



# Short Access Facial Elevation

Sydney cosmetic surgeon **Dr Longin Zurek** traces the evolution of minimally invasive facelifts. Tara Casey reports.

There is growing interest today in less invasive facial rejuvenation procedures and Sydney cosmetic surgeon Dr Longin Zurek believes that often more can be achieved by doing less.

The majority of people considering a facelift to improve sagging of loose facial tissue are not prepared to spend many months recovering from aggressive procedures. Every surgical procedure carries some inherent risk but less intervention is likely to be safer and also means a shorter downtime for recovery.

These trends led Dr Zurek to become interested in providing patients with the option of minimally invasive facelifts. In 1998 he performed the first S-Lift procedure in Australia and since then has developed a specific technique that he calls 'Short Access Facial Elevation' which can be abbreviated to SAFE. 'Short' stands for the S-shaped incision in front of the ears only. The purpose of the incision is to gain access to the underlying fibro muscular structure (SMAS) to elevate and reposition sagging tissue of the neck, lower and mid face in a vertical direction (opposite to the force of gravity).

As there is continued confusion regarding the different techniques of minimally invasive facelifts, Dr Zurek believes it would be helpful to trace the history and evolution of this concept:

Dr Passot of France first described the facelift using an S-shaped incision with a removal of a strip of skin in front of the ear in 1919.

German surgeons reported performing similar procedures some years earlier (Hollander 1901, Lexer 1906 and Joseph 1912). However, due to 'secrecy' in this field, a description was not published at the time.

Those procedures involved removal of facial skin only without addressing underlying structure and are now known as Mini Lifts. Due to short lift results, Mini Lifts have been mostly abandoned. When Dr Zurek first introduced

the 'S-Lift' some surgeons assumed it was a skin lift and on that basis criticized his procedure.

Dr Skoog of Sweden revolutionised the facelift by addressing the deeper structures of the face and he published his work in 1974. The superficial musculo-aponeurotic system (SMAS) was established by French plastic surgeon Dr Tessier and defined and published by Drs Mitz and Peyronie in 1976.

Dr Ansari of Dusseldorf developed a skin-SMAS facelift

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through an S-shaped incision in front of the ear, which he called the 'S-Lift' in 1983.

Dr Zurek learnt this technique from Dr Ansari in 1998. At that time, Dr Ansari had performed over 3500 S-Lift procedures.

Dr Saylan also of Dusseldorf modified and popularised the S-Lift. Dr Zurek attended his workshop in January 1999, at that time he reported experience with 34 S-lifts over a period of four years.

Dr Tonnard and his associates from Belgium modified the 'S-Lift' and called it the Minimal Access Cranial Suspension Lift (MACS). The group reported experience with 88 cases from Dec 1999 to June 2001 and published their work in 2002.

By mid 2000, Dr Zurek had performed over 300 S-Lift procedures. He published an S-Lift survey in the *International Journal of Cosmetic Surgery* in 2000. Currently his experience with his modified procedure (SAFE) exceeds 2000 patients and he has reported his technique extensively at meetings in Australia and overseas. **acsm**

face

## case study 1

First S-Lift performed in Australia by Dr Zurek in 1998



BEFORE



AFTER S-lift, liposculpture of the neck and TCA face peel performed by Dr Zurek



BEFORE



AFTER S-lift, liposculpture of the neck and TCA face peel performed by Dr Zurek



## case study 2 – five years after S-Lift

S-Lift performed by Dr Zurek



BEFORE



Five and a half years AFTER S-lift performed by Dr Zurek



BEFORE



Five and a half years AFTER S-lift performed by Dr Zurek