




## THE ROLE OF THE MICROPIGMENTATION ARTIST IN THE MULTIDISCIPLINARY TEAM OF AESTHETIC AND EMOTIONAL REHABILITATION

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### ABSTRACT

Paramedical micropigmentation has been consolidated as a relevant resource in the aesthetic and emotional rehabilitation of women undergoing mastectomy, acting as a complementary step to the breast reconstruction process and contributing to the restoration of self-esteem and body self-perception. This study analyzed Brazilian scientific publications that address the role of micropigmentation in the multidisciplinary context, evidencing the importance of its integration with other health professionals to obtain aesthetically satisfactory and psychologically significant results. Benefits related to visual naturalness, reduction of emotional impacts, and improvement in quality of life were observed, with emphasis on the need for continuous training and adoption of biosafety protocols. The findings reinforce that the qualified performance of the micropigmentation artist enhances the positive effects of the treatment, consolidating paramedical micropigmentation as an effective tool in post-mastectomy rehabilitation.

**Keywords:** Paramedical micropigmentation. Aesthetic rehabilitation. Self-esteem. Mastectomy. Multidisciplinary team.



## 1 INTRODUCTION

Paramedical micropigmentation has been consolidated as an essential resource in the field of aesthetic and emotional rehabilitation of women undergoing mastectomy, being incorporated as a final step in protocols for the reconstruction of the areolar-papillary complex because it offers results that combine aesthetic benefits and positive psychological impact, providing not only the return of a natural appearance to the breast, but also favoring the recovery of self-esteem and body identity, aspects often compromised by breast cancer and the surgical process of partial or total removal of the breast (Nascimento de Souza et al., 2019).

Breast cancer, in addition to its physical impact, represents a challenging experience that directly influences the self-image, femininity and quality of life of patients, making it essential that rehabilitation is not restricted to the clinical dimension, but also contemplates the symbolic and aesthetic reconstruction of the body, where micropigmentation presents itself as a less invasive alternative, low-cost and with rapid recovery, enabling satisfactory results for both the patient and the multidisciplinary team involved (Cascardo et al., 2019).

The technique consists of introducing specific pigments into the superficial dermis through devices such as dermographs, enabling the recreation of the areola and nipple with three-dimensional realism, and is indicated especially for patients who have already undergone surgical breast reconstruction and seek to improve the aesthetic result or disguise residual scars, expanding the sense of completeness and reintegration of the reconstructed breast into the body as a whole (Nascimento de Souza et al., 2019).

Studies indicate that micropigmentation is not only an aesthetic procedure, but an intervention capable of promoting profound emotional benefits, strengthening the perception of well-being, improving interpersonal relationships and contributing to the resumption of social and professional activities, these being essential elements in the process of reinserting the patient into her daily life after cancer treatment (Viana et al., 2018).

The applicability of this technique is reinforced by the possibility of integration into multiprofessional care protocols, in which plastic surgeons, dermatofunctional physiotherapists, oncologists, and specialized beauticians come together to ensure that the final result meets not only the technical parameters of symmetry and color, but also



the subjective expectations of the patient, valuing her active participation in the decision-making process (Machado et al., 2017).

Another relevant aspect is the durability and stability of the color obtained with micropigmentation, which depends both on the quality of the pigments used and on the technical execution, including the depth of application and post-procedure care, factors that require qualified professionals who are aware of the biosafety requirements and the health regulations applicable to the procedure (Dalmolin et al., 2020).

From a physiological point of view, the technique does not interfere with the remaining breast functions nor does it present significant risks when performed by qualified professionals, and is considered safe and has a low complication rate, which broadens its indication for patients who, for medical or personal reasons, do not wish or cannot undergo new invasive reconstructive surgeries (Brandão et al., 2014).

The justification for this study is based on the need to expand scientific and practical knowledge about paramedical micropigmentation as an integral part of the aesthetic and emotional rehabilitation of mastectomized patients, seeking to contribute so that more health professionals recognize the potential of this technique and can indicate it in a safe and grounded way, raising the quality of care provided (Nascimento de Souza et al., 2019).

In addition, the choice to investigate the role of the micropigmentation artist in the multidisciplinary team is associated with the relevance of understanding how this professional articulates with the other members of cancer care, assuming responsibilities that go beyond technical execution and reach dimensions of welcoming, active listening, and health education (Cascardo et al., 2019).

Considering that self-esteem directly influences the recovery process and the patient's engagement with the treatment, understanding the positive impact of micropigmentation allows the multidisciplinary team to develop more integrated and humanized approaches, enhancing the therapeutic effects and strengthening the professional-patient relationship (Nascimento de Souza et al., 2019).

The objective of this study is to analyze the importance of the micropigmentation artist as a member of the multidisciplinary team of aesthetic and emotional rehabilitation, investigating how their performance contributes to the improvement of self-esteem, social reintegration and aesthetic satisfaction of mastectomized patients, based on scientific evidence and reports documented in the literature (Viana et al., 2018).



It is hoped that the research can support future professional and academic practices, stimulating the training of micropigmentation artists in the paramedical context and fostering health policies that officially recognize this intervention as part of the post-mastectomy rehabilitation protocol, expanding access to a procedure that combines low risk, affordable cost, and significant aesthetic and emotional benefits.

## **2 THEORETICAL FRAMEWORK**

### **2.1 MICROPIGMENTATION AS A RESOURCE FOR AESTHETIC REHABILITATION**

Paramedical micropigmentation is a procedure that has been consolidated as an important part of the aesthetic rehabilitation of women undergoing mastectomy, being recognized for faithfully reproducing the visual characteristics of the areola and nipple, directly impacting the patient's perception of her own body and facilitating her social reintegration, while improving self-esteem by providing a result that naturally imitates the original anatomy, minimizing physical and emotional marks resulting from cancer treatment (Nascimento de Souza et al., 2019).

The relevance of this technique lies in its ability to offer a less invasive and more affordable solution when compared to surgical procedures, allowing patients who do not want or cannot undergo new surgeries to achieve a satisfactory and lasting result, being an alternative that is integrated into rehabilitation protocols and can be indicated in different phases of treatment, provided that the adequate postoperative recovery time is respected (Cascardo et al., 2019).

The choice for micropigmentation is motivated by the desire to restore the symmetry and naturalness of the breasts, the need to reduce the visual impact of the scars and the importance of completing the reconstruction process in a less traumatic way, demonstrating the value of the procedure within a multidisciplinary approach that considers not only the physical aspects, but also the emotional and social aspects of recovery (Nascimento de Souza et al., 2019).

Proper execution requires knowledge about coloring, anatomy, and techniques to simulate textures and depths, factors that directly influence the realism of the result, as well as the ability to adapt the procedure to the particularities of each patient, considering skin tone, healing patterns, and individual preferences, reinforcing the importance of continuous professional training (Viana et al., 2018).



The micropigmentator, when inserted in a multidisciplinary team, works together with plastic surgeons and dermatofunctional physiotherapists, enabling a complete and personalized service, in which each professional contributes to making the patient feel welcomed and confident throughout the breast reconstruction process (Machado et al., 2017).

In addition to the visual result, micropigmentation has a positive psychological effect as it represents a symbolic stage of treatment closure and recovery of body identity, strengthening self-care and encouraging the patient to resume activities that could have been avoided due to insecurity about her appearance (Dalmolin et al., 2020).

The aesthetic result obtained with the technique depends on the quality of the pigments, the precision of the application and the adherence to post-procedure care, which includes avoiding intense sun exposure, following hygiene protocols and performing periodic maintenance to preserve color and shape, ensuring greater durability and uniformity of the effect (Brandão et al., 2014).

The literature indicates that paramedical micropigmentation does not fully replace other reconstructive techniques, but complements them effectively, providing an aesthetic finish that enhances the naturalness of the final result and generates satisfaction for both the patient and the professionals involved (Nascimento de Souza et al., 2019).

The procedure is well tolerated, has a low rate of adverse effects and, when performed by qualified professionals, is safe, and is contraindicated only in cases such as active local infections, allergy to pigments or dermatological diseases that may compromise the result (Cascardo et al., 2019).

The use of quality pigments and the correct calibration of equipment are crucial to avoid complications such as color changes, early fading, or irregularities in the shape, which highlights the need for technical knowledge and respect for biosafety standards (Nascimento de Souza et al., 2019).

The importance of the micropigmentation agent goes beyond the technique, involving sensitivity to understand the emotional burden associated with breast cancer and mastectomy, helping the patient to perceive this step as part of her recovery process and resignification of body image (Viana et al., 2018).

Thus, paramedical micropigmentation presents itself as a valuable resource in aesthetic rehabilitation, with the potential to offer lasting results and great emotional impact, consolidating itself as a practice that should be widely disseminated and



incorporated into care routines aimed at mastectomized patients, always based on scientific evidence and adapted to individual particularities (Machado et al., 2017).

## 2.2 THE ROLE OF THE MICROPIGMENTATION ARTIST IN THE MULTIDISCIPLINARY TEAM

The micropigmentation artist, when inserted in the multidisciplinary rehabilitation team, plays a strategic role in the aesthetic and emotional recovery of mastectomized patients, as their performance is not limited to the technical procedure, but also involves empathetic communication, understanding of individual needs and integration with other health professionals, which favors the construction of a cohesive and patient-centered therapeutic plan (Nascimento de Souza et al., 2019).

The presence of this professional expands the team's ability to offer personalized solutions, considering that the process of reconstructing the areola through micropigmentation requires careful evaluation of the most appropriate time for the intervention, the choice of technique, the selection of colors and the approach to achieve maximum naturalness, factors that can only be fully met through collaborative work between different areas (Cascardo et al., 2019).

The micropigmentation helps the patient understand all the stages of the procedure, including its limitations and subsequent care, which is essential to align expectations and reduce the risk of frustration, strengthening the relationship of trust between professional and patient and promoting greater adherence to the treatment indicated by the team (Nascimento de Souza et al., 2019).

Alongside plastic surgeons, dermatofunctional physiotherapists and psychologists, the micropigmentation artist actively participates in the rehabilitation process, offering a technical and artistic look to complement the clinical work, ensuring that the patient receives comprehensive care that includes both aesthetic function and emotional well-being (Viana et al., 2018).

Their work requires advanced technical skills, such as mastery of skin pigmentation variations, notions of anatomy, skin physiology and knowledge about healing processes, as well as sensitivity to adapt each detail of the procedure to the patient's particularities, which requires continuous training and updating on new techniques and materials (Machado et al., 2017).



Another relevant aspect is the role of the micropigmentation artist as a facilitator of the dialogue between the patient and the team, clarifying doubts about the final appearance, explaining the possibilities of correcting asymmetries, and psychologically preparing for any adjustments, which contributes to making the experience positive and safe (Dalmolin et al., 2020).

In the field of biosafety, this professional is responsible for ensuring that the entire process is carried out in accordance with sanitary standards, from the sterilization of materials to the correct disposal of waste, preventing risks of infection and ensuring an adequate environment for the execution of the procedure (Brandão et al., 2014).

The integration of the micropigmentation artist in the team also favors the standardization of protocols, allowing for coherence between the guidelines given to the patient and the expected result, which is essential to maintain the quality of the service provided and ensure satisfaction with the treatment (Nascimento de Souza et al., 2019).

The bond that the micropigmentation artist establishes with the patient contributes to her perceiving micropigmentation as an integral part of breast reconstruction and not necessarily just as an isolated aesthetic resource, strengthening the feeling of completion of the treatment and increasing the acceptance of the new body image (Cascardo et al., 2019).

The ethical and responsible performance of this professional involves respecting clinical limits, recognizing situations in which the procedure should be postponed, and referring the patient to other specialists when necessary, avoiding complications and preserving general health (Nascimento de Souza et al., 2019).

In addition to performing the procedure, the micropigmentation artist guides the patient on home care, such as proper hygiene, sun protection, and periodic follow-up, ensuring that the result remains stable and preserving the integrity of the skin in the long term (Viana et al., 2018).

Thus, the role of the micropigmentation artist in the multidisciplinary team goes beyond the technique, configuring itself as an essential element in the promotion of humanized, technically precise and emotionally welcoming care, which contributes to the full recovery of the mastectomized patient, reinforcing the importance of integration between the different areas involved (Machado et al., 2017).





### 2.3 TECHNICAL PROTOCOLS AND BIOSAFETY IN PARAMEDICAL MICROPIGMENTATION

The indication of micropigmentation requires careful evaluation of the postoperative time and the end of adjuvant therapies, considering adequate healing, volumetric stabilization of the reconstruction and absence of active inflammatory processes, parameters that favor aesthetic predictability and reduce complications, with the literature recommending waiting for tissue consolidation before the beginning of the chromatic and geometric planning of the areola-papillary complex (Nascimento de Souza et al., 2019).

The guided anamnesis should include a history of allergies to pigments and topical anesthetics, a tendency to hypertrophic or keloidal scarring, cutaneous phototype, use of anticoagulants and previous radiotherapy, factors that influence safe depth of deposition, pigment retention rate, and post-procedure care design, in addition to supporting informed consent with an emphasis on realistic expectations (Cascardo et al., 2019).

The selection of materials prioritizes stable and duly certified pigments, free of contaminants and with controlled metallic traces, seeking resistance to photodegradation and coherence with the patient's skin palette, while needles, cartridges and dermographs must ensure precision, low vibration and barrier integrity, composing a work system that favors safety and reproducibility (Brandão et al., 2014).

The colorimetry applied involves reading undertones, using neutralizers when necessary, and combining color temperatures to simulate natural transitions, adopting strategies to compensate for the expected physiological lightening during healing, with discrete prior tests when there is doubt about individual response, which supports chromatic stability and naturalness of the result (Viana et al., 2018).

The design planning is based on anatomical references, thoracic base measurements, and symmetry analysis at rest and in movement, defining diameter, smooth edges, and internal tonal variations that confer verisimilitude, with previous sketches and joint visual validation with the patient to consolidate aesthetic alignment before the implantation phase (Nascimento de Souza et al., 2019).

The implantation technique favors uniform depth in the superficial dermis, constant speed and controlled overlapping of passes to avoid saturation and trauma, distributing the density of points to create gradations and three-dimensional effect, while fine





adjustments are made by layers, respecting skin limits and the immediate response of the tissue (Machado et al., 2017).

In areas with scars or previously irradiated tissue, it is recommended to reduce mechanical aggressiveness, extend rest intervals between microzones, and consider additional sessions with lower load, since local vascularization and elasticity may be altered, requiring a conservative strategy to preserve integrity and optimize pigment retention (Nascimento de Souza et al., 2019).

Biosafety protocols include contact barriers, cutaneous antisepsis in stages, sterile field in critical elements, correct disposal of sharps and traceability of batches, adding terminal cleaning of the workstation and integrity check of consumables, measures that mitigate biological risk and reinforce the quality of care (Brandão et al., 2014).

The management of pain and comfort uses anticipatory communication and non-pharmacological techniques, and may employ topical anesthetics according to evaluation and local standards, maintaining vigilance over vasovagal signs and regular pauses to reduce muscle tension, which contributes to precise execution and positive perception of the experience (Cascardo et al., 2019).

Post-procedure guidelines include delicate hygiene, protection against friction and solar radiation, controlled hydration, temporary prohibition of immersion and intense physical activity, as well as monitoring of warning signs, defining a window for touch-up after healing stabilization, a step that adjusts microasymmetry and reinforces chromatic nuances (Nascimento de Souza et al., 2019).

Communication of potential risks encompasses hypo- or hyperpigmentation, accelerated fading, irritative reactions, and infection, presenting expected rates, mitigation conducts, and follow-up plan, with standardized photographic record and satisfaction metrics to support continuous improvement and shared decision-making (Dalmolin et al., 2020).

Professional qualification requires specific training in paramedical micropigmentation, supervised training, periodic updating in pigmentology, biosafety, and complication management, as well as integration with the team for consistent protocols, strengthening clinical safety and the consistency of results in different patient profiles (Machado et al., 2017).



### 3 METHODOLOGY

The present research was designed as a study with a qualitative approach, as it allows a deep understanding of the perceptions, meanings and implications attributed to the role of the micropigmentation artist in the multidisciplinary team of aesthetic and emotional rehabilitation, analyzing the phenomenon not only from a technical point of view, but also in the subjective dimension experienced by the patients, which makes the qualitative method suitable for this type of investigation.

A literature review was chosen as a methodological procedure, as this type of study enables the systematization and critical analysis of existing scientific productions on the subject, allowing the identification of advances, gaps and consensus in the literature, which contributes to support the discussion and guide practical recommendations based on evidence.

Publications available in recognized scientific databases, such as SciELO, PubMed, Google Scholar and CAPES Journals, were selected, ensuring that the survey included relevant and up-to-date studies, with the objective of gathering consistent information that met the proposed thematic cut, ensuring the relevance of the sources.

Inclusion criteria were adopted that included original scientific articles, literature reviews, dissertations, theses and annals of academic events that directly or indirectly addressed paramedical micropigmentation as a resource for aesthetic rehabilitation, as well as the role of the micropigmentation artist in the multidisciplinary team, as long as they are published in Portuguese and with full access.

The exclusion criteria included publications that did not have a direct relationship with the central theme, repeated studies between databases, non-scientific dissemination materials and works that were not available in full, in order to preserve the consistency and quality of the material analyzed, avoiding interpretations based on incomplete information.

The analysis of the collected data was carried out in a descriptive and interpretative way, seeking to identify key concepts, methods employed and results observed in the selected studies, allowing a comparative reading between different approaches and contexts, and enabling the formulation of critical reflections on current practices.

For the systematization of the information, thematic categorization was used, grouping the contents found in axes that facilitated the logical organization and coherence



between the topics discussed, which allowed a structured argumentative construction aligned with the objective of the research.

The theoretical-methodological basis was supported by classic authors of scientific methodology, such as Gil and Lakatos & Marconi, who guide the bibliographic review as a process that must be conducted in a rigorous, critical and selective way, ensuring that the sources used are pertinent and of recognized credibility.

#### **4 RESULTS AND DISCUSSION**

Paramedical micropigmentation presents consistent results in restoring the visual naturalness of the reconstructed breast, being recognized as a resource capable of complementing surgical techniques and, in some cases, replacing more invasive procedures, especially in patients who have clinical restrictions or prefer less aggressive alternatives, which demonstrates the relevance of this intervention in the final stage of rehabilitation (Nascimento de Souza et al., 2019).

It was observed that patient satisfaction is directly related not only to the immediate aesthetic result, but also to the feeling of completion of the treatment, reinforcing the symbolic role of micropigmentation as a milestone in overcoming cancer and regaining self-confidence, an aspect that the literature points out as fundamental for psychosocial well-being in the post-mastectomy period (Cascardo et al., 2019).

The analyzed studies indicate that the participation of the micropigmentation artist in the multidisciplinary team contributes to the personalization of the treatment, since this professional carefully evaluates the shape, color, and desired symmetry, adapting the technique to the anatomical particularities and expectations of the patient, resulting in a higher rate of satisfaction and adherence to care (Nascimento de Souza et al., 2019).

The research also highlights that the technique is well tolerated, has a low risk of complications and provides a high rate of acceptance, with cases of significant improvement in self-esteem and body image perception after the procedure, which reinforces the role of micropigmentation not only as an aesthetic tool, but also as a therapeutic element within the rehabilitation process (Viana et al., 2018).

The performance of the micropigmentation artist, according to the studies, goes beyond the technical execution, as it includes an empathetic and informative approach, essential for the alignment of expectations and for the reduction of insecurities related to



the procedure, strengthening trust between patient and team and promoting a favorable environment for recovery (Machado et al., 2017).

It was also identified that the joint action between micropigmentation, plastic surgeon and dermatofunctional physiotherapist enhances the results, since it allows combining technical and therapeutic resources, ensuring that the patient receives comprehensive care that meets both aesthetic and functional and emotional demands (Dalmolin et al., 2020).

The quality of the pigments used and the mastery of the application techniques were pointed out as determinants for the success and durability of the result, and it is essential that the micropigmentation artist selects appropriate inputs and follows biosafety protocols, minimizing risks and preserving the integrity of the treated skin (Brandão et al., 2014).

Comparative studies have shown that, when the procedure is performed by properly trained professionals and integrated into a multidisciplinary rehabilitation plan, there is a reduction in dissatisfaction with body image and an increase in well-being indicators, which justifies the need for specific training and clearer regulation of action in the paramedical context (Nascimento de Souza et al., 2019).

The literature shows that aesthetic rehabilitation through micropigmentation also favors the resumption of social, professional, and intimate activities, as it contributes to the reconstruction of self-perception and the strengthening of female identity, aspects often shaken by the treatment of breast cancer (Cascardo et al., 2019).

The results also indicate that post-procedure follow-up is essential to ensure the maintenance of the aesthetic effect and prevent complications, and periodic touch-ups and individualized guidance for home care are recommended, in order to prolong the durability and quality of micropigmentation (Nascimento de Souza et al., 2019).

Some studies have highlighted that, in addition to directly benefiting the patient, the insertion of micropigmentation in the hospital context or in specialized clinics contributes to the strengthening of teamwork, stimulating the exchange of knowledge and the development of integrated protocols that improve the rehabilitation experience (Viana et al., 2018).

Thus, the discussion of the results allows us to conclude that paramedical micropigmentation is a scientifically supported resource for its use in the context of aesthetic and emotional rehabilitation of mastectomized women, as long as it is



performed by qualified professionals, with adequate inputs and in articulation with a multidisciplinary team committed to the patient's global well-being (Machado et al., 2017).

## 5 FINAL CONSIDERATIONS

The analysis carried out throughout this study allowed us to understand that paramedical micropigmentation, when inserted in a process of aesthetic and emotional rehabilitation, transcends the purely aesthetic function and assumes a role of psychological and symbolic support for women who have experienced breast cancer. The construction of self-esteem and the recovery of body self-perception emerge as central elements of this technique, reinforcing the importance of approaches that integrate physical and emotional care.

When considering the presence of the micropigmentation artist in the multidisciplinary team, it is verified that the performance of this professional contributes directly to the humanization of care, adding sensitivity, empathy and personalization to the rehabilitation process. This insertion promotes a broader approach, capable of understanding and meeting the individual expectations of each patient, strengthening the bond between professional and client and favoring adherence to the stages of treatment.

The results obtained also show that the integration between different health professionals enhances the benefits of micropigmentation, ensuring that the treatment is directed not only to the visual reconstruction of the breast, but also to functionality and physical comfort. This alignment between specialties strengthens the effectiveness of the rehabilitation process and promotes comprehensive care, capable of meeting the multiple demands presented by patients.

Another relevant aspect is the importance of continuous training of the micropigmentator, who must master not only the application techniques, but also keep up to date with advances in pigments, equipment and biosafety protocols. Professional qualification is a determining factor for obtaining long-lasting, safe and aesthetically satisfactory results, aligned with the patient's needs and health.

In addition to technical training, the micropigmentation artist who works in the paramedical context needs to develop communication and active listening skills, in order to understand the history of each patient and adapt the procedure to their expectations and limitations. This ability to establish an open and respectful dialogue contributes to building trust and reducing anxieties and insecurities related to the procedure.



The durability and quality of micropigmentation depend not only on the initial execution, but also on the subsequent follow-up and the appropriate guidelines for home care. The adoption of a follow-up protocol strengthens the relationship of continuous care and ensures that the patient maintains the benefits of the procedure over time, preserving her satisfaction and well-being.

The study also reinforces that the role of the micropigmentation artist is not limited to the clinical environment, but can expand to contexts of teaching, research and development of new techniques, contributing to the consolidation of paramedical micropigmentation as a recognized and valued area in the field of health and aesthetics. This engagement on different fronts increases the visibility of the profession and encourages the standardization of quality practices.

The social and psychological relevance of paramedical micropigmentation points to the need for greater institutional recognition and regulation in order to ensure that the practice is carried out with clear training and qualification criteria. This regulation would contribute to increasing the safety of procedures and strengthening patients' confidence in the professional and the technique.

The findings of this study also suggest that the dissemination of information about paramedical micropigmentation, both for professionals and patients, can expand access to this resource, favoring more women to have the opportunity to complete their rehabilitation process satisfactorily and with a positive impact on their self-esteem and quality of life.

Thus, the evidence gathered allows us to affirm that paramedical micropigmentation, when integrated with multidisciplinary care and conducted by qualified professionals, represents a valuable tool for the aesthetic and emotional rehabilitation of mastectomized women, reaffirming its role as an essential part of a recovery process that goes beyond appearance and reaches deep dimensions of well-being and self-confidence.



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