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The nature reconstitued smile by facial rejuvenation with lipocontoured ubperiosteal midface and endoscpic forehead lifts in the oriental patients

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Abstract

Objective: The modified surgical techniques of the subperiosteal midface and endoscopic forehead lifts with lipocontouring were presented with clinical outcome in 30 consecutive oriental patients.

Design: Prospective cohort of 30 consecutive adult female patients who underwent rejuventation procedures, but without accompanying upper eyelid surgery in a medical center. All patients underwent bilateral infracilliary and intraoral incisions for midface subperiosteal undermining with zygomatic major and minor muscles lifted and fixed to left lateral orbital rim. The endoscopic-assisted subperiosteal forehead lift was performed through three small scalp incisions, with bilateral lateral canthal ligments sutured and fixed to the skull bone. Lipocontouring was performed to surmount glabella, supraorbital rims, the cheeks and bilateral temporal hallowing. Objective and subjective criteria were recorded and photodocumented during the postoperative period at 1 week and 1, 3, 6 and 24 months. The erythema, tenderness, and pain were recorded with a visual analog scale.

Results: All 30 patients completed the 24-month postoperative follow-up. Twenty eight patients had significant improvements in their aesthetic outcome. The enigmatic smile was constituted because the oral angles were elevated to a natural position. The most common objective symptom of forehead and malar numbness diminished before postoperative 3 months. One patient had a deviation towards left when she pursed her mouth. There were no major complications of infection, extrusion, skin irregularities, or screws protrusion.

Conclusions: Our techniques help in effective forehead and midface lifts. Temporary numbness over the forehead and malar area can be expected during the early postoperative period.