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Five Compression Techniques to Obliterate the Facial Artery for Safe Filler Injections at the Nasolabial Fold

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Abstract

Background

Cannula injections at the nasolabial fold may face a risk of periarterial placement of filler. Compressions to temporary obliterate the facial artery may minimize the chance of arterial injury similar to injection of vasoconstrictor drug.

Methods

This study monitored five manual compression techniques for obliteration of the facial artery at the nasolabial fold using ultrasonographic imaging in 46 volunteers.

Results

The ipsilateral mandibular compression temporary obliterated the facial artery at the nasolabial fold in 78 percent. The bilateral mandibular blocking sealed the artery in 93 percent. The ipsilateral modiolar compression resulted in occlusion of the artery in 27 percent. The ipsilateral modiolar and paraalar compression blocking effectively occluded the facial artery in 65 percent. The bilateral modiolar blocking obstructed the artery in 37 percent.

Conclusion

The compression techniques that effectively occlude the facial artery at the nasolabial fold in more than fifty percent of the cases to enhance safety of filler injections are: the bilateral mandibular compression (93%), ipsilateral mandibular compression (78%), and ipsilateral modiolar compression with paraalar compression (65%), respectively. These results provide alternative additional methods for physician's individual preference.

Biography:

Director of Chula cadaver workshops for botulinum toxin and HA filler. Founder of the Chula Soft Cadaver Surgical Training Center. Former Director of the Chula Soft Cadaver Surgical Training Center, 2000 – 2019. Former head department of Anatomy, 2004 – 2012. Faculty of Medicine, Chulalongkorn University and King Chulalongkorn Memorial hospital, Bangkok Thailand.

Speaker Publications:

1. Cadaveric Dissections to Determine Surface Landmarks Locating the Facial Artery for Filler Injections, Aesthetic Surgery Journal
2. The Novel Costotransverse Foramen Block Technique: Distribution Characteristics of Injectate Compared with Erector Spinae Plane Block, Pain physician
3. Anatomical and Ultrasonography-Based Investigation to Localize the Arteries on the Central Forehead Region During the Glabellar Augmentation Procedure, Clinical Anatomy
4. A novel anatomical consideration on the exposed segment of the facial artery, Clinical Anatomy

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