

## MALAR REGION REJUVENATION THROUGH NON-INVASIVE TECHNIQUES: HYALURONIC ACID FILLERS AND LIPOFILLING

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**Contour enhancements of the midface make up a dominant aspect of aesthetic surgery. The goal of midface rejuvenation is to decrease the prominence of grooves and creases as well as to provide volume to atrophied tissue. There are various options, including autologous tissue grafts, allogenic tissue grafts and alloplastic materials. In turn, patients' needs have led to an increasing trend of less invasive treatments. In the present study, 82 implants were used for midface augmentation in 41 patients (38 women, 3 men) between January 2014 and January 2016. Twenty-five patients were treated with Hyaluronic acid implants while the remaining 16 patients were treated with lipofilling. For both groups and in all cases, good integration of the filled material was observed in the malar region, with no significant treatment complications and the last follow-up visit demonstrated good results and overall satisfaction. Hyaluronic acid fillers and lipofilling are therefore the ideal answer to patients who aim for a natural and immediate result with manageable complications, but, unlike Hyaluronic acid, autologous fat allows us to obtain a long-lasting effect over time, resulting the closest thing to an ideal facial filler.**

Contour enhancements of the midface, and particularly the malar region, make up a dominant aspect of aesthetic surgery, as well as traumatic, congenital and extirpative defect corrections (1-11). The characteristics of the ideal material for this purpose include easy harvesting with minimal donor site morbidity, good biocompatibility at the recipient site, minimal risk of perforation, ease at remodeling, desired form maintenance and consistency *in situ* and in body tissue inertness with an easy reproducibility of the technique (12, 13).

There are various options to take into careful consideration for the reconstruction of a malar depression, including autologous tissue grafts, allogenic tissue grafts and alloplastic materials.

Alloplastic materials are readily available, lack

donor-site morbidity, decrease surgical time and cost, and have relatively good post-operative tissue tolerance (14). Various alloplastic materials have been used in facial cosmetic and reconstructive surgery including silicone, Gore-Tex, Medpor, and expanded polytetrafluoroethylene (ePTFE) (1,15).

In comparison, autogenous grafts, such as grafted adipose tissue, have the advantage of relative resistance to infection, ease of incorporation into new tissues, absence of a foreign body reaction and decreased incidence of extrusion. With lipofilling one can get a more natural reconstruction of the face contour although they are lowly invasive with minimal donor site morbidity (15).

Furthermore, a number of various Hyaluronic acid fillers can be used for midface rejuvenation

*Key words: malar region, hyaluronic acid, rejuvenation, filler, lipofilling*

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0393-974X (2017)

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