

Midface Sculpting with Autologous Fat



Lesley A. Rabach, MD^{a,*}, Robert A. Glasgold, MD^{b,c}, Samuel M. Lam, MD^d, Mark J. Glasgold, MD^{b,c}

KEYWORDS

• Fat grafting • Aging face • Volume loss • Midface

KEY POINTS

- There is currently a major paradigm shift from purely excision-based surgery to combined surgical and volume enhancement.
- Because there is still no perfect facial filler, development of synthetic facial injectables continue to advance at a remarkable pace.
- Each type of filler carries a specific characteristic that makes it more suitable for a certain clinical application.
- The continuing change in facial fillers offers the possibility for volume augmentation procedures with less downtime and without the need for harvesting fat.
- We predict that volume enhancement will continue to play an increasing role as both a complementary procedure and as a stand-alone procedure in facial rejuvenation.

INTRODUCTION

Over the past several years, the role of volume restoration with autologous fat has become an increasingly recognized entity as a primary mechanism by which to overcome the aging process. Facial fat grafting has assumed a renewed interest among aesthetic surgeons owing to technical advances that have been shown to be beneficial both in achieving consistently excellent cosmetic results and in limiting morbidity.¹

The aging process can be understood with a simple analogy of the aging face: in youth, the face is like a grape, and as people age, volume depletion causes the face to become like a raisin. When performing age-related surgeries, the redundant skin is lifted, pulled, and cut away so that the remainder no longer resembles the grape of youth but is more like a truncated pea.

This approach does not restore all the highlights, contours, and convexities of youth. Filling the depressed facial zones helps restore a youthful appearance more effectively. Note that this reductionist philosophy does not reflect the authors' opinion entirely, because we recognize the complexity of the aging process that can comprise volume loss, volume gain, gravitational descent, and dermatologic changes. In the past, the aging face was perceived as a change caused by gravity and skin redundancy and it is now interpreted as arising from tissue deflation, which can be corrected with facial fat grafting.²

The best approach for prospective patients with aging faces seeking to restore a youthful countenance is to view old photographs from the patient's youth. Old photographs provide a framework for our goals and help the patient understand what combination of procedures will provide a

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^a Private Practice, 224 Riverside Drive #3D, New York, NY 10025, USA; ^b Robert Wood Johnson Medical School, Rutgers University, New Brunswick, NJ, USA; ^c Private Practice, 31 River Road, Highland, Park, NJ 08904, USA;

^d Willow Bend Wellness Center, 6101 Chapel Hill Boulevard, Suite 101, Plano, TX 75093, USA

* Corresponding author.

E-mail address: lesleyrabach@gmail.com

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natural and rejuvenated appearance. During the consultation and evaluation, it is important to maintain a global approach for optimal rejuvenation. The myriad of procedures may include fat grafting, face-lifting, microliposuction/liposuction, blepharoplasty, and or skin therapies. The combination approach toward fat grafting is not necessarily a stand-alone procedure in every case but an adjuvant to traditional procedures (**Fig. 1**).³ This integrated strategy allows the surgeon to select the right combination of individually tailored procedures based on how that person looked previously.

The advent of disposable microcannulas for use with office-based facial fillers, and the continued development of filler products intended for facial volumization, has challenged fat grafting as the sole method for facial volumization. Fillers are now a suitable alternative in patients who desire fat transfer or as an adjunct to fat transfer because microcannulas can be used for advanced facial sculpting, which fat grafting alone was only able to achieve a few years ago.³

This article proposes a systematic approach to facial fat enhancement of the midface emphasizing simplicity, consistency, and safety, which is the result of a decade of clinical experience with ongoing refinements in technique. Autologous fat transfer plays a critical role in facial rejuvenation of the midface as a stand-alone

procedure or in combination with traditional age-related surgeries.⁴ Preoperative education and counseling are emphasized.

TREATMENT GOALS AND PLANNED OUTCOMES

There are several goals of facial fat grafting. These goals include the achievement of a natural rejuvenation and restoration of youth, the avoidance of complications, and the attainment of long-lasting aesthetic benefit. In the modern era of facial fat grafting, learning about autologous fat grafting requires completely rethinking of the approach to the aging face. Clinicians must use a novel aesthetic appreciation of the aging process. Clinicians also must use new operative techniques, including body harvesting and infiltration, and must manage unique complications.⁵ The details of approach and technique are described later.

Facial aesthetic surgeons must think about autologous fat transfer in a different manner than a typical operative procedure. Specifically, typically they strive for the ideal result; however, for autologous fat transfer, a more conservative approach is advocated.⁶ Surgeons must taper their expectations. In particular, as the limit of fat transfer is pushed by increasing volumes transferred to obtain an ideal result, the associated increased recovery time and potential for



Fig. 1. (A, B) Combination approach to fat grafting. Upper and lower eyelid blepharoplasty was performed with fat transfer to the upper eyelid, lower eyelid, cheek, submalar and buccal regions. (Photo courtesy of Robert Glasgold, MD. Reprinted with permission from Glasgold Group Plastic Surgery, 2012.)

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