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Two year evaluation of either bilobed flap or full thickness skin graft as a closure technique of the nasal tip

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Background: There is no clarity if a bilobed flap is the best treatment of choice for reconstruction of nasal tip defects.

Method: The nose of twenty patients was photographed 2 years after surgical excision of skin cancer and closure either with a bilobed flap (n=7) or a full thickness skin graft (n=13). Photographs were assessed by two dermatologists, two plastic surgeons and two non-medically trained individuals, applying the POSAS scale.

Results: There were no significant differences between opinions of the two techniques. Overall, on a scale from 0 to 10 where 0 means 'no visual abnormalities' the bilobed flap scored 2.22 versus 2.33 for the skin graft. Where


medical consultants preferred the bilobed flap, non-medical individuals favored the skin graft closure.

Conclusion: We found no evidence to support the textbook statement that the bilobed flap excels for reconstruction of defects less than 1.5 cm around the nasal tip

Speaker Biography

M A Kemler is currently in private practice as a Plastic Surgeon at Martini Hospital Groningen, Netherlands. He is the Member of the Dutch Society for Plastic Surgery (NVPC) and also the Member of the Dutch Association for Hand Surgery (NVvH). He is the author of over Research Publications, in peer-reviewed journals.

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