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Forehead and Cheek reconstruction

Gerard J Bayley Plastic And Reconstructive Surgeon Princess Alexandra Hospital

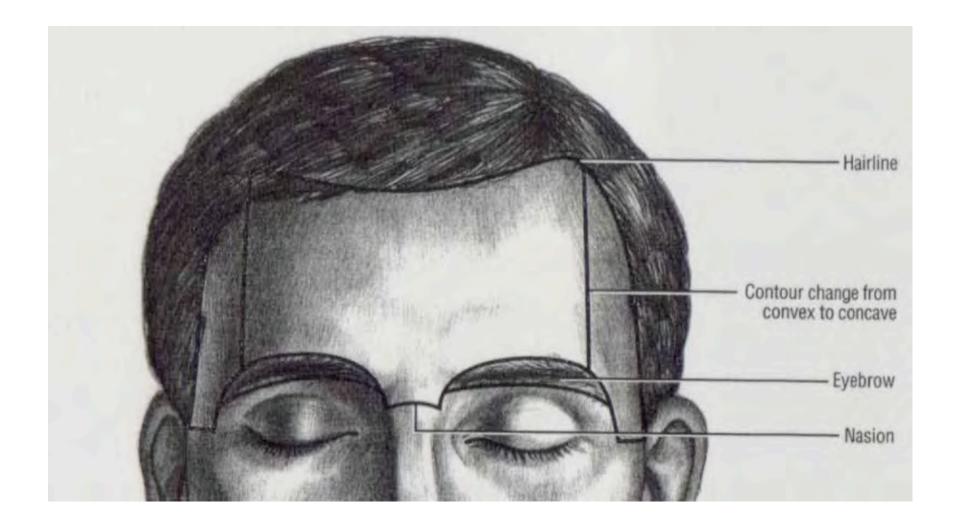
Forehead Reconstruction

- The anatomic boundaries:
 - The natural hairline
 - The zygomatic arch
 - The lower border of the eyebrows
 - The nasal root

Foreheaad

- Can be divided in to five subunits
- Central forehead
 - Skin is thick and tightly adherent tot eh frontalis muscle and convex
- Temple region
- skin is more elastic, loosely attached to underlying temporalis fascia and is somewhat concave
- Eyebrows
 - Hairbearing skin

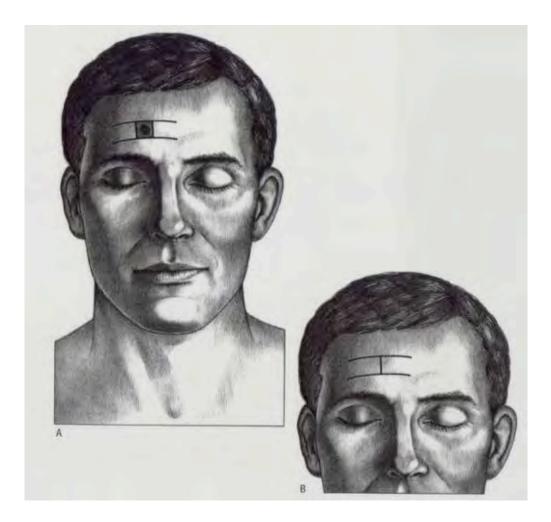
Forehead subunits



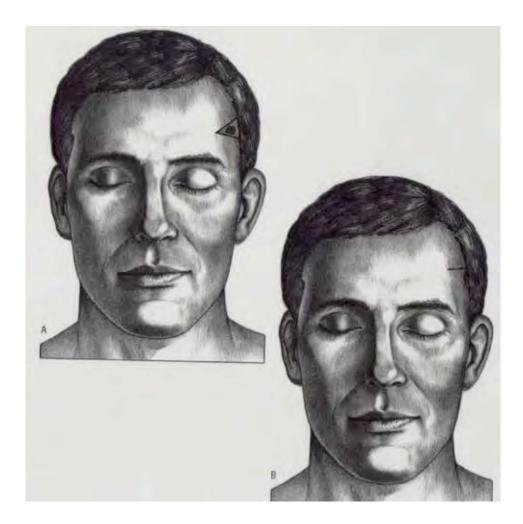
Goals

- restoration of tissue defect
- do not distort the eyebrow or the hairline
- <u>Priorities</u>
 - replace like with like- same thickness, colour match
 - avoid skin grafts- they look like a patchwork quilt
 - avoid damaging the frontal br's of facial nerve
 - preserve frontalis where possible
- Skin expansion can also be useful for reconstruction of large defects.

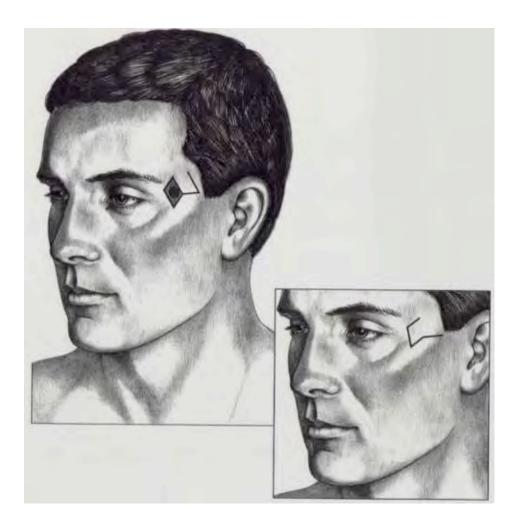
Bilateral advancement



A-T Flap Repair



Rhombic Flap

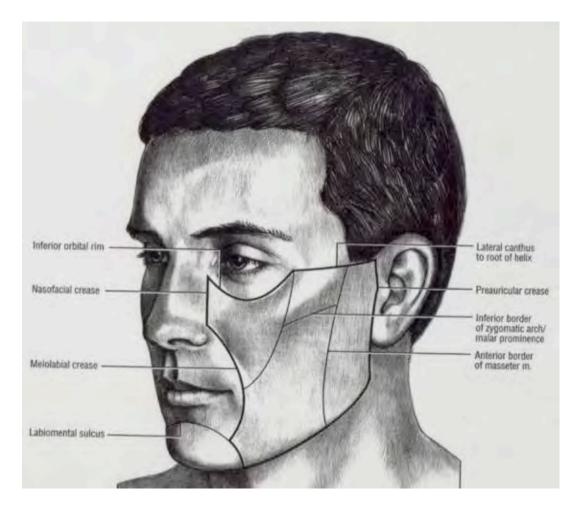


Cheek Reconstruction

- Boundaries
 - Preauricular crease
 - Superior border of the malar eminence and zygomatic arch
 - Inferior orbital rim
 - Nasofacial groove
 - Melolabial crease
 - Inferior border of mandible

Cheek subunits

Medial – thicker skin and freely mobile **Zygomatic** – firm fibrous attachments to underlying fascia **Buccal** - thicker skin and freely mobile Lateral – over the parotid and more attached to the underlying fascia and fat



Medial subunit

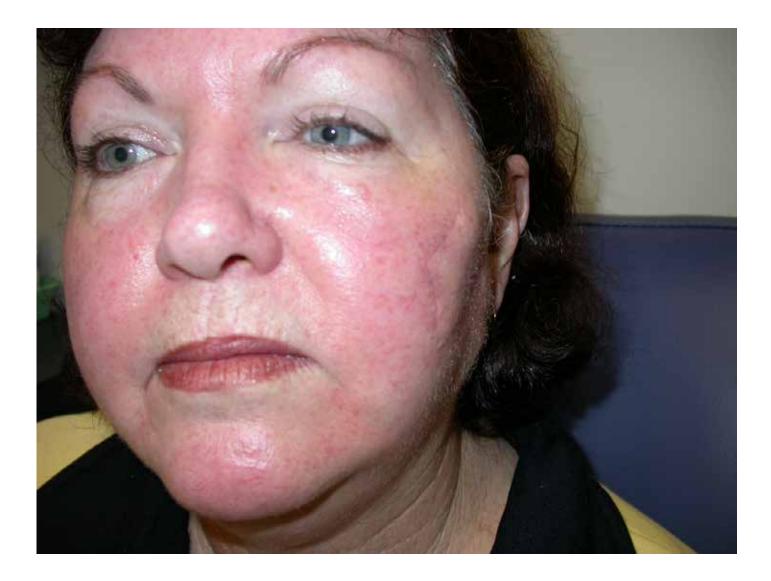


Medial subunit / zygomatic





Rhombic Flap



Zygomatic Subunit



Medial Subunit

