

Information provided is intended to inform clients of expected procedures and outcomes. However, not all patients, procedures or surgeons are the same, and information may not be applicable to all procedures. PIAC reserves the right to vary the way the procedure is performed or which technique is used.

Cheek Dimple Reconstruction(2 Sides)

Surgical/Procedure name

Common name

Cheek Dimple Reconstruction (1 side)
Cheek Dimple Reconstruction (both cheeks)

Introduction

Cheek dimples are commonly considered an attractive feature. The procedure for creating cheek dimples is actually quite simple and is usually performed as an outpatient procedure. During surgery the skin and the cheek muscle are connected so that when the muscle contracts, it pulls the skin inwards to form a dimple, in exactly the same way as a natural dimple. e.

Surgical Procedure

To create cheek dimples a thin circle of skin is removed from the inside of the cheek. This is done by cutting out a portion of the mucosa (inner cheek skin), the sub-mucosal fat and the cheek muscle using a punch biopsy instrument.

This area of missing tissue is then stitched together using an absorbable suture. The stitch goes through the cheek muscle on one side of the circle of missing tissue, then through the dermis layer of the skin and finally back through the cheek muscle on the other side of the circle. A surgical knot is tied, and a dimple is created, even when not smiling.

Within a week or two, as the suture absorbs, the cheek will flatten out and the dimple will disappear (when not smiling). However, inside the cheek, as scarring occurs, the muscle will connect to the skin and create a dimple when you smile.

This procedure can be performed on any kind of cheek however the best results are seen when the cheeks are not overly chubby. Larger dimples can be created using a bigger punch biopsy to remove a larger circle of tissue.



Hospital Admission

Out Patient procedure. No admission necessary.

Duration of operation

One to three hours

Anaesthetic

Local anaesthesia

Pre Operative Care

Before surgery please inform your surgeon of any allergies, all medical conditions, and any medication that you are taking (both prescription and non-prescription). You should also not smoke for 2 weeks prior to surgery as smoking can affect your reaction to the anaesthetic and slow down the healing process. Patients that suffer from hypertension must inform the surgeon prior to surgery. To eliminate the chance of post op. bleeding you should avoid aspirin and any medication containing aspirin or brufen for two weeks prior to surgery.

Post Operative Care

You may return to normal activities straight after the procedure.

In the first few months you should regularly rinse your mouth with Betadine oral antiseptic solution or Bactidol (chlorhexidine) solution, and the surgeon may prescribe antibiotics.

Risks and complications

There is very little risk associated with this procedure however you experience some minimal swelling.



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