

JOINT EVENT

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Aesthetic reconstruction of head and neck using rhombic flaps**Neeraj Kant Agrawal**
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Statement of the Problem: Head and neck reconstruction is a surgical and aesthetic challenge as it requires good colour match, soft and pliable skin and minimum scarring. In addition, least deformation of vital structures and anatomical landmarks is important from cosmetic standpoint. Plastic surgery is one of those rare specialities which offers numerous options for coverage of a defect. Rhombic flap is one such useful alternative which has the aforementioned properties and is a versatile flap. Careful flap planning and execution is vital for a successful outcome.

Methodology & Theoretical Orientation: 84 patients with sustenance of head and neck trauma, old scars of the face and neck, congenital nevus, burn deformities or small cutaneous malignancies were operated upon. For a given defect at least 4 rhombic flaps were possible. Choosing the best option required careful attention to camouflage of scar and proximity to orbital aperture, eyelids, oral commissure cervicomental angle. Any other structure which may get deformed and alter the overall cosmesis of the patient should be taken care of.

Findings: Results of rhombic flaps were meticulously and critically analyzed. It is a safe flap and usually do not necrose. Short term results were excellent. Long term results were evaluated for visible scarring and resultant deformities. Patient satisfaction was recorded regarding named criteria.

Conclusion & Significance: Rhombic flaps offer excellent alternative to resurface head and neck defects in selected subset of patients.

Recent Publications

1. Simão TS, Máximo FP, Pinheiro RR, Barbosa FEAS et al (2012) Versatility of the Limberg flap in reconstructions after resection of facial tumors. *Surg Cosmet Dermatol* 4(2):127-9.
2. Alvarez GS, Laitano FF, Siqueira EJ, De Oliveira MP et al (2012) Use of the rhomboid flap for the repair of cutaneous defects. *Rev Bras Cir Plást* 27(1):102-107.
3. Townend J (1993) A template for the planning of rhombic skin flaps. *Plast Reconstr Surg* 92(5):96871.
4. Bray DA (1983) Clinical applications of the rhomboid flap. *Arch Otolaryngol* 109(1):37-42.
5. Lister GD, Gibson T (1972) Closure of rhomboid skin defects: The flaps of Limberg and Duforentel. *Br J Plast Surg* 25(3): 300-14.
6. Limberg AA (1946) *athematical Principles of Local Plastic Procedures on the Surface of the Human Body*. Leningrad: Medgis.

**Biography**

Neeraj Kant Agrawal, a 2005 MCh from prestigious King George Medical University, is currently associate professor in the department of plastic surgery, Varanasi. Being a part of active and updated academics he keeps himself in touch with the latest. He is actively involved in intradepartmental and interdepartmental research and has numerous national and international publications to his credit. He has distinguished interest in aesthetic surgery which are increasingly on demand. Tissue expansion and local flaps especially in head and neck reproduces exceptional results in properly selected patients. Liposuction, rhinoplasty, blepharoplasty and botox form the bulk of surgeries next to tissue expansion. He uses tissue expansion very frequently for aesthetic reconstruction of head and neck. Rhombic flaps offer an excellent alternative for head and neck reconstruction and used in selected patients in increasing magnitude .

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