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The effectiveness of posterior auricular fascial flap as an adjunct to suture otoplasty

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Background: More than 200 otoplasty procedures have been reported with variable results and complication rates. Essentially they are categorized as either cartilage scoring techniques (depending on cartilage incisions, abrasions and excisions) or cartilage sparing methods (depending on sutures) or various combinations of both methods. Those relying on anterior scoring are associated with hematomas, skin necrosis and permanent irregularities in the cartilage. And those relying on sutures for producing anti-helical tube and concho-mastoid fixation are prone to recurrence, suture extrusion and granulomas.

Objectives: To evaluate the effectiveness of elevating a posterior auricular fascial flap to cover the sutures in Mustardé and Furnas techniques for reducing the risk of suture extrusion and granulomas and possibly recurrence.

Patients & Method: In this study, 11 patients with prominent ears (twenty one ears) fit our exclusion criteria. Nine of them were males and two females. They underwent suture otoplasty with posterior auricular fascial flap in Burn and Plastic Surgery Hospital in Sulaimania from December 2011 to July 2013. Their mean age was 15.5 years (range from 6-32 years) with a mean follow-up period of 242 days (ranged from 66 days to 431 days (nearly 8 months)).

Results: The reason for undergoing the surgery was being teased by their friends, peers, and family members except one who asked for aesthetic purpose only. We achieved ninety one percent satisfaction rates among patients and their families (72.72% were very satisfied and 18.18% were satisfied). Only one patient was unsatisfied owing to poor aesthetic result (overcorrection with prominent upper pole and lobule). Another patient developed partial recurrence of the middle half of antihelix 9.09% in one side (4.7% ears). A third one developed bleeding that only needed pressure and change dressing in the left ear (4.7%). Neither major nor minor suture related complications were recorded.

Conclusion: Adding fascial flap to cover the sutures appears to be beneficial in preventing suture extrusions and granulomas and possibly recurrence by acting as another supporting layer. It also provides a smooth, harmonious curve of the antihelix by applying gentle, graduated pull on the helix.

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Periorbital rejuvenation: The Egyptian experience in the management of dark halos- Revisited

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The periorbital region represents a challenging area for the plastic surgeon since ages. The complaint of the dark halos of our patient received continuous attention with trials to modify the discoloration. The new technique of nano-fat grafting of the region by the SNIF technique is a new way of managing the area properly. The nano-fat with its content of fine fat and stem cells will help improve the color and quality of the eyelids region. In this study 50 Egyptian male and female of various age groups from 17-45 years were involved in our study with satisfactory results in most cases. 65% showed excellent results, while 25% showed good results. Only 10% of the cases required a 2nd and 3rd attempt. All cases were evaluated from 6m-1yr. This technique is recommended for management of dark halos.

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