did not induce any color change at these fluences) suggesting a possible synergetic effect between iron and titanium oxides.

As shown in Figure 3, color discoloration was also observed *in vivo* during the laser treatment of a flesh ink located on the eyebrow. The exact ink composition was not known. During sessions 1 to 3, the tattoo was treated with fluences ranging from 1.45 to 2.33 J/cm² and became greenish. Since flesh inks generally include yellow pigments, the association of blue and yellow colors could be responsible for the resulting green coloration. Fluences from 2.68 to 3.36 J/cm² were then employed from sessions 4 to 7. The overall color became darker. The pigmentation started decreasing

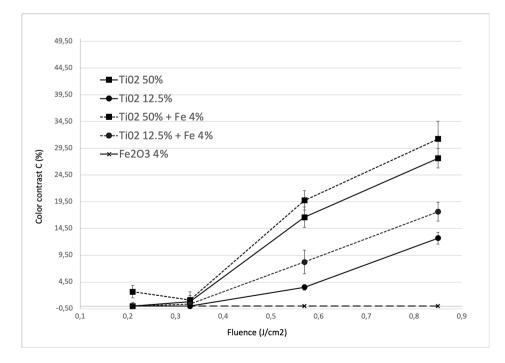
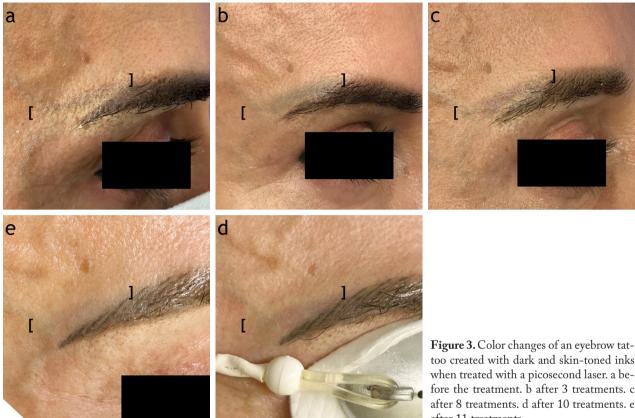


Figure 2. Color variation (darkening) of titanium oxide inks with and without Fe2O3 4% as a function of laser fluence.



too created with dark and skin-toned inks when treated with a picosecond laser. a before the treatment. b after 3 treatments. c after 8 treatments. d after 10 treatments. e after 11 treatments.

after session 8 with a significant reduction at session 10 (3.97 to 5.25 J/cm²). All pigments were removed after one additional laser session (5.25 J/cm²). A few days after each session, the patient showed redness and, from the seventh session, some crusts. No scars or dyschromia were observed.

Thus, a 755 nm picosecond laser proved to efficiently remove skin-toned cosmetic tattoos. Nevertheless, a complete removal required a large number of sessions. Leu et al have demonstrated by means of transmission electron microscopy that white pigment tattoo particles were the largest, iron red particles were intermediate and black carbon particles were the smallest¹⁶. The size of TiO₂ particles might be one factor explaining the high number of sessions required for fragmentation and removal. Moreover, flesh inks are generally used to camouflage older tattoos, which means a greater ink density and chemical complexity. The values for fluences employed during a clinical treatment were far above the threshold of discoloration

in Figure 1, suggesting that color change might be inevitable if the patient wants to completely remove a flesh cosmetic tattoo.

Discussion and conclusion

Titanium and iron oxides are known to be responsible for the grey discoloration during treatment with nanosecond and picosecond lasers. The color change is attributed to the reduction of Fe(III) and Ti(IV) into Fe(II) and Ti(III) respectively¹⁵. Our study on titanium inks at 755 nm showed that the intensity of the grey discoloration was dependent on the initial concentration and the fluences used during the treatment. No discoloration was observed at low fluences, suggesting that a threshold energy is required to initiate the reduction reaction. Although the impact of laser wavelength and pulse duration on ink darkening has already been reported on, this is the first time that a significant impact of fluence and pigment concentration has been demonstrated. Additionally, a potential synergetic effect between iron and titanium oxide has been evidenced. This might be due to a greater reduction of titanium or the activation of Fe(III) reduction. Further experiments should be conducted in order to better understand the mechanisms behind this synergetic effect.

The 755 nm picosecond laser has demonstrated its efficiency in removing complex cosmetic tattoo containing flesh pigments. Due to many unknowns inherent to cosmetic tattoos (*i.e.* ink composition, number of pigment layers), it would be very difficult to predict color changes during treatment. As high fluences would be required, darkening seems to be inevitable in fully removing skin-toned pigments. Patients should be informed prior to starting laser tattoo removal. However, color changes should not be seen as a complication but rather as part of the elimination process.

Conflicts of interests / competing interests: The authors did not receive support from any organization for the submitted work. The authors have no competing interests to declare that are relevant to the content of this article.

Statements and declarations: The authors did not receive support from any organization for the submitted work. The patient consent has been obtained (patient's information and images).

References

- Leu FJ, Huang CL, Wu YS, Wang CC. Comparison of picosecond versus nanosecond Nd:YAG lasers for the removal of cosmetic tattoos in an animal model. Lasers Med Sci. 2022; 37(2):1343-1350.
- Wu DC, Goldman MP, Wat H, Chan HHL. A Systematic Review of Picosecond Laser in Dermatology: Evidence and Recommendations. Lasers Surg Med. 2021; 53(1):9-49.
- Torbeck RL, Schilling L, Khorasani H, Dover JS, Arndt KA, Saedi N. Evolution of the Picosecond Laser A Review of Literature. Dermatol Surg. 2019; 45(2):183-194.
- Bäumler W, Weiß KT. Laser assisted tattoo removal state of the art and new developments. Photochem Photobiol Sci. 2019; 18(2):349-358.

- Bäumler W, Breu C, Philipp B, Hasböck B, Berneburg M, Weiß KT. The efficacy and the adverse reactions of laserassisted tattoo removal - a prospective split study using nanosecond and picosecond lasers. J Eur Acad Dermatol Venereol. 2022; 36(2):305-312.
- Van der Velden EM, Defranq J, Baruchin AM. Cosmetic and reconstructive medical tattooing. Curr Opin Otolaryngol Head Neck Surg. 2005; 13(6):349-353.
- Garg G, Thami GP. Micropigmentation: tattooing for medical purposes. Dermatol Surg. 2005; 31(8):928-931.
- Anderson RR, Geronemus R, Kilmer SL, et al. Cosmetic tattoo ink darkening. A complication of Q-switched and pulsed-laser treatment. Arch Dermatol. 1993; 129(8):1010-1014.
- 9. Moreno-Arias GA, Camps-Fresneda A. Cosmetic tattoo refractive to Q-switched alexandrite laser. J Cutan Laser Ther. 1999; 1(2):117-119.
- 10. Chung WK, Yang JH, Lee DW, et al. Paradoxical darkening of unperceived tattoo ink after relatively low fluence from a Q switched Nd:YAG (1064 nm) laser in the course of treatment for melasma. Clin Exp Dermatol. 2009; 34(8):e555-e557.
- Chang SE, Kim KJ, Choi JH, Sung KJ, Moon KC, Koh JK. Areolar Cosmetic Tattoo Ink Darkening: A Complication of Q Switched Alexandrite Laser Treatment. Dermatol Surg. 2002; 28(1):95-96.
- Cuypers CD, Setup J, Kluger N, et al. Complications of cosmetics tattoos (tattooed Skin and Health). Curt Probl Dermal. 2015; 48:61-70.
- Ross EV, Bashar S, Michaud N, et al. Tattoo Darkening and Nonresponse After Laser treatment, A possible Role for titanium Dioxide. Arch Dermatol. 2001; 137(1):33-37.
- Jimenez G, Weiss E, Spencer JM. Multiple Color Changes Following Laser Therapy of Cosmetic Tattoos. Dermal Surg. 2002; 28(2):177-179.
- Menozzi-Smarrito C, Smarrito S. Reactivity of cosmetic mineral pigments to picosecond laser. J Cosmet Dermatol. 2021; 20(8):2667-2668.
- Leu FJ, Huang CL, Sue YM, Lee SC, Wang CC. Effects of tattoo ink's absorption spectra and particle size on cosmetic tattoo treatment efficacy using Q-switched Nd:YAG laser. Lasers Med Sci. 2015; 30(1):303-9.

Correspondence

Received: 10 March 2023 Accepted: 25 January 2024

Candice Menozzi-Smarrito, PhD

RIVERAClinic, Quai Perdonnet 3, 1800 Vevey, Switzerland

E-mail: direction@riviera-clinic.ch Phone: +41 21 922 24 63