



face

full-face rejuvenation

Sydney plastic surgeon **Dr Warwick Nettle** explains why the most successful facelifts pass unnoticed. Gillian Samuel reports.

Facelifts get a lot of bad press, according to Sydney plastic surgeon Dr Warwick Nettle. Everyone has seen photos of people who have undergone work that changes the way they look or makes them appear unnatural.

Dr Nettle says there are two reasons for this. 'One reason you can see a bad facelift is the issue of tightening instead of tightening and re-volumising. The other issue is disharmony, for example where the jaw has been tightened but the mid face is still sagging,' he says.

'How do we restore youth, beauty and harmony to the face? There are so many technical approaches that we can take, but the trick is to select the optimal ones for the individual. Everyone needs different things.'

One of the key aspects of ageing is facial atrophy as the features skeletonise as time goes by due to loss of facial fat. 'This allows the skin to become subject to gravity and sag. The way we look at it is that it is like a sail on a boat with the wind behind it and when we age the wind comes out of the sail and allows wrinkling and the descent of the skin,' Dr Nettle explains.

Skin laxity is not the only effect of ageing on the skin. Factors such as lifestyle choices, sun damage and environmental pollutants also take a toll. Due to ultraviolet exposure and other age-related changes the texture of the skin also degrades as well. 'Previously the only technology surgeons had at their disposal was to tighten the sail, metaphorically, and that's what most still do. And that can result in an altered rather than rejuvenated look, the sort of result where people say that you can tell when someone has had a facelift,' Dr Nettle says. 'I would disagree. You can tell if someone has had a bad facelift but not a well-performed facelift.'



He says the approach to full-face rejuvenation should be to slightly tighten the skin but reversing sagging should be achieved mainly by lifting the underlying muscles in the face. This is achieved through what is known as a SMAS lift, which involves the superficial musculo aponeurotic system. This is the layer of membrane deep in the skin that is attached to the muscle. It is tightened through incisions made in the scalp and around the ears. 'This provides a great advance in longevity because skin will stretch, whereas that layer doesn't stretch,' Dr Nettle explains. 'It lifts some of the volume from the lower and the mid-face.'

Another component in a successful full-face rejuvenation is replacing lost volume through fat transfer or dermal fillers to help restore facial contours to achieve a harmonious and natural-looking result. 'Clearly some people need it and some don't. The procedure needs to be customised to the individual,' he says.

Dr Nettle believes there needs to be a paradigm shift in thinking about the role of fat in facial contouring. 'A common concern is that it will make the patient's face look fat, but adding volume allows the avoidance of stretching other facial structures too much. By providing structure to the face volume replacement prevents the need for repeat surgery.'

He says two great examples of successful facial volume replacement are Sharon Stone and Meg Ryan. 'Their facial rejuvenation results are classic examples of harmony, not just the tightening the jaw line or the eyelids, and this gives a subtlety to the results.'

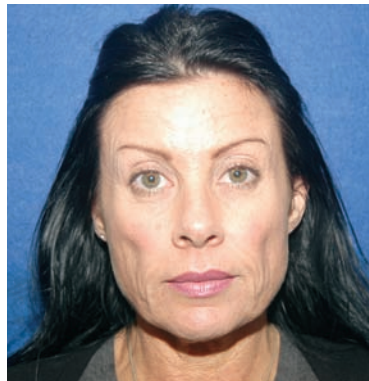
Fat transfer is convenient to perform at the time of the facial surgery and provides quantities of biocompatible tissue. The patient's own fat is harvested from the stomach, thigh or knee area at the start of surgery via fine cannulas through small nicks in the donor area and refined to remove oil, local anaesthetics, blood and damaged cells, then reinjected after the tightening and skin redraping procedure has been performed.

'It is dropped in like peas in a pod,' Dr Nettle explains. 'Fat needs blood supply to survive. Some 30 to 40 percent doesn't achieve blood supply and is reabsorbed but there is a 60 to 70 percent success rate.'

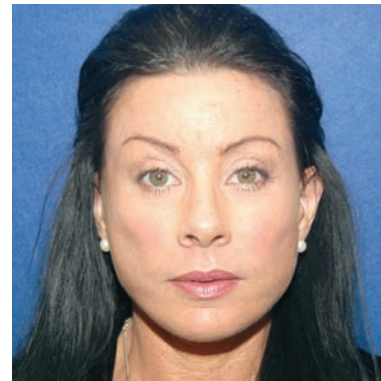
He says the benefits of fat transfer are that it is possible to use more volume than dermal fillers and the results last

Case study

The harmony of this patient's features required that she had some rejuvenation of the eyes, mid-face, lower face, jaw line, neck and around the mouth. Dr Nettle performed a facelift, neck-lift, upper and lower eyelid surgery, fat transfer to the jaw line, mid-face and perioral area, and upper lip dermabrasion.



BEFORE



AFTER full-face rejuvenation by Dr Nettle



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many years. 'Dermal fillers don't last as long and are more expensive for given volume.'

The final factor in full-face rejuvenation is the quality of the skin. There are a number of options for improving problems such as surface irregularities, pigmentation or redness, including laser treatments and resurfacing procedures such as dermabrasion.

According to Dr Nettle, in order to achieve a harmonious and natural-looking result these approaches should be skilfully combined. **acsm**