

## Preface



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*Guest Editor*

It is an honor and a privilege to serve as a Guest Editor for this edition of *Facial Plastic Surgery Clinics of North America*. The opportunity to share ideas with mentors and colleagues is thought provoking and exhilarating. Likewise, it represents an opportunity to stimulate intellectual and practical developments in surgical technique, patient management, and philosophy of practice.

Rhytidectomy or facelift techniques have been described in numerous ways over the last century, evolving from small incision, skin-based procedures, to SMAS-based techniques, deep-plane techniques, and subperiosteal techniques. In some ways, this wheel of surgical approaches is coming full circle with a return to less invasive procedures. Whether this represents evolution or devolution is currently an area of controversy. Ultimately, aesthetic outcomes, longevity of results, and overall patient satisfaction will be the deciders in this debate.

In the mind's eye of many facial plastic surgeons, rhytidectomy is a technique ostensibly designed to address aging changes in the mid-face, jawline, and neck. However, public understanding of the term "facelift" is seen more as an analogy for total facial rejuvenation. Increasingly, many surgeons are incorporating adjunctive techniques to help patients achieve their goals. In this way, facelift can be approached in a systematic

approach (similar to our approach to rhinoplasty) toward the individual subcomponents that make up the procedure, using or omitting elements when and where indicated.

The purpose of this edition is to present a range of rationale-based approaches that can be used in facelift, recognizing that the proper technique must be applied for the right indications, and that certain tools in the armamentarium of facelift work more effectively in certain hands than others. Furthermore, this edition is intended to highlight elements of patient management that go beyond surgical technique and to enhance the surgical result with a pleasant patient experience.

I would like to thank all of the surgeons who have made contributions to this edition for their time and for sharing their expertise and thought process in applying various facelift techniques. Likewise, I would like to thank the readers of *Facial Plastic Surgery Clinics of North America* for a continued willingness to expand their intellectual horizons.

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