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By Michael Ferguson

WHEN WORKING TO RESHAPE A HUMAN BODY, THERE IS NO MARGIN FOR ERROR. DEVOTING ATTENTION TO EVERY NUANCE IS ESSENTIAL FOR ATTAINING THE BEST COSMETIC SURGICAL RESULTS.

OKHTAR ASAADI, MD, FACS, Chair of the Department of Plastic Surgery at Saint Barnabas Medical Center, President of Asaadi Plastic Surgery, approaches every aspect of cosmetic surgery with a philosophy cultivated over 30-plus years in practice.

"As a general rule, eyelid, nose and face surgery is not about removal and pulling the skin tight," Dr. Asaadi says. "Doing only that can result in a poor aesthetic outcome. Reshaping is the underlying concept of those and all other cosmetic and reconstructive surgeries."

Dr. Asaadi explains claims of quick and easy transformation often result

in haphazard work and less than optimal results.

"There is no magic bullet for plastic surgery," Dr. Asaadi says. "You can't get good results by sitting a patient in a dental chair and using local anesthesia. Some procedures can certainly be performed in an office procedural room, but it's important that plastic surgeons have hospital privileges that allow them to offer the same procedure in a hospital setting. Patients can be left with unsightly scarring and serious complications after being operated on by unqualified surgeons."

Dr. Asaadi often performs procedures that take nearly four hours, and for these, he operates at Barnabas Health Ambulatory Care Center, where he can offer patients the safest procedure possible.

"Longer procedures should be performed in a hospital's surgical room because they require ideal conditions, which include excellent lighting, expert anesthesiologists and trained staff in a sterile and safe environment," Dr. Asaadi explains. "I can do multiple procedures, including facelifts, abdominoplasty and breast surgery, on a patient during one operation. Plastic surgery can be safe provided there is an excellent facility in which to operate and careful patient selection. Because of my emphasis on these things, I've never experienced a serious complication or morbidity."

Asaadi Plastic Surgery offers cosmetic solutions for numerous facial and body concerns. Ranging from simple skin treatments for touching up aging faces to complicated eyebrow, nasal or breast reconstruction and reshaping, Dr. Asaadi helps patients realize personal aesthetic goals. He takes no shortcuts, and the process begins with a thorough discussion to assess patients' expectations.

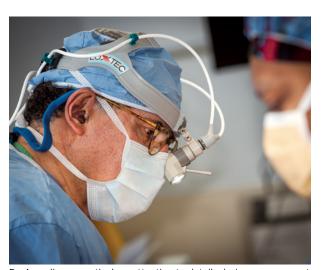
The First Step: Listening

Whether patients want to rejuvenate their eyelids — a procedure known as blepharoplasty — recontour their noses or reshape their breasts after having children, Dr. Asaadi identifies precisely what patients expect from a cosmetic procedure.

When it comes to facial procedures, Dr. Asaadi takes a thorough approach.

"The primary rule for facial cosmetic procedures is that you can't only concern yourself with one part of the face," he says. "So I look at each feature in the context of the whole face."

Patients arrive at the office and are asked to describe their reasons for pursuing cosmetic treatment. Dr. Asaadi takes a complete medical history that includes the date of the last physical exam and identifies complicating factors, such as smoking, sun exposure, easy bruising and allergies that can cause postoperative swelling. The next step is perhaps the most important. Dr. Asaadi lets patients show him exactly what they want.



Dr. Asaadi pays meticulous attention to details during every aspect of surgery.

"I hand them a mirror and tell them to point at what they don't like," he explains. "Then, I ask them to use a finger to lift the facial anatomy to the point where they think they look most attractive. Some patients are unhappy with the bagginess around their eyes, so they pull up the corners of their eyes. The nurse notes this along with several

facial proportion measures taken to assess symmetry and asymmetry."

One important determinant is the relationship between the eyes and cheekbones. Protruding eyes — when the most prominent part of the eye juts out further than the cheekbone promontory — translate into a negative vector, which means midfacial supporting structures are too weak to adequately support patients' aesthetic vision of their lower eyelids, so Dr. Asaadi may plan another surgery to fully address the patient's needs.

To determine the functional status of the eyelid anatomy, Dr. Asaadi documents the results of several simple tests.

Distraction and snap tests — gently pulling the lower eyelid away from the eye and releasing it — assess eyelid tone.

The lateral pull test helps judge whether

or not any fat should be removed from the area. Dr. Asaadi places a finger on the lower eyelid and pulls it towards the patient's ears to see if the fat recedes when the skin is tightened.

After taking pictures of the patient's anatomy from all angles, Dr. Asaadi conceptualizes surgical results with a drawing. Patients are asked to bring pictures of themselves at younger ages,



During a rhinoplasty procedure, septal and turbinate surgery also corrects breathing problems.

TAKING A LEADERSHIP ROLE

IN 2011, SAINT Barnabas Medical Center reappointed Mokhtar Asaadi, MD, FACS, as its Chair of the Department of Plastic Surgery at Saint Barnabas Medical Center. Dr. Asaadi, who is also President of Asaadi Plastic Surgery, previously led the department between 1999 and 2001.

As Chair of the Plastic Surgery
Department, Dr. Asaadi oversees a legacy
more than 70 years in the making. Sixty-four
plastic surgeons comprise the department
and provide Northern New Jersey comprehensive reconstructive surgical expertise.

The Burn Center at Saint Barnabas is the only certified burn center in New Jersey, and plastic surgeons contribute to reconstructive operations there.

Providing Education

Every year, the Plastic Surgery
Department presents two to three live surgery symposiums, in which surgeons guide attendees through complex procedures broadcasted into conference rooms.

This year, Dr. Asaadi has arranged three symposiums: in March, physicians can observe eyelid surgeries; in May, one of Dr. Asaadi's colleagues will present an innovative treatment for treating migraines by relieving muscle compression around facial nerves; and in October, a face and forehead specialist will lead physicians through the complexities of that anatomy.



After hump removal during nasal surgery, the new smooth profile is checked and rechecked by Dr. Asaadi several times using a wet finger on the dorsal line of the nose.

and by comparing past photographs with those taken in the office, Dr. Asaadi can plan a procedure that restores their youthful appearance. He then explains every aspect of the procedure or procedures needed, as well as preventive steps to assuage postoperative complications.

Blepharoplasty

Blepharoplasty is a complex, multifaceted procedure for retouching upper and lower eyelids. Since it has become a staple cosmetic surgery offering, the traditional philosophical approach — to remove skin, fat and muscle without concern for

preserving tone and elasticity — has been replaced with a more nuanced method that preserves eyelid anatomy and function.

During the procedure, Dr. Asaadi makes incisions in the creases of the upper eyelids and below the lashes in the lower eyelids. He then separates the skin from underlying fatty tissue and muscle, removes fat and trims slack muscles.

"In the 50 years since blepharoplasty was invented, it's become completely different in principle and technique," Dr. Asaadi says. "The most challenging parts of the operation are the lower eyelids, cheek and midfacial areas."

Youthful people's lower eyelids appear not to exist at all, as though eyelashes emerge from an undefined space below the eyes. As people age, the eyelids' almond shape transforms to a rounder, baggier appearance due to fat accumulation.

"Traditional blepharoplasty methods will not correct the lid/cheek junction," Dr. Asaadi says. "How much fat is removed from the lower eyelid is important. If all the fat from the area is removed, the result will be a hollow look. The eyelid has to be tightened to restore the almond-shaped, youthful appearance."

No blepharoplasty procedure is the same. Because each procedure depends upon patient-specific anatomical and genetic determinants, a careful planning process is paramount to achieving optimal outcomes. An important part of the preparation is close observation of any malar bags, or festoons, which are caused by the aging process or family history.

"If festoons go unidentified and you proceed with an operation, the lower eyelid may get better, but patients will return with bagginess below the surgically corrected anatomy," Dr. Asaadi explains. "You've unmasked a deformity patients were unaware of. Correcting festoons must be a part of the procedure to make the whole face appear more youthful. For best results, it is essential to determine the best way to treat the festoon — which can be a problem with the muscle, skin, or fat, or even a combination of the three — during the planning process."

For patients who do not wish to go the surgical route, a noninvasive solution also

COMPREHENSIVE COSMETIC OFFERINGS

ASAADI PLASTIC SURGERY provides a number of surgical and nonsurgical cosmetic treatments, including:

- Arm lift
- Body lift
- Botox cosmetic
- Breast enlargement, lift, reconstruction and reduction
- Cosmetic fillers (i.e., Juvéderm, Juvéderm VOLUMA, Belotero)
- · Chemical peel
- Core abdominoplasty
- Ear reshaping
- Eyelid surgery
- Face and neck lift
- · Facial implants
- Fat transfer injection to face, breast, buttocks

- Forehead lift
- Laser resurfacing
- Latisse
- Liposuction
- Male breast reduction (correction of gynecomastia)
- MasterTuck (Liposelection of abdomen without abdominoplasty and with adequate skin tightening)
- Nasal surgery
- Natural breast augmentation
- Permanent make-up
- Skin care and products
- Thigh lift
- Tummy tuck
- Ultherapy
- VASER liposelection (ultrasound liposuction)

exists for lower eyelid and midface rejuvenation. Fillers like Juvéderm are injected to these regions as an office procedure with no downtime and yield immediate results that last one to two years.

Rhinoplasty

Like blepharoplasty, the conceptual underpinnings of rhinoplasty have evolved in the last 40 years. Its initial reductive focus, in which surgeons removed cartilage, bone and septum from the nose, has changed to emphasize preservation. Rhinoplasty's new look offers patients the benefit of a more appealing aesthetic with functional improvement. When patients have a deviated septum, surgical correction improves breathing.

There are two primary approaches to rhinoplasty: endonasal and open. Dr. Asaadi is proficient at both modalities and stresses the importance of versatility.

"The surgeon must be able to perform both endonasal and open rhinoplasty," he says. "Many surgeons do one or the other, but to tailor the surgery to individual patients, it is important to be skilled in both."

The endonasal approach is best for correcting deviated septums and nasal valve stenosis, as well as for patients who have never undergone nasal surgery and do not have a difficult tip problem. This method gives surgeons better control over the tip of the nose and facilitates nasal grafting — a process made easier if septum cartilage is not obscured by scar tissue from previous operations. If septum cartilage is unavailable, cartilage from the ear or ribs is used to construct grafts that reshape the nose.

Open rhinoplasty is the optimal method for addressing the needs of patients who have had previous nasal surgery, considerable scarring from prior injury, underprojected/overprojected nasal tip or asymmetrical tip cartilages. For open procedures, an incision is made along the columella.

When patients seek a solution for an asymmetrical nose tip with a hump on the nose, Dr. Asaadi uses the open approach to perform a tip projection procedure that achieves excellent results



Dr. Asaadi performs facial skin laser resurfacing as an office procedure with the help of his assistant.

without removing the hump from the nasal anatomy.

Breast Reconstruction

Dr. Asaadi applies the same attention to detail to breast augmentation and reconstruction surgery as he uses in rhinoplasty and blepharoplasty. As women age and the skin loses its elasticity, breasts can lose their firmness and shape. Pregnancy can accelerate this process, and many women seek help

to address normal anatomical changes to the breasts during and immediately following pregnancy.

Dr. Asaadi offers several solutions to restore shape and tone to the breasts. Some women may only need augmentation, which increases breast size; some require mastopexy, which lifts and firms the breasts; and some benefit from a combination. Implants may be inserted in conjunction with mastopexy to restore size and firmness. Because it



Dr. Asaadi injects facial fillers to the lower eyelids and face for instant rejuvenation. The results are seen immediately with no down time, and patients return to their normal daily activities.

combines reconstructive and cosmetic principles, this is the most complicated breast procedure.

The first concern many patients express about implants is safety. To assuage their fears and offer the safest procedure with the best results, Dr. Asaadi uses saline implants.



A sample of Dr. Asaadi's patients' testimonials of appreciation and gratitude

"There are no shortcuts in cosmetic surgery. I perform all procedures in facilities equipped with the latest equipment and an experienced supporting team. Each procedure is multilayered, and it is critically important to be highly attentive to sterility and patient positioning to offer patients the highest quality results. Rushing through surgery always ends in unnecessary complications. Surgeons must perform using best practices to give patients the results they expect."

Mokhtar Asaadi, MD, FACS,
 Chair of the Department of
 Plastic Surgery at Saint Barnabas
 Medical Center, President
 of Asaadi Plastic Surgery

Many of the body's natural processes can affect the shape of the breast following surgery, so numerous precautions are taken to ensure procedures have longlasting benefits.

For example, scar tissue and capsule formation can become too thick following surgery and push the implant upward, changing the breast's shape. To solve the problem of capsule formation, Dr. Asaadi follows a three-step process.

He inserts the implant under direct visualization to release the pectoralis muscle. Controlling bleeding prevents capsule and scar tissue formation around the breast implant.

Meticulous sterility measures — including washing the chest with antiseptic, changing to powderless gloves, and avoiding contact of implant with skin — minimize complications. To insert the deflated implant, Dr. Asaadi folds it, and places it in the pocket under the pectoral muscle, taking great care to avoid transmission of staph epidermis from the patient's skin to the implant. The bacteria can colonize around the implant, causing capsule formation and hardness, and antibiotics cannot penetrate the colony (biofilm phenomenon).

To perform the procedure, Dr. Asaadi approaches along the natural contours of the lower breast — not through the armpit, navel or areola. This approach reduces contact between the implant and breast tissue. Breast glands have bacteria that might not cause infection but can cause capsule formation.

For optimal outcomes, Dr. Asaadi performs mastopexy augmentations at Saint Barnabas Medical Center, with a skilled plastic surgery support team. Careful preparation correlates with excellent results, demonstrating a surgeon's critical role.

"One of the major problems with breast augmentation procedures is that there is a 25 percent chance that a patient will need a second surgery," Dr. Asaadi says. "After a second surgery, the number jumps to 33 percent who will need a third. Why should patients have such an operation when there's a high risk they'll need subsequent surgeries for correction? Surgeons must perform the first operation correctly."

The Right Choice

Cosmetic artistry cannot be achieved by alacrity. Surgeons must be committed to one objective above all.

"Safety is the No. 1 priority for cosmetic surgery," says Dr. Asaadi. "If patients seek elective surgery, they should not be pressured by price or influence. They need to pick the right surgeon and the right location. Patients need to beware of board-certification claims — there is no board certification for cosmetic surgery. They need a board-certified surgeon who specializes in plastic surgery and has privileges in a hospital."

For more information about Asaadi Plastic Surgery, please visit www.asaadiplasticsurgery.com.



Dr. Asaadi's patients are welcomed by a warm office environment.