

Jungwirth Walther

The “FAN-FACELIFT”

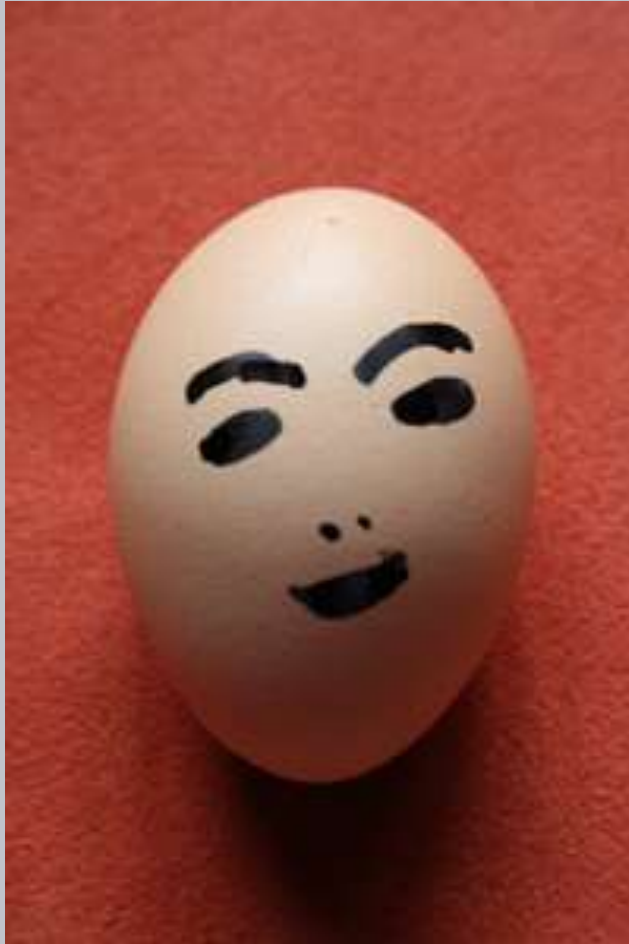
- a Multivector Approach to
Volumetric Rejuvenation to the
Aging Face



Salzburg
Austria

ISAPS 2010 San Francisco

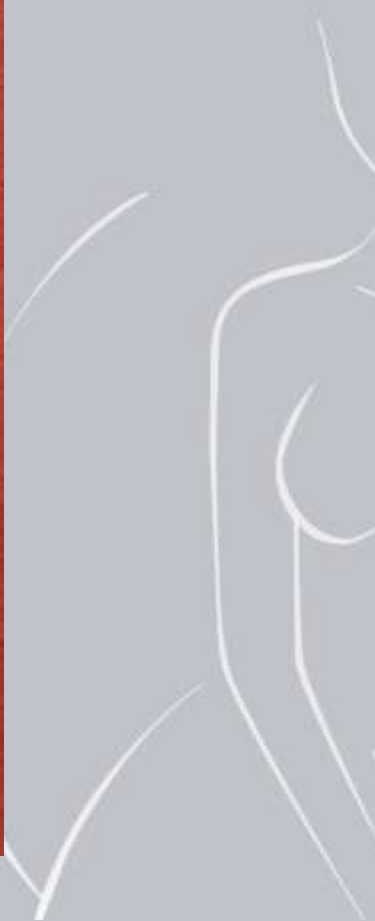
signs of a youthful face



distribution of facial structures and volume:
upper part has more volume, lower less

Jungwirth W.

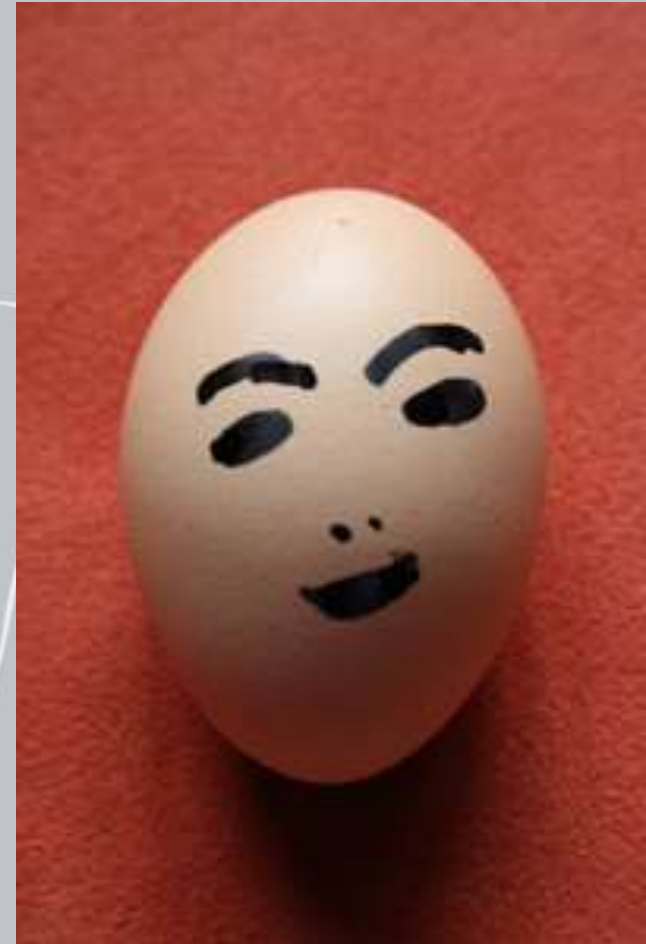
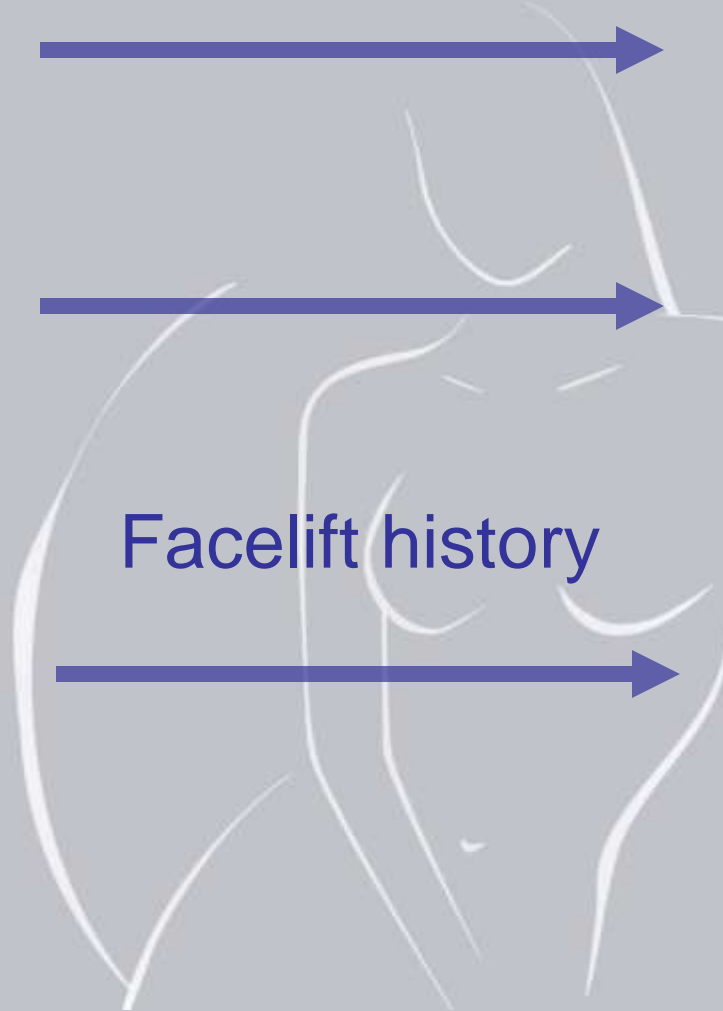
signs of an old face



distribution of facial structures and volume:
upside down egg

Jungwirth W.

how can we get from here to there?



distribution of facial structures and volume
is just possible by surgical redistribution

Facelift History in short:

1916 Lexer / subcutaneous rhytidectomy

1974 T. Skoog / SMAS

1990 S.T. Hamra / deep plane rhytidectomy

**1993 S. Aston / F.A.M.E facelift - finger assisted
midface elevation**

**2002 Tonnard Verpaele / Minimal Access
Cranial Suspension Lift**

The Fan-Facelift

A multivector approach to the volumetric changes of the aging face

consists of a combination of:

1916 Lexer / subcutaneous rhytidectomy

1974 T. Skoog / SMAS

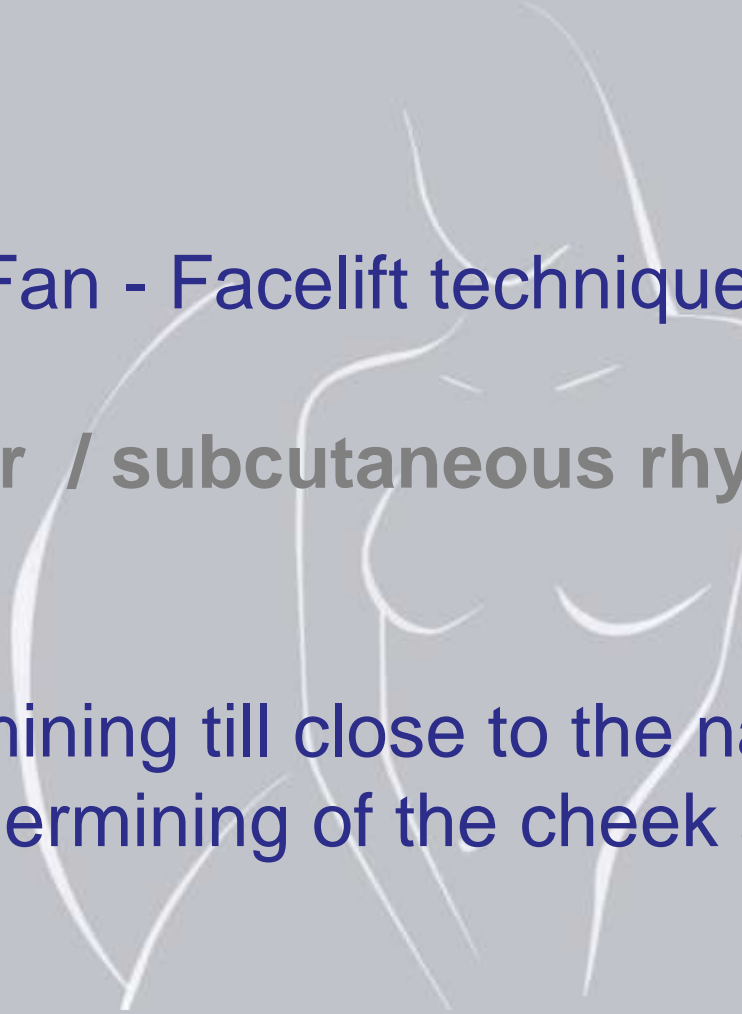
1993 S. Aston / F.A.M.E facelift - finger assisted midface elevation

2002 Tonnard Verpaele / Minimal Access Cranial Suspension Lift

Fan - Facelift technique:

1916 Lexer / subcutaneous rhytidectomy

wide undermining till close to the nasolabial fold
undermining of the cheek area

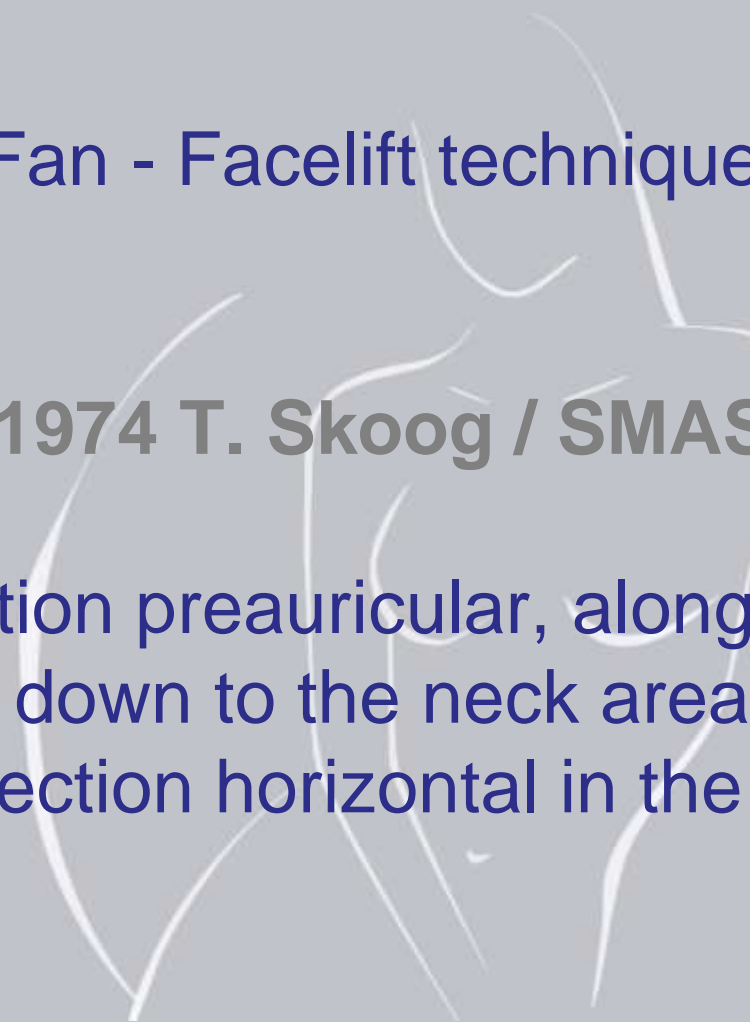


Fan - Facelift technique:

1974 T. Skoog / SMAS

SMAS dissection preauricular, along a vertical line
down to the neck area

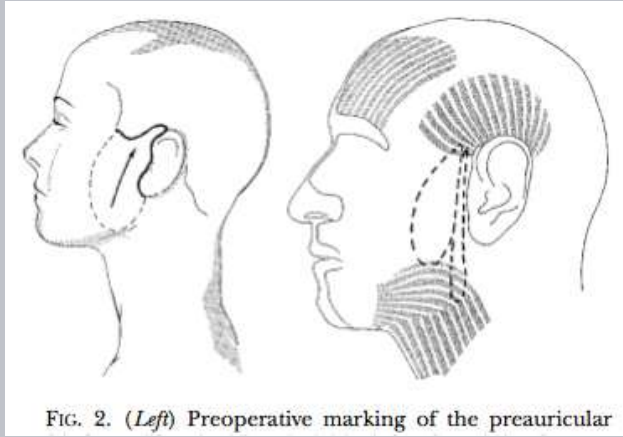
SMAS dissection horizontal in the cheek area



Fan - Facelift technique:

**1993 S. Aston / F.A.M.E facelift - finger assisted
midface elevation**

in conjunction to the horizontal SMAS dissection
undermining of the orbicularis oculi muscle
and midface suspension



Fan-Facelift technique

2002 Tonnard Verpaele / Minimal Access
Cranial Suspension Lift

suture suspension of the MACS lift area which is
located below and frontal to the SMAS

Piza anatomical study shows there is no SMAS

Fan-Facelift technique

D.C. Baker / New York
running SMAS suture

J. Bunkis / Los Angeles
adjunct suture cheek to “no SMAS - zone”

The “Fan-Facelift” W. Jungwirth

Fan-Facelift technique

consists of:

- 1 wide subcutaneous undermining
- 2 SMAS dissection
- 3 F.A.M.E. preparation
- 4 running “fan” suture
to lift SMAS, Midface and pre SMAS Area
in one



The “Fan-Facelift” W. Jungwirth



Fan-Facelift technique

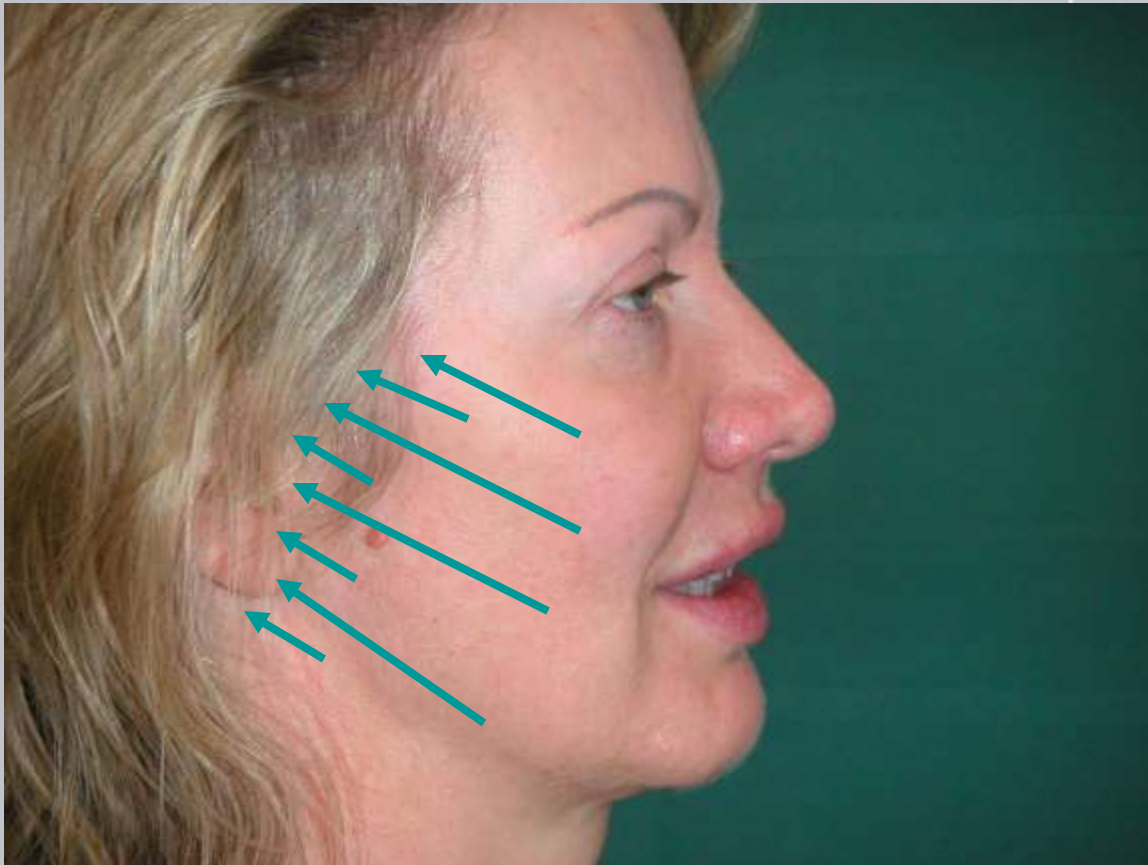
results in:

- 1 more vectors and tension in the SMAS and pre-SMAS plane
- 2 better redistribution of Volume in the midface
- 3 about 15-20% more preauricular skin resection without tension

The "Fan-Facelift" W. Jungwirth

Technique

schematic drawing of "fan" suture position



The “Fan-Facelift” W. Jungwirth

Intraoperative



sidewise comparison



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postoperative day 2



second postoperative day

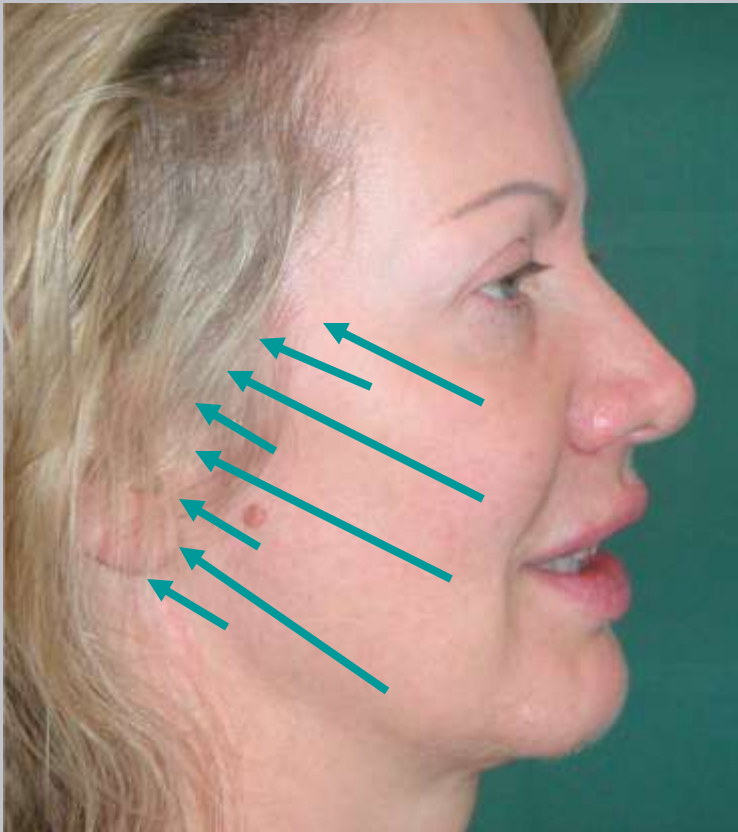
Fan Facelift

multivector approach

no volume loss

Patientin 1

age 45a pre + 3 month postop



Fan Facelift

multivector approach

no volume loss

Patientin 1: different vectors

New volume distribution



Jungwirth W

Fan Facelift

multivector approach
no volume loss



Jungwirth W

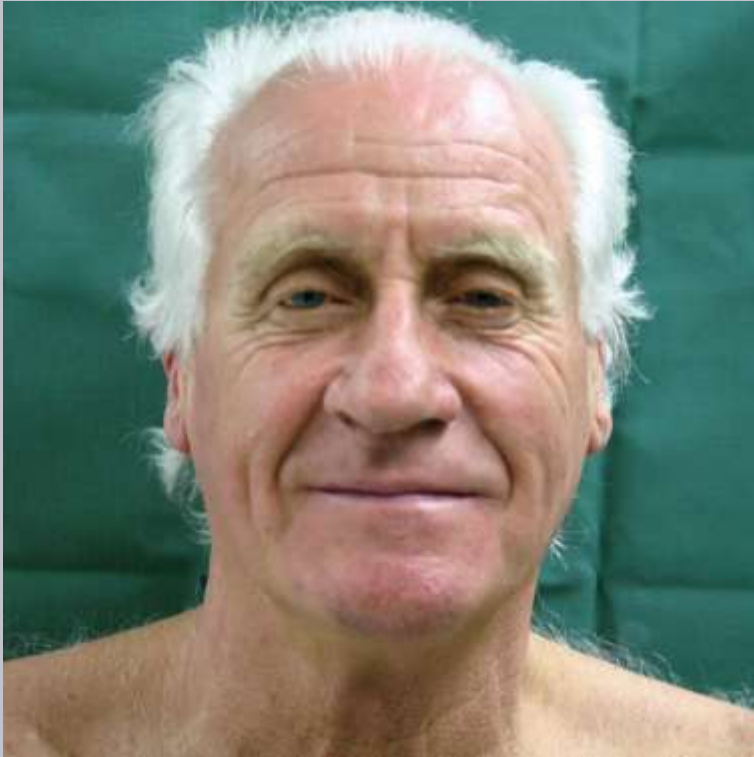
Fan Facelift

volume distribution

Fan Facelift & Necklift & Upper Lids

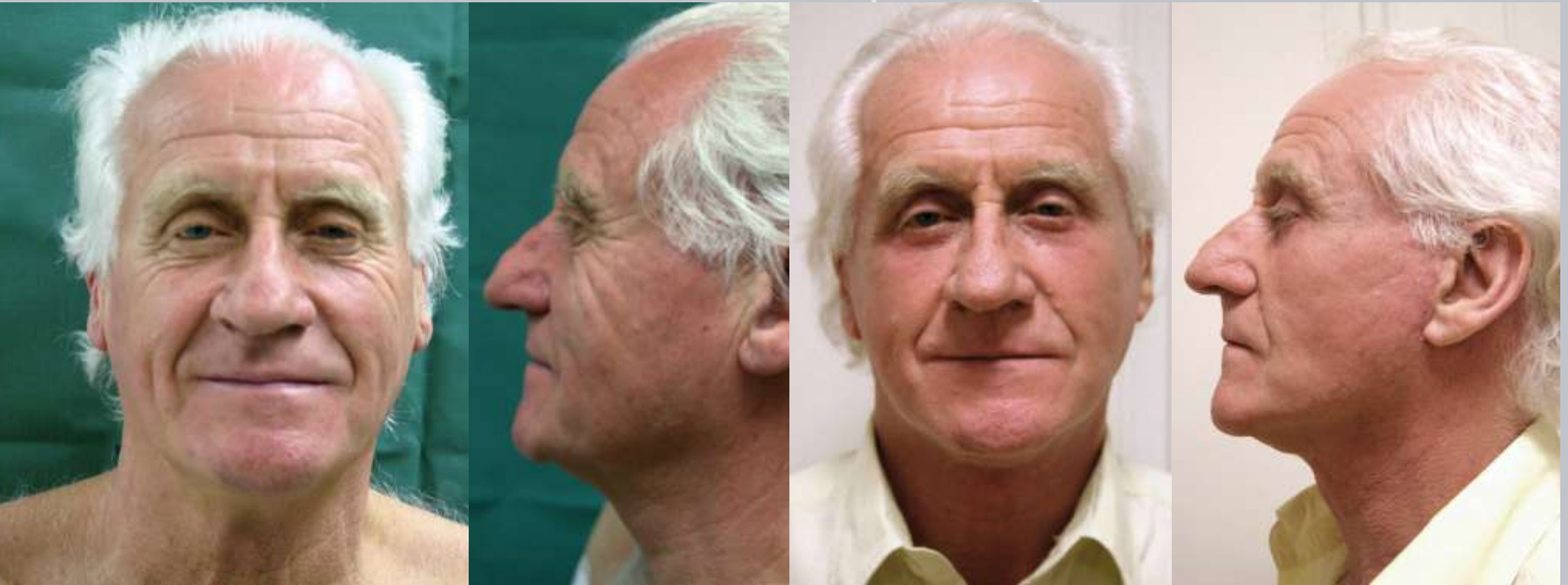


Jungwirth W
Fan Facelift
dynamics
66 year old male



Jungwirth W
Fan Facelift
dynamics

**Fan-Facelift & Necklift & Upper- & fat pres.
Lower Lid Blepharoplasty**



Jungwirth W
Fan Facelift
dynamics
one year postoperative
no permanent sutures

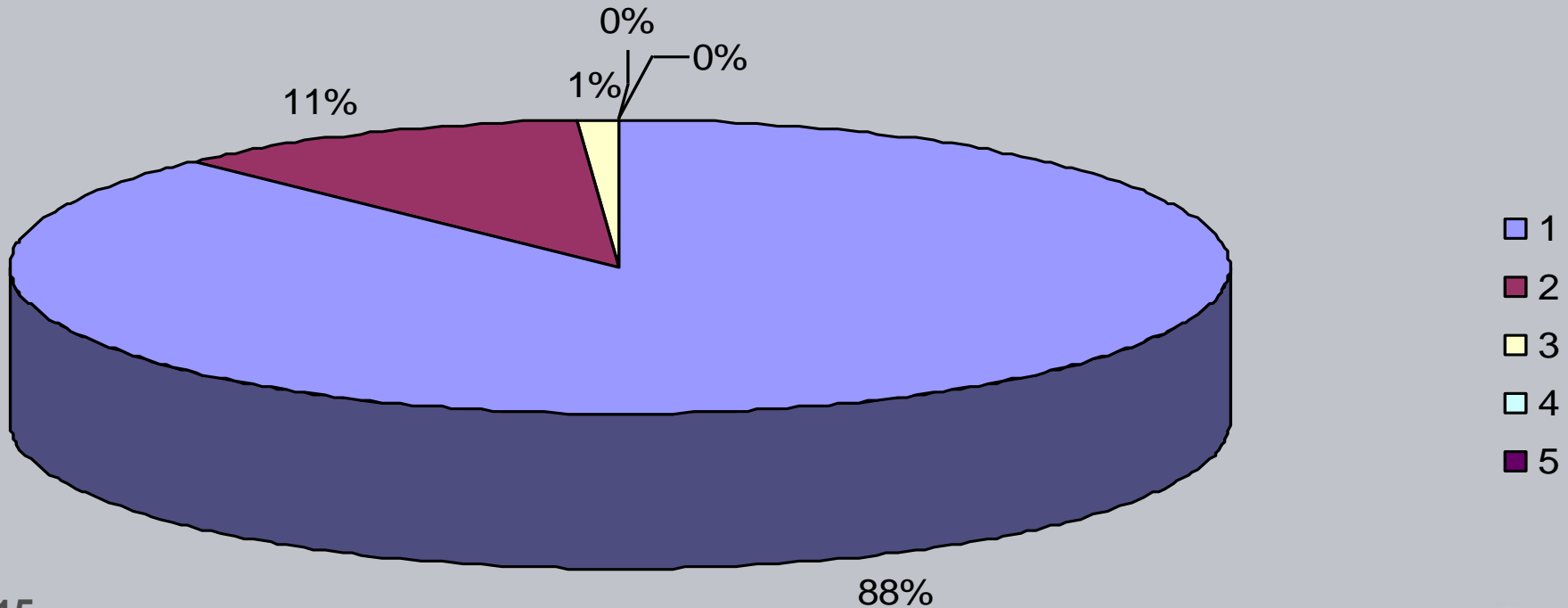


Patient Survey :Facelift

- **2003-2009: 375 Facelift patients**
- **responses: 81**
- **22% Response rate**
- **Measuring quality of the result:**
Are you content with the outcome of your surgery?



Facelift



n = 515

99% are content (grade 1 and 2 / 1= best 5=worst)



Jungwirth W

Fan Facelift

combination with Blepharoplasty, Dermabrasion



apologize for make up

starting Fan - Facelift 2 / 2008

138 fan facelifts

mainly in combination with neck lift

operating time

Fan - facelift - 1hour 20 minutes

Fan facelift and Fan Necklift - 1hour 40 minutes

The “Fan-Facelift” W. Jungwirth
complications

4 postoperative bleeding

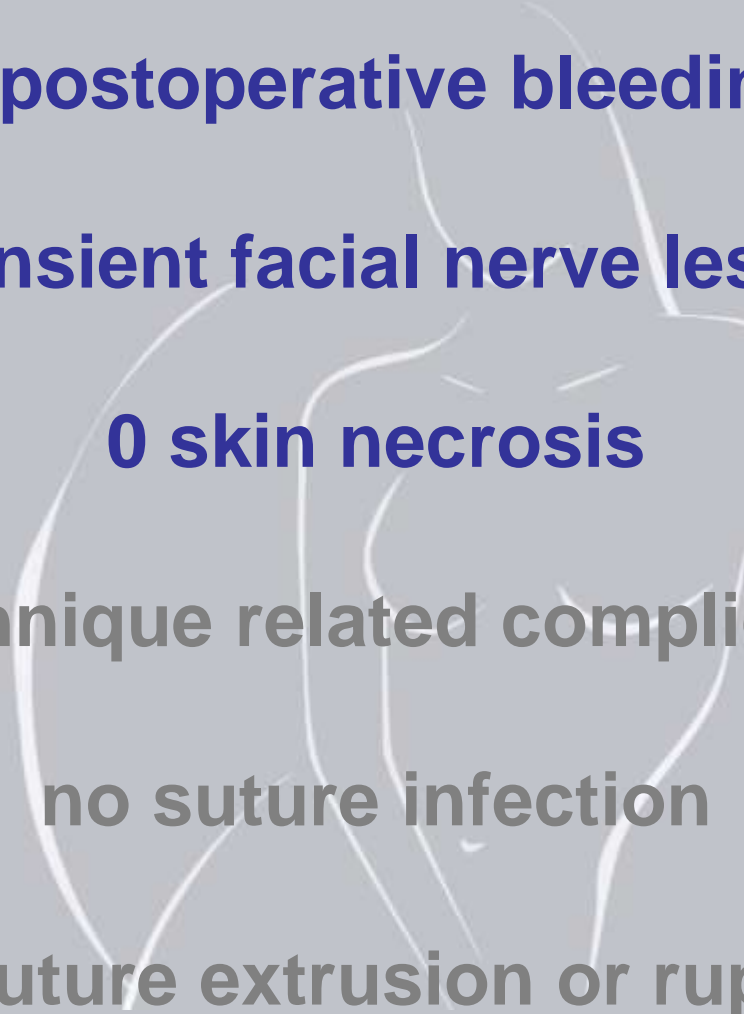
3 transient facial nerve lesions

0 skin necrosis

no technique related complications

no suture infection

no suture extrusion or rupture



conclusion

combines facelift experience

**volumetric redistribution of the aging face
structures**

multivector approach

**addresses midface area & SMAS area & pre
SMAS area in one running suture**

Jungwirth W, Plastic Surgeon:

study on outcome and complications

1072 facelifts

(neck-,face-,mini-)

13 years - (1992-2004)

641 Patients (10% male)

1 surgeon

clinic setting

sedation with anaesthetist

94 minutes per operation

54 minutes per facelift - procedure

study on outcome for facelift

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Safe Simple Fast Efficient

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