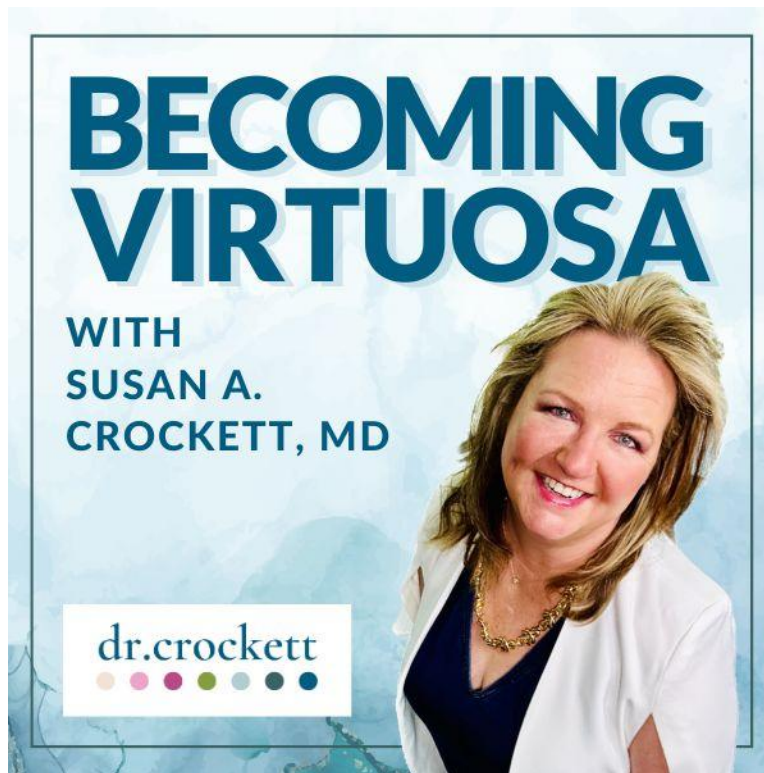


# Ep #123: Botox 101: Everything You Need to Know Before Getting Injected



## Full Episode Transcript

With Your Host

**Susan A. Crockett, MD**

Dr. Crockett presents Becoming Virtuosa

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Michelle Self: That's great.

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Welcome to *Becoming Virtuosa*, the podcast that encourages you to become your best virtuosa self. Each week Dr. Susan Crockett goes where the scalpel can't reach, exploring conversations about how to be, heal, love, give, grow, pray, and attune. For the first time ever, she's bringing the personal one on one teaching that she shares with individual patients to you on this broader platform. A weekly source of inspiration and encouragement designed to empower you.

By evolving ourselves as individuals. We influence and transform the world around us. Please help me welcome board certified OB-GYN specializing in minimally invasive GYN surgery, internationally in the top 1% of all GYN robotic surgeons, a certified life coach, and US News top doctor, your host Susan A. Crockett, MD.

Sue Crockett: Well, hey y'all, welcome back to the Dr. Crockett Show. I'm your host, Dr. Susan Crockett. And it's been a minute since I've done an interview.

You guys have let me know how much you enjoy them and you know how we're always doing fun topics about where the scalpel doesn't reach, huh? It's kind of funny because for those of you who don't know me I'm a board-certified OB-GYN in San Antonio, Texas and I specialize in robotic surgery. Yes, I'm a minimally invasive GYN surgeon and my practice is Virtuosa GYN and I wanted to introduce you to one of our very special practitioners.

Dr. Crockett presents [Becoming Virtuosa](#)

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Michelle Self is here today. Michelle is in the house. So Michelle has worked with me for about three years now.

Michelle Self: That's right.

Sue Crockett: This is the first time you've come on the show.

Michelle Self: It is. Yeah. And I'm really excited to be here. Yeah, me too. Especially getting to watch all the episodes you put out. It's finally great to be a part of one.

Sue Crockett: It's like your turn. Yeah. I'm excited. Why didn't we do this earlier?

Michelle Self: I don't know.

Sue Crockett: I don't know. You're here now. So it's a little bit controversial show today for me because this is a topic I'm a little uncomfortable with, I gotta tell you. So before Christmas, I started filming a series about protocols and I asked you guys to consider how you decide what you do on a daily basis. What are your habits? What are your protocols?

And we are starting a series where we go through those protocols one by one. So like, what is your eating protocol? What is your sleeping protocol? And today we're talking about what is your beauty protocol and how you decide about what you do or don't wanna do for your beauty protocols.

So I had taken my nails off for about two months. I didn't film very much during that two months. And I let my under nail, my real nail, like grow out and get thick. And I thought, I didn't think I was going to put the acrylics back on. And then they got all grown out and they still were splitting stuff and I thought, I feel prettier when I have these on because my nails just aren't very pretty. And so I changed my mind. I changed my protocol. I was like, I'm going to put my nails back on.

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So today we're talking about Botox. Yes, with Michelle. So Michelle does Botox through our office. So she does a whole lot of stuff in our office, general GYN stuff. Tell us a little bit about what you do.

Michelle Self: So I am doing a lot of women's health, obviously, in a GYN office. And something that I'm shying away from not just doing GYN health is also helping you know women feel beautiful on the outside and that can come from a lot of different things whether it's what your face feels like, looks like, but also weight management too because we can feel you know amazing on the inside and we can feel super happy, but if our face isn't showing us that, then that's kind of where I come in and I can help women feel better on the outside and help them feel the emotions they're feeling on the inside with Botox. Because sometimes we can have issues on the outside that we don't necessarily feel on the inside.

Sue Crockett: Exactly, right? So a couple examples are when we're overweight, we don't feel good. So a lot of times we as doctors are doing a lot of work within our office that doesn't have anything to do with surgery. That's why this talk is really great for the show because the show is a wellness show.

It's not about the surgery part. And so, for a long time I was resistant to doing very much other than just the pure surgery stuff in the office. I didn't do much counseling. I didn't do much weight loss management. I had no aesthetics. Well, it's not true. I tried for a little bit and it didn't work. It just didn't work out. And so, and I'm not a huge fan of Botox, right?

Michelle Self: Yeah, and I don't know if you want to talk about your experience.

Sue Crockett: I think we should. What I want y'all to know about this is I'm not coming on here going oh Botox is great. The purpose of this show is to talk through kind of how we figure out what we want to do for ourselves, for our beauty regimes or beauty protocols, and talking about changing those

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decisions or trying new things as we grow and all the different reasons why we might do those things.

So I've had Botox, y'all, twice in my life. I know I don't have it right now. Like look at these. I always say you're supposed to have wrinkles on your forehead, right? No. Okay. So I've had it twice. So the first time was, I don't know if I want to tell this story, but the first time was I had a patient who was a doctor who came to her post-op visit in my office a long time ago, and she brought me Botox as a thank you gift.

Michelle Self: That's great.

Sue Crockett: It was like very persuasive, because what am I going to say, no? I mean, she caught me totally off guard. She's like, here, just let me get you real quick.

Michelle Self: You did that in the middle of your schedule?

Sue Crockett: In the middle of my schedule, in her post-op visit. She's like, it'll only take me two seconds. I'm so grateful for what you did. Let me do something for you. And I'm like, okay.

Michelle Self: You can't say no to that.

Sue Crockett: I couldn't say no to it. I mean, she's somebody who did it in her office all the time. And so I did it that time. And it was the funniest thing. It was a really heavy Botox. And I had kids that were teenagers at the time. It tells you how long ago it was. And I couldn't scowl at them. And they started making fun of me. Like I had no expression at all.

Michelle Self: And I, oh, that's good.

Sue Crockett: They just, I would be like, you know, lecturing them and they would just laugh at me, then point at my forehead and just laugh like, Mom.

Michelle Self: I'm going to have to ask Lindsay about this next week.

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Sue Crockett: So after that, I was like, I'm never doing that again. And I have done some other things so I got a blepharoplasty a couple years ago which was awesome because...

Michelle Self: Yeah absolutely

Sue Crockett: I'd like 30% occlusion of my hooded eyes. Y'all can go back and see pictures. And I've had fillers. It's been a while since I had that.

Michelle Self: Oh really? Yeah. What did you think about the fillers?

Sue Crockett: I loved the fillers. Really? Yeah. So, in fact, I've been thinking about going back and getting a little bit more. They just did a little bit here, which took up the puffiness here, and a little right along here, which took some of that ridge out. But I got a lot of fat on my face. I don't need a lot of filler.

So I swore I would never do Botox. And then when I started working with my plastic surgeon for the eyes a couple years ago, they talked me into it in the office and they were like, let's just do the fillers and some Botox and stuff. And what they were trying to do is lift my eyebrows up before my surgery. We were trying that before we did surgery. And it ended up like, I did not like it. Like my face felt like flattened and wide and the eyebrows were weird. And I was like, okay, I'm not doing this anymore.

Michelle Self: Well, I think that everyone's experience with Botox is, it's totally different. And sometimes we do Botox for a lot of different reasons.

Sue Crockett: Yeah. So tell me some of what you see because it was kind of interesting to me as we started talking about what women come in with and why they do it and how they make those decisions.

Michelle Self: Absolutely. So I've had, you know, just the basic, like, I don't like lines on my forehead. I don't like these crow's feet. I don't like the scowling elevens. And so there is the cosmetic feature of wanting to kind of minimize lines and look youthful.

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But there is also, you know, actual features of our face that can, you know, be not necessarily fixed, but it can help with like functionality of things. And I think it's a really good, it's a really good point that you brought up that your plastic surgeon wanted to do the lift in your eyebrows because that's true. There's as we age, you know, we're going to have that laxity in our skin. We're not always going to have the tight skin in our face. It's going to become lax.

And so sometimes that can be heavy on your face. And so just recently I had a woman in about her early seventies and she came in and she just hated that she was always being told she had RBF.

Sue Crockett: That resting B face?

Michelle Self: The resting B face, yeah. And she really didn't, but it was just she had so many lines and so many years of, you know, having that loss of elasticity that she just had this RBF. And so we did this very light Botox in her forehead just right in here and it really helped smooth out her face. And so she was able to give her true expression. It wasn't just about cosmetic feature, it was truly helping portray to her family she doesn't have an RBF. And people were...

Sue Crockett: She's not mad all the time.

Michelle Self: She's not mad all the time. Yeah. And so she was super happy with the initial set of results and came in and we went a little bit heavier with some Botox and She's really happy with where she's at, even now, three, four months later.

Sue Crockett: Well, that's a testament to your skill also, because, I mean, honestly, when you first came to me and said, Dr. Crockett, I want to go get trained and do this, I was like. But you were so passionate about it, and you were so excited, and I'm up for trying new things. So we've added a couple cash line, cash pay lines now and this time successfully, the vitamin line is launching and we've got some hormone replacement therapy that's really helpful.

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And so I thought, okay, this isn't like trying to bite off a whole lot. It's not a big deal. It's a little thing. Let's see what you can do. Let's see how it works. And so you came back and you got trained.

And then I watched you do an injection on one of my friends. And it was really amazing to watch you do because you have quite an artistry. You have an artist's eye when you do it and not everybody does. The first one for sure that I had done was pretty clinical. And I think having somebody like you that has some knowledge about all of the physiology that's going on with the muscles underneath and the different types of substances that you're using are, I think that makes a big difference.

So can you talk a little bit about that? Like how you determine the placement and how much and the different types of Botox that you use?

Sue Crockett: Yeah. I absolutely agree. It is an artistry and I think it's also really important to go and have Botox done with someone who has had, one, the appropriate training and two, the appropriate licensure to do it because you're very right, there's people who will just take the clinical approach and oh, the book says do here and here and I'm just going to put it there. But I understand what muscles I'm trying to affect. I understand what I want to paralyze with the neurotoxin because it's a neurotoxin and it's a very serious decision to make.

And so if I can be intentional with where I want that Botox to go, it's gonna give you the best results. So choosing the type of Botox is absolutely even more important because there are some women who, you know, they're new to Botox. Like my 70 year old coming in, she's very new. I'm not gonna put the most heavy type of Botox, which would be something called Dysport, which lasts a very long time. That's like six months of her being with something she doesn't like.

So I wouldn't do something like that. That's the very long acting and very heavy Botox. But then there's also Xeomin, which is probably my favorite and definitely what I recommend mostly for women who are either on the



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fence or just not sure or they have been doing Botox for a long time and they like the light feeling of Botox and not being completely frozen because you don't want to be looking at someone and like, I'm very upset with you right now.

Sue Crockett: Right, like my experience was in the beginning.

Michelle Self: I like Xeomin, which is what I try to, you know, encourage for everybody, because I like to refer to that as like the feather Botox. And feather Botox is exactly how it sounds. It's very light. It's not going to make you feel like you have a five-pound weight on your forehead.

It's not going to keep your eyes from shedding. It's not going to keep your mouth from being able to suck on a straw. That is my favorite. But then there's Botox, which is just the very traditional Botox. Women who have come and had lots of Botox in their life, I'd probably recommend something like that because some people like that heavy feeling.

And it's really funny because one of our employees that I do her Botox, every time I do her Botox, she's like, "Oh, I love the way that it pops when you hit that on my forehead." I'm like, "That's kind of weird, but okay, if you like it." And everybody has different preferences, but I always try to educate with, you know, what I think would be the most appropriate, because that's part of the artistry of Botox is making sure you're communicating what they think they should have, but also incorporating them in the decision on where they want Botox.

Sue Crockett: Yeah, I think those are really good points. So I think before I had you working like this in the office, I didn't even know that there were all those different kinds or options. Okay, so y'all, I swore I'd never get Botox again. But...

Michelle Self: It's only taken a year of trying to get her to do this.

Sue Crockett: Here's what we're going to do. This is my before. We're not going to show you the actual injections on TV because I don't want to show

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that that that's too much. But much. But let's show you looking at my face and marking my face. Okay. And this will be the beforehand. And then we'll come back and do an after. Let's do it.

Welcome back to the Dr. Crockett Show. This is the after. This is Michelle Self. We just took a little break and I don't know if you can see or not, but I let her do Botox on my forehead. So it's a little bumpy. It really wasn't bad. You did a beautiful job. You used the feather...

Michelle Self: Thank you. The feather Xeomens. So we should actually, when I see you this next week in clinic, we should already start to see a little bit of some, you know...

Sue Crockett: Softening.

Michelle Self: Yep, exactly. And then in about a week, you'll probably be a lot more softened.

Sue Crockett: So that my outsides look as happy as my insides are?

Michelle Self: Exactly.

Sue Crockett: So we always talk about how on the show we're going where the scalpel doesn't reach but in practice that's what I'm doing. I'm always fixing everybody's insides. It's kind of different to sit here working on my outside.

Michelle Self: It is.

Sue Crockett: Thank you very much.

Michelle Self: You're absolutely welcome. And I'm excited to see results.

Sue Crockett: I am too. I'm a little nervous. I seriously, y'all, I woke up this morning and I was like, there is no way they're doing Botox to me today. There's no way. I know she's going to bring it. We didn't plan this. I swear

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to y'all, we did no plan this. We did it. We knew we were going to talk about it, but I know she walked in. I'm like, no, here I am 30 minutes later.

Michelle Self: Very light Botox.

Sue Crockett: It is. Thank you so much.

Michelle Self: You're very welcome.

Sue Crockett: Y'all have a wonderful week and I want you to think about your own beauty protocols for yourself. Maybe it's your makeup, maybe it's not wearing makeup, maybe it is just getting a good night's sleep or washing your face every day like your mama used to tell you.

I hope you have a wonderful week. We will see you next week on the Dr. Crockett Show and if you want to have your Botox done and you live near San Antonio, come see Michelle. Michelle Self at Virtuosa GYN. We'll put the link down below. Y'all have a great week. Thank you. Bye.

Oh, and stay tuned to see what the results of this looks like in two weeks. Yeah, I'll be on the air. We'll see you. Bye, y'all.

Thanks for listening to this episode of *Becoming Virtuosa*. To learn more, come visit us at [DrCrockett.com](http://DrCrockett.com), or find us on YouTube for the Dr. Crockett Show. If you found this episode helpful or think it might help someone else, please like, subscribe, and share. This is how we grow together. Thanks, and I'll see you next week. Love always, Sue.