

Full-Incision Facelift Superior to Short-Scar in Neck Region, Study in Multiples Shows

Novel research on identical twins and triplets indicates 'turkey wattle' comes back in those who undergo short-incision technique

New York, NY – Facelift patients who wish to avoid the dreaded “turkey wattle” neckline years later should undergo a full-incision surgical technique instead of a short-scar method, according to novel new research by Northwell Health physicians performed on identical twins and triplets.

Lenox Hill Hospital plastic surgeon Darrick E. Antell, M.D., D.M.D., led a study directly comparing the two most popular types of facelift incision techniques on identical multiples, who are genetic matches. Believed to be the only research of its type in the world, the study indicated the full-incision technique yielded better results in the longer term than the “mini” or short-scar lift.

“The neck is the area most people are seeking to improve when they come for a facelift, and surgery is the gold standard to improve a turkey wattle,” explained Dr. Antell, who has performed plastic surgery on identical twins throughout his career. “This study clearly suggests that the short-term results for both incisions are equivalent, but about five years later, those who received a short incision show a relapse – their wattle is back.”

“This is probably the first and only study that examines these two incision techniques,” he added. “Although people like the idea of a short incision, if it doesn’t yield equivalent results, they need to consider doing the longer one.”

Dr. Antell’s research will be published in the June 2016 issue of the journal *Plastic and Reconstructive Surgery*.

About 128,000 facelifts are performed in the United States each year, according to the American Society of Plastic Surgeons. Since the advent of the facelift at the beginning of the 20th century, a multitude of various incisions and techniques have evolved. The short-scar method, popularized in the early 2000s, negates the need for an incision extending into the hairline behind the ear, potentially speeding patient recovery.

To obtain a true comparison of the full and short-scar facelift techniques, Dr. Antell performed facelifts on four sets of identical twins and one set of identical triplets

between January and August 2006, with the firstborn multiple randomized to receive the full-incision operation. Three sets of twins and the identical triplets were all female, while one set of identical twins was male. Participants' ages ranged from 56 to 73 at the time of surgery.

Short- and long-term postoperative photos were taken approximately one and five years later and subsequently graded by eight board-certified plastic surgeons with more than 100 years of combined experience. Each grader was blinded as to which procedure the depicted patients received, and they were asked to evaluate each patient's jawline, neck, and nasolabial folds – the two skin folds running from each side of the nose to the corners of the mouth.

Results from all eight graders were compiled and averaged for each facial region. No difference in results was noted at the one-year follow-up. But five years later, a significant difference was noted between the average scores assigned to the neck region, with the full-incision technique receiving a higher score.

“The full incision gives the surgeon flexibility to better reposition the tissues,” said Dr. Antell, adding that facelift results last an average of eight to 10 years, on average. “To my eye, I would say the differences in the neck tended to make the short-incision patients look older, and the graders graded the neck as superior in those patients with the full incision.”

Dr. Antell contended that his research “puts to bed” the question of which of the two facelift incisions leads to better long-term results.

“This is a study that would probably take another lifetime for someone else to reproduce,” he said. “It’s innovative research not done before, and at Northwell Health we’re always looking for ways to improve medical care and educate future medical leaders.”

Dr. Antell added: “We say we turn back the clock with facelifts, we don’t stop the clock. But this study shows that maybe we can turn the clock back a little better in the neck.”

