

face

# facelifts

Except from *Your Body, Your Beauty, Your Safety* (BellaSurgica, 2005) by Minneapolis plastic surgeon **Joe Gryskiewicz MD.**

Decades ago at a national convention, a New York plastic surgeon showed before and after photographs of over a dozen facelift patients. Colleagues admired her surgical skill and impressive postoperative results. There was one catch. Towards the end of her talk, she explained that none of these patients had actually undergone a facelift procedure at all. They had been photographed standing upright in the 'preoperative' photographs and lying on their backs in the 'postoperative' photographs. That's why grandma looked so good in her coffin.

**'As a person ages, the forehead increases in height, the nose drops, and the chin diminishes in size'**

As a person ages, the forehead increases in height, the nose drops, and the chin diminishes in size. People develop fullness along the jaw line, called a jowl, and neck skin migrates downward. When we lie down, gravity isn't pulling our faces downward. Instead, the jowl migrates back into the cheek area. Neck skin falls upward, which recreates a smoother neck angle and gives a more youthful look. Skin around the ear area also falls backwards.

At another meeting, one presenter showed a picture of himself standing on his head. The slide was projected upright, and he did indeed look much younger, particularly in the mid-face area. His deep cheek fold was shallower with a softer appearance. The cheek itself was located higher on the face and more toward the cheekbone. Lower eyelid bags were less apparent, and the upper lid skin and brows were elevated nicely. This physician had again demonstrated how surgery – or standing on your head – directly counteracts the aging effects of gravity.

A facelift is one of my favorite procedures to perform because in a matter of hours the clock is turned back and a patient's profile is transformed.

'I knew I wanted to look more refreshed, not different,' one patient said. 'I felt young inside and felt I looked tired on the outside.'

The best candidate for a facelift has a face and neck that have begun to sag, good skin elasticity, and strong and well-defined bone structure.

Sometimes a patient fears that once they have one facelift, they will need another and another and another. I tell such a patient to imagine having an identical twin. If the patient has a facelift she will always look seven to 10 years

younger, on average, than her twin. The result of a facelift is permanent, but you will still continue to age normally. However, you will look better at any given age than if you had not undergone the procedure.

#### **Avoiding the extreme facelift**

We've all seen Hollywood stars with overly taut facial skin from two or three facelifts. The best way to avoid the extreme-facelift look is to see a skilled practitioner who has done a lot of facelifts. Look at patient photos, and check out the results. Do any of the faces look overdrawn and tight? If so, seek your surgery elsewhere.

Discuss your concerns about the tight look with your surgeon. An overdone look may actually be secondary to over-elevated eyebrows, which results in a surprised or shocked look. It's very rare to have an overly tight look from a first-time facelift. Overly tight skin comes about when a facelift is redone.

Plastic surgeons who commonly do facelifts are aware of this problem and take measures to prevent it by not removing or resecting too much skin. Instead, they concentrate on supporting the deeper facial structures. Supporting this deep structure generally gives longer-lasting results, and may postpone some of the signs of aging for up to 15 years.

One of the key elements to preventing an over-corrected facelift is to pull different areas of the face in different directions. Within each layer of the facelift procedure, different vectors (directions of force) of pull are established to allow a more natural look. The middle part of the face ages almost straight down, whereas the jaw line needs to be elevated at more of an angle to establish a youthful look. The overlying cheek skin is moved to the side. Overall, the facial appearance should be softer than

**'One of the key elements in preventing an over-corrected facelift is to pull different areas of the face in different directions'**

it was before surgery. One analogy is that of a bedspread. When making a bed, the appearance is improved simply by pulling up on the bedspread. However, to achieve the best result, you must rearrange all of the covering layers – the sheet, the blanket, and the bedspread – and straighten them in the proper direction for each one.

## The procedure

Facelifts used to be performed by elevating the skin over the facial area, pulling it upward, removing the excess, and closing the incisions, but current practice now involves extensive work on the deeper facial structures. Some of the procedures used in facelifts are extremely difficult and not meant for every practitioner. Discuss the type of approach your surgeon would use and be sure to find a surgeon with plenty of training and experience in the procedure.

Many facelifts are performed under local anesthesia combined with a sedative. This means you will be awake but relaxed and without pain. An alternative is to have the surgery done under general anesthesia. Either one is perfectly acceptable. Talk it over with your surgeon to find the best option for you.

A facelift usually takes several hours to perform. Incisions begin above the hairline at the temples, extend down the natural line in front of the ear, and continue behind the earlobe to the lower scalp. Skin is separated from fat and muscle below, and those tissues are trimmed, suctioned, incised, and tightened as needed. Skin then is

pulled back over the face, and the excess is removed.

The incisions may be brought into the hairline or may be behind the ear or even on the front side of the ear, depending on the surgeon's and patient's preference. An incision can be made along the lower edge of the sideburn area to keep this hair from shifting upward as skin is pulled up from the neck. Discuss precisely where the surgical

'The incisions may be in the hairline or behind the ear or even on the front side of the ear, depending on the surgeon's and patient's preference'

incisions will be made and make certain your surgeon's preference is clear, along with alternatives, so you can come to an agreement on the incisions and the type of facelift that best suits your particular anatomy. Most facelift surgeons customize their procedure to some degree depending on the individual patient. **cbm**

## Aging face vs youthful face

|                     |    |                   |
|---------------------|----|-------------------|
| long contours       | vs | short contours    |
| narrow shape        | vs | wide shape        |
| drawn               | vs | full              |
| rectangular         | vs | curved            |
| triangular          | vs | heart-shaped      |
| long upper lip      | vs | short upper lip   |
| thin, wrinkled lips | vs | smooth, full lips |
| down-turned mouth   | vs | up-turned mouth   |
| lower teeth show    | vs | upper teeth show  |

## Signs of a bad facelift

- Tension lines
- Skin pleats
- Distorted mouth
- Startled brow
- Hairless scalp incisions
- Sideburns displaced upward
- Attached earlobes or 'pixy ears'

## case study

Facelift, endoscopic browlift, upper lid blepharoplasty, lipotransfer, upper lip dermabrasion and chin implant procedures were performed



BEFORE



AFTER treatment by Dr. Gyskiewicz



BEFORE



AFTER treatment by Dr. Gyskiewicz