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Butterfly type excision of suspected skin lesion on upper lip and cosmetic outcome leading to a permanent augmentation of upper lip (Personal technique)

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Beginning with idea of "informational lines with intense sexual signals" mentioned in my scientific studies and works, it is sustaining that each line has its own language and words, giving the things a meaning, sense and expression, especially in this content it is referring to Body Shape, Contour on women's face and all together in the term of "Psychoaaesthetics".

As cosmetic surgeon or beautician, lot of attention is paid to details regarding the lines, contours and forms. As the fact that eyes and lips play a very important role in facial expression, not only in human race but also in the world of animals; these two are composed to be very strong tools for nonverbal communication, specifically with one of the most important anatomical elements in expression of women's sexuality. The Cupid's Bow, line of sensuality, the magnetic eyes of Cleopatra in the universal literature, and actually Angelina Jolie's, or Scarlet Johansson's lips are making subject of beauty and attraction, these are mentioned before "The informational lines of intense sexual signals". Double-reversed curve of Hogarth, French curves, which are usually based on logarithmic or exponential basis, these are determined to take in consideration in the same sense any other kind of artistic lines which can improve or decrease the "sexual signals" in surgical procedures. These lines and curves are important in the psychology and art; however they are accentuated in mimics as nonverbal facial expression in the composition of "Body language". One of the most important issues in lip surgery in case of removing or excision of skin lesion or moles on upper lip, specifically on the Cupid area raises a considerable modification of anatomical reports regarding post-op asymmetrical aspect of lips and visible unwanted scar. Usual procedure in case of excision biopsy of any skin lesion according to the British guide lines is done vertically and with 2mm surrounding secure margin. This is as oncological or pathological secureness, of not leaving any suspected tissue behind. These two case reports are about a patient of 55 and 65 years old which were concerned about post-op outcome and the asymmetrical appearance of the upper lip after excision biopsy of a long standing mole. The vertical excision of lesions on upper lip will leave an asymmetrical aspect of lip, and a visible scar later on. So in this technique asymmetrical aspect of upper lip is avoided, using a personal approach of butterfly incision which is in accordance to guide lines of primary excision biopsy of skin lesion in UK and cosmetic post-op outcome within an invisible scar. After this procedure, patient has a permanent beautiful lip augmentation which will give her an unexpected cosmetic result and psychological comfort and satisfaction.

Conclusion: The removal of mole or skin lesion from upper lip with vertical approach gives to the patient a release of not having a malignant or suspected lesion, but it will give patient a permanent and undoable asymmetrical lip and a vertical visible scar. In this proposed technique, patient will have an excellent outcome psychological satisfactory beside removal of a suspected lesion.

Biography

Ardeshir Vahidi is presently working in Floreasca Emergency Hospital, Bucharest, Practicing plastic surgery and reconstructive microsurgery. He is practicing plastic surgery-reconstructive microsurgery and Aesthetic and Cosmetic Surgery in private clinics and hospitals in Bucharest. His Specialties includes: Plastic Surgery, Reconstructive Microsurgery & Aesthetic Surgery.

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