

## **Correction of post-blepharoplasty lid retraction with autologous fat instead of spacer grafts**

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**Introduction:** Post-blepharoplasty lower eyelid retraction remains a challenging condition to treat successfully. We report our experience of combining traditional methods of lifting the retracted lower eyelid with autologous fat transfer.

**Methods:** A retrospective review was performed on patients with post-blepharoplasty lower eyelid retraction who underwent combined lifting of the lower eyelid with autologous fat transfer. Lifting procedures included: lateral canthoplasty, inferior retractor recession, lateral orbicularis suspension and midface lift. The postoperative outcomes evaluated included central pupil to lower-eyelid distance, inferior scleral show and patient satisfaction.

**Results:** 26 eyelids of 13 patients were reviewed (12 women, 1 man). The mean age was 50 (range 43 to 82.) All had successful correction of their post-blepharoplasty eyelid retraction. Average volume of fat injected was 3.5 ml per eyelid (range of 2 - 8 ml.) Follow-up ranged from 2 to 19 months. No spacer grafts were placed. The lower eyelids have remained in a stable position throughout the follow-up period, with no cases of re-operation. Both patient and physician noted a functional and aesthetic improvement in lower eyelid position.

**Conclusion:** In addition to standard lifting techniques, transferred autologous fat enhances the anterior projection of a usually hollow post-blepharoplasty lower eyelid, leading to additional vertical support and elevation and may also prevent recurrent cicatrix formation. Our experience suggests that the combination of autologous fat transfer with standard lifting techniques produces a synergistic effect and is a safe and effective method for correction of post-blepharoplasty lower eyelid retraction. It may also eliminate the need for spacer grafts.