TWO COMPLEMENTARY TECHNOLOGIES

Texture, tone & skin quality

Treatment opportunities and combination ideas for aesthetic professionals.





RF MICRONEEDLING

Texture & remodeling

Uses fine needles and RF energy to support collagen remodeling. Consider for depressed acne scars, enlarged-pore appearance, fine lines and selected mild skin laxity. [1, 3]



IPL PHOTOFACIAL

Color & clarity

Uses filtered broad-spectrum light to target selected pigment and visible vascular changes. Consider for appropriate sun spots, uneven tone and redness. [4, 5]

What the supplied M8X manual lists

RF: 12P, 24P, 40P and NANO tips; adjustable needle-depth range 0.5-7.0 mm. **IPL:** filter labels 430 / 530 / 560 / 640 / 690 nm. These are supplier specifications; the maximum depth is not a facial treatment recommendation.

A practical treatment menu

Client concern	Possible approach
Acne scars + residual red marks	RF for texture; selected IPL for redness, in a staged plan.
Uneven tone + early skin aging	Selected IPL for color; RF for texture and fine lines.
Enlarged pores + rough skin	RF-led skin-quality program plus appropriate home care.

Treatment selection depends on diagnosis, skin type, the exact device configuration and its locally permitted indications. This is a service-planning guide, not an operating protocol.

PRIORITY APPLICATION

Acne, scars & post-acne marks

Different acne-related concerns need different treatments. They may coexist in the same client.

01 Control new breakouts first

Start with an acne assessment and an evidence-based medical or skin-care plan. Do not routinely needle over painful, pus-filled or deep inflamed lesions. Scar work generally follows control of the active acne. [1, 2, 3]

Concern	Role of M8X	Useful partner treatment
Active inflammatory acne	IPL may be considered as an adjunct in selected cases; not a substitute for acne treatment.	Clinician-directed acne care, gentle cleansing, suitable moisturizer and sun protection. [2]
Depressed acne scars / pits	RF microneedling may improve the appearance of selected atrophic scars. IPL does not rebuild the depression.	For tethered or deep focal scars, a dermatologist may add scar-release procedures or other scar-specific treatments. [1, 8]
Flat pink / red marks (PIE)	Selected IPL can target residual vascular redness, if the skin and filter are suitable.	Ongoing acne control and barrier care. Consider specialist vascular treatment if persistent. [4]
Flat brown marks (PIH)	IPL is not the automatic first choice, especially in darker or pigment-prone skin.	Sun protection and clinician-selected pigment care first; consider a procedure only after assessment. [2, 11, 12]

Example: old acne pits with red marks

Assess acne activity and scar type → **control** ongoing breakouts → **plan RF** for the depressed texture → **consider IPL** for persistent red marks after recovery → **review** photographs and adjust the plan. These are separate treatment goals, not a mandatory same-day package.

Evidence in context: a small 2024 trial investigated combined needle RF and vacuum-assisted IPL for acne. It used a different system, so its findings do not validate M8X or establish a routine M8X acne protocol. The AAD found insufficient evidence to recommend device procedures routinely for active acne. [2, 6]

ADDITIONAL SERVICE IDEAS

Build the menu around the concern

The options below are conditional treatment concepts, subject to the device instructions and clinical assessment.

RF-LED PROGRAM

Pores & uneven texture

Aim to soften the appearance of enlarged pores and uneven texture. Pair with appropriate acne / oil-control care and maintenance skin care. Pores are not permanently closed. [3]

RF-LED PROGRAM

Fine lines & mild laxity

Consider RF for gradual improvement in skin quality and selected mild laxity. Add IPL only when pigment or redness is also a concern. Results do not equal a surgical lift. [3, 5]

IPL-LED PROGRAM

Sun spots & uneven tone

Selected benign superficial spots may respond to IPL. Pair with daily sun protection. Assess the lesion first; unexplained, changing or suspicious spots need medical evaluation. [5]

IPL-LED PROGRAM

Redness & visible vessels

Consider IPL for suitable vascular redness or small visible facial vessels. Persistent flushing or suspected rosacea needs diagnosis and a wider management plan. [4, 5]

SELECTED RF ASSESSMENT

Scars & stretch marks

Some scars and stretch marks may be considered for a remodeling program. Improvement is variable; raised scars and keloids require a different specialist plan. [1, 3]

STAGED RF + IPL

Mixed photoaging

For a client with uneven color plus rough texture or fine lines, use each modality for its own goal. Reassess the healed skin before adding the second procedure. [3, 5]

Separate assessment needed: melasma and diffuse post-inflammatory pigmentation should not be sold as routine IPL spot removal. Hair reduction and fat reduction are not established by the supplied information and are not included in this treatment menu. [9]

COMBINATION PLANNING

What to combine, and why

Select the partner treatment for the remaining problem. More procedures do not automatically mean a better result.

Combination	When it may help	How to position it
RF + IPL	Texture / depressed scars together with suitable redness or superficial sun damage.	A staged texture-and-tone plan; one or both technologies may be used. [1, 4, 5]
M8X + acne care	Breakouts are continuing while old scars or marks remain.	Treat the disease first and prevent new lesions; add scar or mark work when appropriate. [1, 2]
RF + specialist scar treatment	Scars are tethered, very deep or have different shapes.	A dermatologist may add scar release, focal surgery, fillers or resurfacing, based on scar type. [1]
M8X + selected chemical peel	A separate superficial tone or congestion concern remains.	Only when suitable for the diagnosis; schedule separately after recovery. Peels are not a required add-on. [1]
M8X + home care	Support recovery and longer-term skin quality.	Individualized cleansing, moisturizer and sun protection; restart active products when advised. [3]

Match the combination to the goal

Controlled acne + shallow pits + red marks: consider RF for scars, then selected IPL for residual redness. Sun spots alone may need only IPL; depressed scars alone may not need IPL.

Keep the recovery window clear

Without a validated M8X same-session protocol, schedule modalities separately after recovery and reassessment. The practitioner sets the order and interval using the device instructions, skin response and concurrent treatments.

Freshly needled skin: avoid strong acids, exfoliating peels and unapproved serums. FDA-authorized microneedling devices are not authorized to deliver cosmetics, drugs or blood products into the skin. [7]

CONSULTATION & EVIDENCE

Plan for the individual client

Agree on the main goal, realistic improvement, recovery needs and follow-up before treatment.

Before a course begins

Review skin tone and tanning, active infection or inflammation, pigmentation tendency, healing / keloid history, medicines and recent procedures. Review pregnancy and implanted electronic devices against the device contraindications. For IPL, confirm suitability of the exact filter and consider a test area under the manufacturer's protocol. Use appropriate eye protection. [3, 7]

Recovery & expectations

Redness, swelling, discomfort and temporary skin changes can occur; downtime varies. Use a new sterile single-use needle cartridge for every patient and session. Give written aftercare, sun-protection guidance and a clear contact plan. Results may take a course of treatment and continued remodeling; complete scar or pigment removal cannot be promised. [1, 3, 7]

RF safety: the FDA reported serious complications with certain RF microneedling uses, including burns, scars, unwanted fat loss and nerve damage. Treatment requires a suitably licensed, trained practitioner and an appropriate device-specific protocol. Seek prompt medical review for blistering, worsening pain, infection signs or persistent sensory changes. [10]

Sources & scope

Hardware descriptions and photographs: supplied M8X (M8+IPL) Details manual, pp. 1-3. Clinical sources below discuss treatment categories or other devices; they do not demonstrate M8X-specific efficacy or regulatory authorization. Reviewed 17 November 2026. Numbered links are clickable.

[1] AAD. Acne scars: consultation and treatment.

[2] AAD. Updated acne management guidelines (2024).

[3] AAD. Microneedling: applications, suitability and care.

[4] Al-Quran et al. IPL filters for post-acne erythema (2023). PMID 37547541.

[5] Hedelund et al. IPL rejuvenation: randomized split-face trial (2006).

[6] Kim et al. Combined needle RF / IPL for acne (2024). PMID 39343753.

[7] FDA. Microneedling devices: safety, cartridges and product delivery.

[8] Min et al. RF microneedling for acne / scars (2015). PMID 26472097.

[9] AAD. Melasma: diagnosis and treatment.

[10] FDA. RF microneedling safety communication (15 October 2025).

[11] AAD. How to fade dark spots in darker skin tones.

[12] AAD. Skin conditions that lasers can treat; skin-tone considerations.

Application ideas only. Energy, depth, filter choice, number of passes, treatment intervals and course length must be set by the treating professional using the exact device instructions and local requirements.