

Reduction Malarplasty According to Esthetic Facial Unit Analysis: Retrospective Clinical Study of 23 Cases

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Purpose: Because the zygoma is located in the middle third of the face, its prominence, contour, and width will have a large effect on the facial impression. Unlike whites who will mainly complain of a hypoplastic zygoma, Asians will commonly present with a prominent zygoma. The purposes of the present retrospective study were to evaluate the indications for reduction malarplasty and to analyze the complications of patients who underwent reduction malarplasty.

Patients and Materials: According to the esthetic facial unit concept, a patient with a hyperplastic anterior midface can undergo reduction body malarplasty (RBM). If a patient complains of a hyperplastic anterior and posterior mid-face, the clinician can perform reduction body and arch malarplasty (RBAM). The subjects included 23 adult patients (5 males and 18 females; mean age 22 years; 11 RBM and 12 RBAM; mean follow-up period 30 months).

Results: The early and late postoperative complications and patient satisfaction with their appearance were investigated retrospectively. Complications after RBM included transient skin numbness around the zygoma in 1, a nonfractured zygomatic arch in 1, and a nonunionized zygomatic body in 1. After RBAM, 3 patients complained of transient skin numbness around the zygoma and 2 of transient injury to facial nerve. The skin numbness and facial nerve weakness resolved within a few months. For the nonfractured zygomatic arch and nonunionized zygomatic body, repeat fixation with miniplates and screws was performed. All the patients were satisfied with the surgical results.

Conclusions: If an appropriate type of reduction malarplasty has been chosen using the esthetic facial unit concept, reduction malarplasty can effectively improve the facial esthetics without serious postoperative complications.

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Facial contouring surgery has been used to improve facial esthetics. Because the zygoma is located in the middle third of the face, its prominence, contour, and width will have a large effect on the facial impression. Unlike whites, who will mainly complain of a hypoplastic zygoma, Asians will commonly present with

a prominent zygoma that can result in a impression of strength and stubbornness. To soften their facial outline to an oval shape, many Asians will undergo reduction malarplasty.

The esthetic units of the face can be divided into the facial content and frames.¹ The facial content refers to

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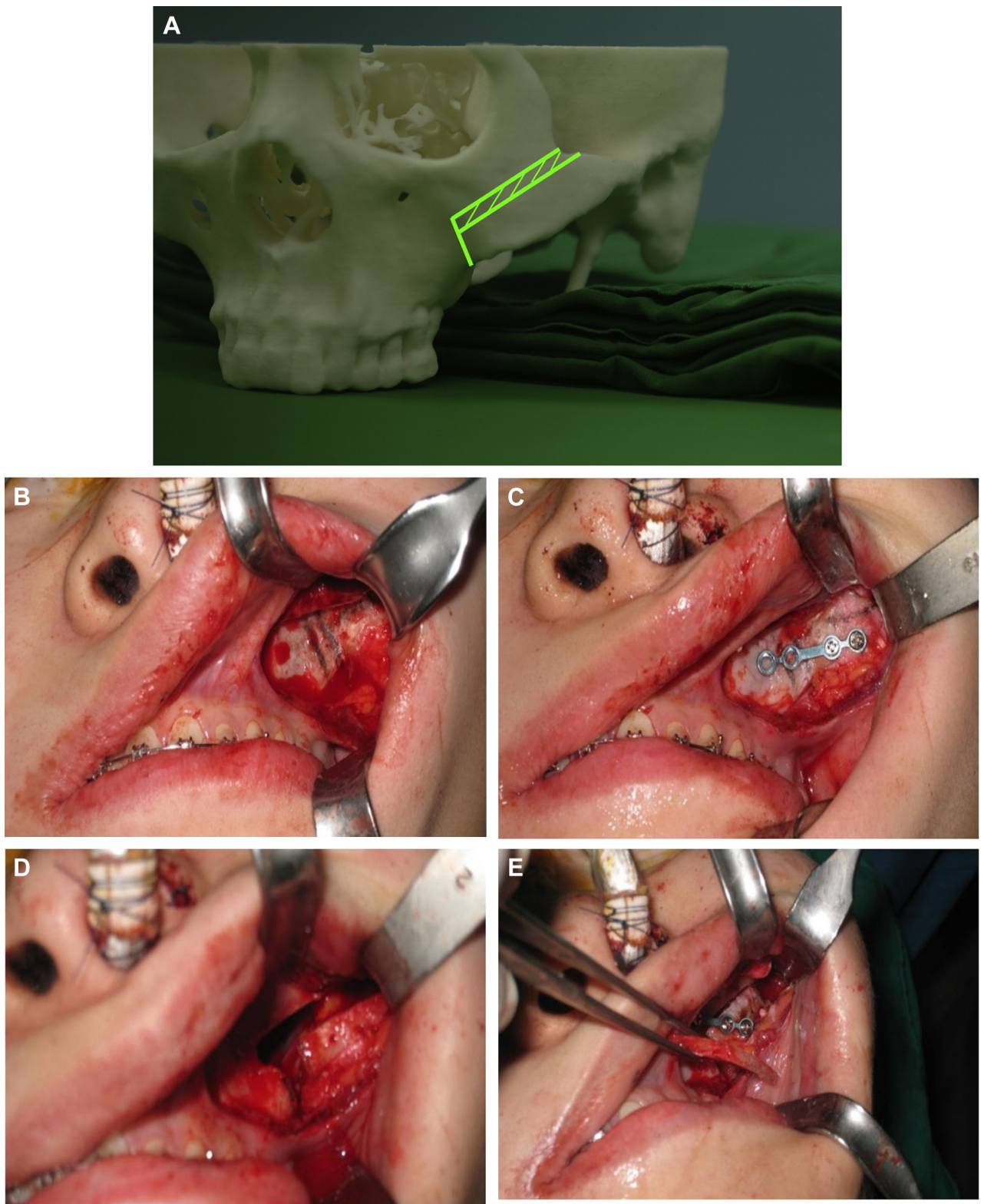


FIGURE 1. A-F, Reduction body malarplasty. After making a vertical osteotomy from the zygomaticomaxillary buttress to the anterior wall of the maxillary sinus, 2 oblique vertical osteotomies were made from the lateral orbital rim to the maxillary sinus. A bone segment approximately 3 to 8 mm long was removed. A curved chisel was used to fracture the zygomatic arch from the medial direction. (**Fig 1 continued on next page.**)

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