

A TINY TOUCH, A TIMELESS CHARM – DIMPLEPLASTY

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Introduction:

Cheek dimples are considered to enhance facial beauty and expression. Naturally occurring dimples are caused by a double or bifid zygomaticus major muscle. Due to the increasing demand for dimples, various surgical techniques have been developed and used. We have used a safe, minimally invasive sling method in our patients.

Methodology:

- **location of the dimple:** intersection of a perpendicular line dropped from the external canthus and the horizontal line drawn laterally from cupid's bow
- **Anaesthesia:** 2ml 2% lignocaine with adrenaline is infiltrated at the marked point
- A linear incision of 0.5-1cm is made on the mucosal side of the proposed dimple site with a no.11 blade and deepened upto the subdermal plane.
- Then an 18 gauge needle is inserted through the skin piercing through this incised mucosal plane which is then threaded with a 1-0 PDS suture.
- The needle along with the suture is carefully withdrawn backwards in the same path upto to the dermal plane and then redirected vertically piercing the mucosa again creating a second entry point.
- The two ends of the suture are tied at the mucosal side and buried inside.



Results:

- The procedure was performed in 3 patients (2 females, 1 male)
- Mild pain at the surgical site was present which resolved in few days. No other major complications were noted.
- Satisfactory results were obtained in all three patients.

Discussion:

- The rationale behind the procedure is to create a scar between the dermis and the buccinator muscle
- Complications: Bleeding, infection, postoperative oedema, damage to stenson's duct and buccal branch of facial nerve.

Conclusion:

- The above method is a relatively safe, less invasive and has a shorter learning curve.
- Complications are uncommon and largely avoidable when proper technique is followed.

References:

- AR Lari, Nikhil Pansel Indian journal of plastic surgery: official publication of the Association of Plastic Surgeons of India 45 (1), 89, 2012

- **Conflict of interest:** Nil