Reface
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Late complications following Facelift plastic surgery

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From anamnesis

- Patient E. referred to the clinic 7 months following a **Facelift** with complaints about: synkinesis, continuous spastic events of facial muscles, asymmetrical mimics
- The surgery has been carried out with **side effects** (edemas) and an **early complication** in a form of hematoma (subcutaneous hemorrhage) on the left side of the face
- Immediately following the surgery facial nerve paresis has been identified that involved 2 branches (temporal and buccal)
- MRT and electromyography tests, performed after 3 weeks confirmed facial nerve trauma on the left side of the face.

What has been done by E. 7 months prior to referring to the clinic

- ✓ A course of special exercises
- ✓ 2 month long course of reflex acupuncture therapy
- ✓ 3 weeks long course of adaptive rehabilitation therapy (ultrasound, magnet therapy, electric stimulation)
- ✓ Muscles stimulation of the affected side by “Neurodimin” device in home setting

Paresis of facial nerve and paralysis of mimic muscles following a Facelift

- Subdivided into temporary (transient) and recurrent (permanent)
- Temporary paralysis is more common accounted than a permanent one
- The paralysis develops immediately following end of the surgery or following cessation of local anesthesia

Causes of nerve paresis

- ✓ Pressure-ischemic changes that have occurred due to collection of liquid in the surgery zone
- ✓ Lymphostasis due to an application of tight dressing, for prophylaxis of edematous syndrome following surgery
- ✓ Hematomas
- ✓ An outcome of local anesthesia
- ✓ Excessive SMAS strain
- ✓ Development of an infection

- If the damaging factor continues to act for more than 4-6 days, nerve axons die and **axonal degeneration** develops
- There is no more direct contact of brain with mimic muscles
- Under **optimal condition**, the speed of axonal regeneration does not exceed **1 millimeter** per day (approximately 3 months)

And if the conditions are "not optimal"?

E.’s state at the time of surgery

- Myofunctional disorders (unbalanced tonus of mimic and chewing musculature)
- Muscular and osseous asymmetry
- Altered mobility of tissues
- Disturbance of lymphatic flow
- Deterioration of circulation and tissue oxygenation
- Bone disorders (changes in occlusion of jaws, bruxism)

Risks of Facelift plastic surgery

1. Presence of side effects
2. Presence of side effects and early complications
3. Presence of late complications

1. Well-timed treatment of edema **(up to 7 days)**
2. Treatment of edema and correction of cause for early complication **(up to 3 weeks)**
3. Correction of tissue functional disorders that existed before the surgery, which interfering with rejuvenation process

Side effects (edemas, hematomas, nutritional disorders). 14 days following a Facelift

Early complications (hematomas, infiltration, scarring). 4 weeks following a Facelift

Pathological synkinesias = late complications

Pathological synkinesias **-** the most common complication of facial nerve paresis

Pathological synkinesias manifest as undesired cascade contractions of facial muscles during speech or emotions

Most common synkinesias

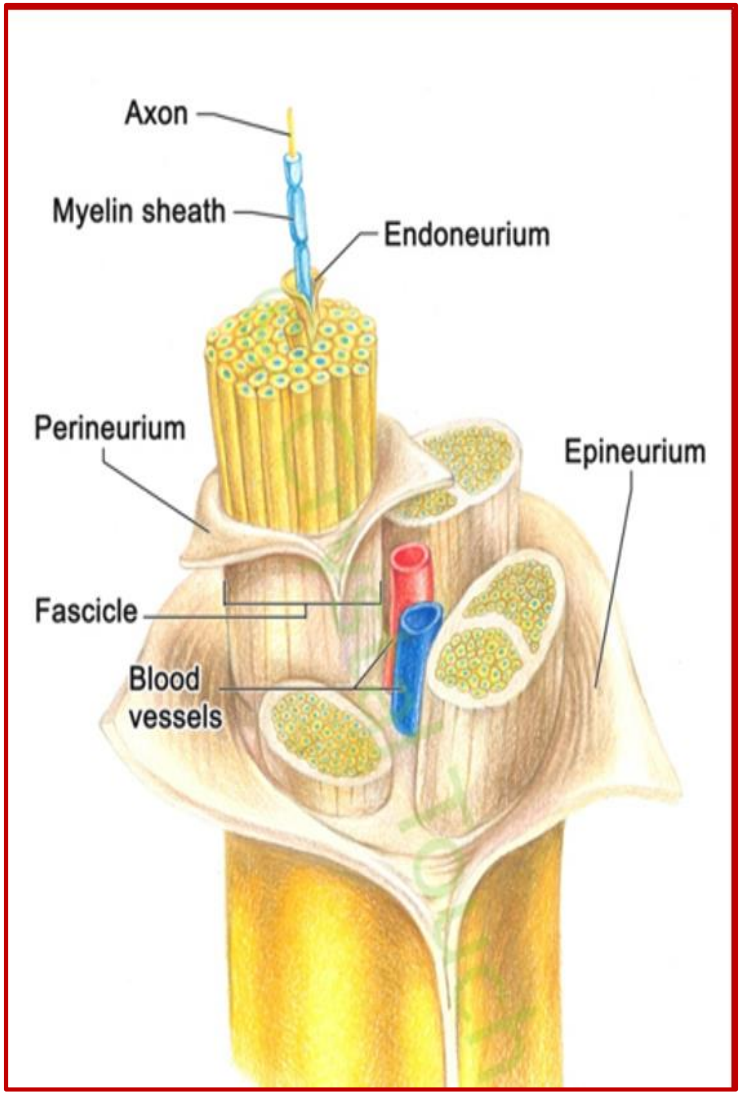
- Involuntary narrowing of eye fissure during articulation and smiling
- Involuntary mouth movements during blinking
- There are versions with involvement of frontal muscle, orbicularis oris muscle and superficial muscle of the neck

There is a theory, which states that during regeneration of facial nerve, "accidental" attachment of regenerating branches of facial nerves not to "their" mimic muscles takes place

and synkinesias are, in fact an irreversible complication of incompletely recovered paresis of facial nerve

But!

If there was no mechanical crossing of the neural root, it is physically impossible that regenerating axons are able to reach the muscle fibers not in “their” part of the face



- ✓ ***I believe*** *that pathological synkinesias are pathological motoric patterns that are formed in process of too prolonged regeneration of the facial nerve*

- ✓ *The recovery process is complicated due to existence of functional disorders that existed before the surgery*

Conclusion

- ✓ When, during a regeneration process, neural fibers are reconnected with facial muscles, pathological mimic pattern is manifested as synkinesis
- ✓ Therefore, facial synkinesis, similar to any conditioned reflex, may be eliminated

How can it be eliminated?

1. **Position** and **state** correction of the following muscle groups: tongue, chewing, mimic, neck, shoulder girdle
2. **Position** correction of TMJ, skull bones, occlusion of upper and lower jaws
3. Correction of **liquid environments circulation** within the body
4. Retraining of **muscle** that were inactive (acting improperly) for long time

Layered Reface Laitlift System therapy

- *Functional esthetic rehabilitation of facial and neck tissues* ***Layered Reface Laitlift System therapy*** *- is a concept of layered combination of complementary manual, osteopathic and device managed techniques*

- *The techniques are aimed at rehabilitation of movement, which would be as close as possible to a physiological motor stereotype*

- *The goal is to reduce early and late damage to tissues after invasive procedures, as well as symptoms of premature aging of face and neck*

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