Lateral Access Recontouring for Rejuvenation of the Lower Eyelid
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Abstract Text:

Purpose: To perform rejuvenation of the lower eyelid using a technique which demonstrates that effective lower eyelid blepharoplasty is possible in a virtually closed fashion without either an anterior subciliary skin or muscle incision or a transconjunctival incision all of which put the patient at risk for lower lid retraction.

Materials and Methods: Since this was a new technique only patients with early sequlae of aging (stage 1) were operated initially. Later it was extended to patients with more advanced age related issues (stage2). Patient selection was based on the following criteria:

stage 1- Early signs of periorbital aging
Stage 2 - Obvious signs of periorbital aging
Stage 3- Advanced signs of periorbital aging

Experience: Over 5 years the author has performed lower lid rejuvenation in 100 selected patients with only a 10 to 14 mm incision lateral to the lower lid and completely recontouring the lower lid cheek junction using fat translocation, medial orbicularis resection, lateral canthal suspension as needed, and muscle lifting while working with 4.5X loupe magnification in the avascular plane between the septum and the orbicularis muscle. It is unnecessary to remove skin or fat except for the lateral fat pad in most cases. There were 97 females, 3 males in ages 42 to 65. This group is a subset of the author's overall blepharoplasty practice of 20 years.

Results/complications:. Followup has ranged form 3 months to 5 years and there have been no complications other than a minor scar revision and a suture excision. All patients have been satisfied with the results based on post op questioning. There have been no reoperations for recurrence of age related issues. Typical post operative results can be seen in fig 1. it results in correction of tear trough deformity, blending of the lid/cheek junction, decrease of rhytids, and improved lower lid support.

Conclusion: The technique allows for full rejuvenation in patients with moderate age related sequelae without a typical lower lid incision. It also creates a harmonious rejuvenated look and so far without the risk of ectropion present with both transconjunctival and skin muscle flap techniques.
Lateral Access Blepharoplasty
Reference Citations:
Rohrich RJ, the five step lower blepharoplasty. Blending the eyelid cheek junction PRS (2011) 128:3, 775-783