

ELMELEGY TECHNIQUE AS ONE STAGE AESTHETIC AND FUNCTIONAL RECONSTRUCTION OF MAJOR UPPER OR LOWER LIP DEFECTS

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Introduction: Multiple techniques have been used for reconstruction of large defects of the upper and lower lip. However, some complications, such as microstomia, distortion of oral commissure, lip functional problems, and sensory loss might occur with these techniques. The aim of this work is to evaluate a new method of reconstruction of large upper or lower lip defects after excision of squamous cell carcinoma.

Patients & Methods: Eighteen patients with lower lip squamous cell carcinomas And 14 patients with lower lip squamous cell carcinomas were managed with this new technique of reconstruction using dermal fat flap, mucobuccal flap, and muscle transfer after excision of the tumor with 1-cm safety margin on both sides. The functional and aesthetic assessments were performed at least 6 months after surgery, and the results were compared statistically with a control group.

Results: Of the 18 patients, sensibility was normal in 16 (89%) and complete competence was determined in all cases (100%). In 17 patients (94%), complete and symmetric pouting and mouth-opening movements were ensured. Interlabial measurements would be better in all patients. Nasolabial asymmetry was detected in 1 patient (6%) and apparent mentolabial scar tissue was detected in 2 patients (11%). The new vermilion was of equal width to the upper lip vermilion in 15 patients (83%).

Conclusions: Based on our results, this technique could be considered a good choice for repair of major upper or lip defects. In addition, using this technique will give good aesthetic and functional results

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