CORRECTION OF CREASES BESIDE THE NOSE, MOUTH, AND CHIN

One of the changes associated with aging is the development of creases that run from the lower corner of the nose toward the corner of the mouth - *nasolabial folds*. This occurs because of laxity and descent of the fat pads beneath the eye and in front of the cheekbone. The skin around the mouth is relatively fixed to underlying structures, so that the cheek skin and fat sag downward over the area of the fold, causing it to deepen and become more prominent. Similar creases may develop which run from the corner of the mouth downward to the chin area. These are often called *marionette lines* since they resemble lines beside the mouth of wooden puppets.

In the past, face lifts have been used to correct these creases with variable results. Marionette lines are somewhat more likely to be improved with this surgery since it is usually quite helpful in treating laxity along the jawline. Newer face lift techniques are somewhat more successful in treating nasolabial folds. However, these surgeries are often associated with greater bruising and swelling, longer recovery time, and increased risk to the nerves which go to the facial muscles. Some patients simply need treatment of nasolabial folds or marionette lines without requiring a face lift. Others desire an office procedure with minimal or no down time away from work and activities. It is therefore desirable to have a method to treat nasolabial folds and marionette lines that can be done with or without face-lift. We are pleased to offer several office procedures for improvement of these creases.

**Restylane® injection**

Restylane is a clear gel made of a substance that is found all living cells. For this reason, the risk of any reaction is extremely low. It has replaced collagen for treatment of deeper creases because it lasts about twice as long: generally six months. Restylane is placed during a simple, comfortable office procedure. Local anesthetic is used to numb the adjacent nerves. The material is then placed in the creases to be softened and benefit is immediate. Further information may be obtained in our Restylane brochure or visiting [www.restylane.com](http://www.restylane.com).

**Advanta® Implants**

Advanta is a soft, permanent implant made of the same material as Teflon. It is available in several sizes to offer differing amounts of correction. This type of material has been used in medical applications for many years – both cosmetic and a variety of other types of surgery. Advanta offers the benefit of a single, permanent treatment plus permits a greater amount of correction than is offered by Restylane. It comes in a tubular form with pores to allow one’s own tissue to grow into and stabilize the material. Placement of Advanta is normally performed in the office under local anesthesia. The procedure may also be done in the operating room with either sedation or general anesthesia, although this normally occurs when other aesthetic surgery is being accomplished. A small incision is made where each end of the implant shall be. The implant is then placed between the incisions beneath the crease and trimmed to the proper length. The incisions are then closed with fine sutures. Further information may be obtained by visiting [www.atriummed.com/Products/Plastic_Surgery/advanta.asp](http://www.atriummed.com/Products/Plastic_Surgery/advanta.asp).

**Lipofilling**

Fat, or adipose, has been considered perhaps the ideal filling agent. Advances in techniques of its use now make this an especially promising approach. It provides abundant natural material with desirable soft feel and durable results. It can be used similarly to Restylane or Advanta to address deeper facial creases. The procedure is done with local anesthetic and possibly some sedation in the office surgical suite. Adipose is usually obtained from below the belly button or on the inside or outside of the thighs. With current techniques most or all of the transferred fat heals into the transfer area though a touch up injection may be necessary. In comparison with Restylane, it is a more involved procedure with bruising and need for recovery but is intended to be a permanent treatment.

**Thermage®**

This technique uses radiofrequency energy to tighten the skin. It is performed in the office for patients not yet needing a brow lift or face lift. Thermage is noninvasive and involves minimal discomfort. Some
immediate benefit may be noted though most patients notice gradual improvement over three to six months. Please see our Thermage handout or visit www.thermage.com for further information.

Malar Fat Pad Lift
Some individuals have obvious sagging of the cheekbone (malar) area fat pad and will have a suboptimal result simply with filling in the nasolabial crease. This may be improved with a variety of face-lifting techniques, but correction can be obtained with a minor office procedure. Small incisions are made in the malar fat pad area. Sutures are inserted here and passed to other small incisions in the hair in the temple area. These provide a back and upward lift on the fat pad to reposition it toward its desired location. This procedure may be combined with face-lift or the above described techniques to address the nasolabial fold.

Risks of these procedures:
The techniques described above are generally well-tolerated, not very uncomfortable, and allow a quick return to normal school and work activity. However, even the most minor procedure can carry the possibility of infection, bleeding, reaction to anesthesia or medications, and even death. Some of these possible risks include:

- Unfavorable healing - Or even scarring.
- Asymmetry – Some difference from one side to the other is present in everyone. Normally, one’s own asymmetry goes unnoticed until something such as surgery draws attention and scrutiny to an area. Some difference from one side to the other will exist before any procedures and should be expected afterward.
- Facial nerve injury – the malar lift sutures are passed in the area of facial nerve branches.
- Infection – May occur with any surgery and some increased risk occurs with implantation of foreign material. This is not common.
- Reaction - To implanted material.

What to expect after surgery:

- Bruising – minimized by avoiding non – Tylenol medication (aspirin, Motrin / ibuprofen, Aleve, etcetera) for two weeks before treatment and one week afterward.
- Pain - Usually mild and may be treated with Tylenol. A stronger medication may be prescribed for Advanta, lipofilling, and malar lift.
- Swelling –
  - Cool or iced compresses help reduce this in the first 24 hours.
  - Steroid pills may be prescribed to reduce swelling.
- Bleeding - Uncommon and would be a very small amount
- Drainage – Very minimal drainage may occur at incision sites. Persistent drainage, increasing pain, or fever suggests infection. Contact our office if concern exists regarding this.
- Diet – normal diet though one should avoid excessive facial motion and chewing immediately after lipofilling.
- Texture – One will be able to feel implants afterward but it should not create a bothersome consistency. Implants normally soften over a period of a few months.

Activity
Light activity for 24 hours, then activity as tolerated.
Keep any incisions dry for 48 hours.

Thank you again for the opportunity to participate in your health care. Please let us know how we may make your surgical experience more pleasant.