

Superextended Facelift: Our Experience With 3,580 Patients

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Abstract: Our experience using the "Superextended" facelifting technique in 3580 female patients is presented herein. The technique is based on extended subcutaneous facial and neck skin undermining, extensive superficial musculoaponeurotic system (SMAS) dissection with low lateral freeing of the edges of the platysma muscle. The trimmed SMAS is fixed to the adjacent tissues, enabling the upward and lateral pulling effect of the facial structures. The neck contour is rebuilt by lateral pulling and fixing of the dissected lateral platysmal edges, along the entire neck, and meticulous supraplatysmal fat sculpturing. The skin is redraped over the newly built SMAS and platysmal skeleton, trimmed, and sutured without any tension.

The concept of beauty in the eyes of the surgeon is expressed by adding other ancillary procedures during or shortly after the main procedure.

Subcutaneous forehead lift using the hairline incision was performed in 70% of the female patients, concomitantly with the face-lifting procedure. Upper and lower blepharoplasties, chin implant, perioral dermabrasion, rhinoplasty, and fat grafting have been performed according to the surgeon's judgment and the patient's request.

The objectives of an ideal facial surgery, which are youthful, natural, dynamic, attractive, feminine, and long-lasting results, can be achieved using this technique. Lack of major complications and an overall minor complications rate of only 4.4% makes this technique safe, reproducible, and reliable.

This is one of the largest presented series of this procedure, performed by 1 surgeon. The presented cases demonstrate the results obtained using this technique.

Key Words: face-lift, skin, SMAS, minor complications

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Various techniques of rhytidectomies have been described during the years. Some of them have been thoroughly described lately.¹⁻⁵ This was the incentive to share our experience using our technique, which began in 1983 as extended facelift using limited SMAS dissection and turned to be, about 3 years later, the presently used technique: the superextended facelift with extended SMAS dissection, which is tailored to the individual's needs.

The objectives for what we consider to be a good rejuvenating procedure for the female patient should fulfill the following criteria:

1. The procedure should reconstitute a younger attractive feminine appearance, hence rebuilding the patient's self-confidence by decreasing the gap between her chronological age and her younger self-image.
2. The final result should look natural and unoperated, avoiding the stigmatization of the surgery.
3. The procedure should maintain a maximal durability.
4. The complication rate should be consistently low.

Surgical Technique

The procedures reviewed in this study were all performed in the Partnach Clinic, which is a private clinic located in the ski village Garmish-Partenkirchen in Germany. There are 2 operating rooms in the clinic, 2 beds for postoperative recovery, and 12 beds for hospitalization.

After reviewing the patient's medical records and the laboratory analysis by the anesthesiologist, on the evening before the surgery, the patient is marked (Fig. 1) and signs the informed consent form. A strip of hair about 3mm wide, within the anterior temporal areas and around the sideburns, is shaved. Another strip in each occipital area, about 12 mm wide and about 8 cm long, is also shaved, through an imaginary line drawn from the external auditory canal towards the posterior midline.

The surgery is performed under neuroleptic analgesia, using a technique that has already been described by us in detail.⁶

About 40 mL of lidocaine 0.66% with Adrenaline 1:300,000 are injected into each side of the face. The incisions along the hairline are within the hair-bearing areas and are beveled for the purpose of saving the hair follicles for