Background: Müller’s muscle-conjunctival resection (MMCR) is a technique used for correction of mild to moderate ptosis. This study was designed to examine the efficacy of the senior author’s MMCR technique and analyze variables that potentially affect outcomes of the surgery.

Methods: Patients with ≥10-month follow-up were included. The amount of ptosis reduction, symmetry of eyelids, effects of concomitant facial aesthetic surgeries, and adverse outcomes were analyzed. Furthermore, patients were grouped into short-term follow-up (<24 months after surgery) and long-term follow-up (>24 months) cohorts to determine if the outcomes of MMCR changed over time.

Results: Forty patients with mean follow-up of 28 months combined for a total of 70 MMCR surgeries. MMCR significantly reduced ptosis by a mean 1.48mm ± 0.88mm (p<0.001), corresponding to 0.19mm of eyelid elevation for every 1.0mm of Müller’s muscle resected. MMCR successfully corrected 84% of eyelids to within 0.5mm, and 94% to within 1.0mm of normal eyelid position. MMCR significantly improved eyelid symmetry to within 0.5mm from 53% of patients before surgery to 75% of patients after (p=0.036). Furthermore, the mean correction of ptosis was not significantly different between short-term (1.58mm ± 0.93mm) and long-term (1.32mm ± 0.93mm) follow-up patients (p=0.258). Lastly, concomitant surgeries such as upper and lower blepharoplasty, rhytidectomy, and endoscopic forehead rejuvenation with corrugator supercilii resection did not significantly affect ptosis correction by MMCR (p>0.05).

Conclusions: Müller’s muscle-conjunctival resection is an effective long-term solution to mild to moderate eyelid ptosis and asymmetry, and can be effectively performed concomitantly with other facial aesthetic procedures.

Disclosure/Financial Support
The authors have no financial interest to declare in relation to the content of this paper.