## TIRED FACE? REFRESHED LOOK!



MARK A. JABOR, M.D./Plastic Surgeon

Unfortunately everyone ages. Facial aging is the result of gravity and time. Extrinsic factors, such as sun damage, as well as repetitive exaggerated facial expressions lead to wrinkles and sagging of skin. What is less recognized by patients is volume loss of the face in general. The skin loses collagen, becoming thinner, muscles thin, fat diminishes and bone loss occurs. Not only is fat lost, but the fat pads (compartmentalized fat of the face) descend and change location. Fat pads that give faces a youthful appear-

ance, like full cheeks, shift to the lower face leading to hollowing and an aged look.

The good news is that this aging process can be effectively treated with a facelift. The term "Facelift" refers to a lifting procedure that focuses on improvement of the mid-face, lower-face and neck. The types of lifts and incisions vary between plastic surgeons. Some people apply the term "complete" facelift. This refers to a facelift procedure in combination with upper and lower eyelid surgery as well as brow lift. We will talk about face lift only and not include eyelid or brow surgery at this time.

What occurs with a facelift procedure? A facelift is much more than merely an incision with lifting and pulling of skin. The modern facelift starts with an incision and continues with elevation of the skin and most importantly, tension is placed on the layer beneath the skin that surrounds the facial muscles. This layer is called the Sub-Muscular Aponeurotic System (SMAS). This layer of tissue is a tough, non-elastic layer, unlike the skin, and does all the "lifting" when tension is put on it. Liposuction of the neck is often included in the procedure for contouring and enhancing the profile. Direct fat removal from the front part of the neck may be performed, should the fat lie in a deeper plane. These combined techniques as well as strategic placing of fat into the face make up what is generally considered today's modern facelift.

What is a Standard Facelift? A standard facelift has an incision that begins at the temple, extends around the front of the ear continues behind the ear ending in the back of the upper neck area and concealed in the patient's hair. In addition, suturing together muscle bands on the front part of the neck is often performed, with or without liposuction. Variations of this proce-



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dure include Minimal Incision Facelifts/Mini-Facelift, and Neck Lifts.

How is volume loss of the face treated? A very essential aspect of facial rejuvenation is volume restoration of the face. The facelift procedure adds significant volume to the mid-face or cheek area, but often times this is not sufficient. In 90% of the facelifts I use the patient's own fat (fat transfer) to further augment volume depleted areas of the face. A small amount of fat is harvested, usually from the patient's abdomen or hip, and re -injected into the face, creating a more youthful appearance.

What type of anesthesia is required for a facelift? The vast majority of the facelifts I perform are done in our office under local anesthesia and oral sedation in a comfortable setting and relaxed atmosphere. This allows the patient to be mobile immediately after the procedures without any worries about the side effects of general anesthesia and reduces the cost of the procedure as well. Sutures are removed in 6 days and make up can be applied at that time. Discomfort is usually minimal and very well tolerated.

What can I expect during my recovery? There are variable degrees of swelling and bruising afterwards. Healing time of 4-6 weeks is usually necessary for all swelling and bruising to subside, but each patient is different. Patients generally take a week off from work; otherwise normal daily activity is possible.

Every patient envisions a facelift procedure that is minimally invasive however, a facelift does require incisions although well concealed and does have a recovery period. Be cautious of catchy infomercial promises of no incisions at all, little to no recovery time, maximum results, and inexpensive. Almost undoubtedly, there will be disappointment with those claims. Remember the old adage, "if it sounds too good to be true it probably is". The best time to get things right surgically is the first time. Always seek consultation with a board certified plastic surgeon. Revision surgeries are usually much more difficult, in light of the fact that the anatomy was previously altered. Nevertheless, the correct procedure paired with the right patient will promote excellent and natural results obtainable in the office setting with local anesthesia.