Book Review

Lin and Mustoe’s Aesthetic Head and Neck Surgery is directed at plastic surgery residents and young plastic surgeons. The atlas is further designed to provide an overview of the broad spectrum of aesthetic surgery procedures performed for the head and neck. The book includes 46 chapters, the briefest of which is 2 pages and the lengthiest of which is 6, with most running 3 to 4 pages, including figures and photographs. The majority of chapters are well written, and the book reads easily; I was able to read the entire 203 pages in less than 4 hours. The chapters are structured similarly, and each includes sections on indications, preoperative planning, anesthesia, positioning and marking, details of the procedures, and “pitfalls” and “pearls.”

STRENGTHS

One’s initial reaction to this short text might be to question how it contributes to the existing literature, since there are many textbooks on aesthetic treatments for the head and neck. In fact, few discuss the entire field; therefore, the text fills a possible niche. The major focus is on facial anatomy (5 chapters), face and necklift (8 chapters), nose and septum (8 chapters), and oculoplastic surgery (5 chapters). The atlas includes over 50 contributors, and, as with any text written by numerous authors, the writing quality, photography, and graphics are occasionally “spotty” but overall good.

Perhaps the strongest group of chapters is the rhinoplasty/septoplasty section, in which the most common problems are addressed through either a problem-oriented approach—including open approach to the overprojecting tip (chapter 22), open approach to the underprojecting tip (chapter 23), the twisted nose (chapter 28)—or a technique-related approach—including closed rhinoplasty (chapter 24), secondary rhinoplasty (chapter 25), septoplasty and turbinate reduction (chapter 29), spreader grafting (chapter 27), and rim grafting (chapter 26). The strongest chapter in this group is the chapter by Ponsky and Guyuron on the underprojecting tip, which includes clear text, consistent clinical photographs, full details of the operation, and long-term follow-up.

The 5 chapters devoted to eyelid surgery are clearly written and well illustrated. Particularly well done is the chapter on senescent ptosis, with a nice description of the tarsal conjunctival müllerectomy, levator tuck, levator advancement, and frontalis sling. In terms of browlifting, Knize’s chapter on the limited incision forehead approach provides excellent surgical detail and beautiful before-and-after photographs with consistent position and lighting.

WEAKNESSES

The facelift section is not as strong as some of those mentioned in the previous section. The chapters clearly show the authors’ bias toward the short-scar technique, which is addressed in 4 of the 8 chapters. If the text’s purpose is as stated, to be a primer for residents, the authors underemphasize other important techniques. Additional chapters in this section focus on less-than-mainstream, time-honored...
techniques, including the chapter on short scar with round block superficial musculoaponeurotic system (SMAS) treatment and minimal access midfacelift, while failing to discuss the lateral SMAS-ectomy or standard SMAS plication techniques. Chapter 14 reportedly describes the deep-plane rhytidectomy. Perhaps today the term deep plane has become a generic term referring to a variety of sub-SMAS procedures. However, when addressing residents, our nomenclature should be clear, and I suggest that the term deep plane be limited to Sam Hamra’s operation as he initially described it. What is described in chapter 14 is more accurately a Skoog variant, rather than a deep-plane rhytidectomy.

The necklift chapter (21) was a bit confusing. The authors appear to be suggesting a direct excision of neck skin and Z-plasty as a good option for patients with submental fullness and minimal signs of aging. Perhaps this is a typographical error. The authors then go on to describe this technique in detail. Most of us would rarely perform this operation and would limit it to elderly males with significant skin excess only. Finally, Figure 21-4 is unclear regarding the type of necklift procedure performed.

Finally, the suggested readings at the end of each chapter predominantly refer to the author’s previous writings and are quite limited in number. It would have been helpful if these lists had been more expansive, thus allowing the reader to delve into more detail on topics of interest.

CONCLUSIONS

This atlas provides nothing new—but again, this was not the editors’ purpose. That the authors were able to successfully provide a primer (or introduction) to the broad field of aesthetic head and neck surgery in just over 200 pages is remarkable. Given this charge, it is understandable that some topics are not covered and that others are covered only briefly. In the end, the text accomplishes its goal of concisely introducing the young, aspiring plastic surgeon to the exciting field of facial aesthetic surgery. Ideally, this text will be a stimulus for readers to delve more deeply into the subject.

RATING: 3

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Disclosure

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