

Art of the Lip

Letter to the Editor:

In a time when dermatology and other aesthetic specialties are besieged by nonphysician and untrained physician providers, it is essential that we remain the unquestioned experts at what we do. One area in which our skill is most frequently below par is lip enhancement. Too often lips are enhanced without regard to the appropriate anatomy, and the result is the “sausage lip.” This is most frequently done by filling the white line of the vermilion border, as well as the body of the lip, with a commisure to commisure injection of hyaluronic acid(HA). Because HA is hydrophilic, the result is a blunted and rounded lip margin, instead of a more natural and attractive sharp margin. Even when small amounts are utilized, the blunting effect is seen. The body is also injected without regard to the normal depressions and protuberances that create the sensuous, matching curves of the Caucasian lip, resulting in the swollen sausage appearance. There are quite specific individual and racial differences between lips, and careful attention to the specific anatomy before injection is essential. Because African and Asian lips are quite often fuller than Caucasian lips, they are less often enhanced. The classic Caucasian upper lip is smaller than the lower lip by a ratio of 1:1.6 and has a lateral small bulge at each commisure and a central larger tubercle. The lower lip has two larger bulges medially, with a slight depression between them, and two depressions laterally that correspond to the lateral bulges of the upper lip, whereas the central tubercle of the upper lip corresponds to the depression between the two medial mounds (Figure 1). This anatomy was pointed out to me by my makeup artist daughter who highlights these promontories to give the appearance of a fuller lip. To enhance this anatomy without distorting it, I utilize the following technique. After topical or regional block anesthesia, the white pearly line of the upper and lower lips is injected with cross-linked collagen (Cosmoplast/



Figure 1. Normal preinjection lips.

Zyplast) in an advancing threading manner (usually about 0.5 mL). This gives a very sharp margin opposed to the blunted rounded margin achieved with HA. Additionally, the collagen incorporates lidocaine, which also further assists in anesthesia. A high-molecular-weight HA (Restylane, Hylaform Plus, Cptique) is then injected only into the protuberances of the lips along the wet/dry line of the mucosa (0.05 mL to each upper lateral prominence, 0.1 mL to the central tubercle and each lower lip central prominence; Figure 2). The volumes may



Figure 2. Injection sites.



Figure 3. 48 hours after injection.

vary considerably depending on the size of the lips and the desires of the patient and only represent reference points. The philtrum, rhytids, and marionette lines are also often injected, but the subject of this letter is specific to the anatomy of enhancement. The result of this technique, I believe, is a more natural and beautifully shaped lip, not easily recognized as enhanced (Figure 3).

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