A Combined Facial Plastic Surgery in Eyebrows, Mustache, Beard and Sideburns Hair Transplantation of Asian Males by Follicle Implanters

Yi Jung Lin*, Chi Chen Tzou1, Hao Chih Tai2, Ya Ju Hsieh3

1Gaudit Hair Transplant Clinic, Taipei- 104, Taiwan
2Department of Surgery, National Taiwan University Hospital, Taipei- 100, Taiwan
3Mackay Memorial Hospital, Hsinchu Branch, Hsinchu-300, Taiwan

Abstract

In recent decades, hair transplantation techniques have advanced that give good results and more naturally acceptable. Hair restoration is one of the most exhilarating and innovative surgical fields in aesthetic surgery today. A detailed gratitude of anatomy has certified the use of follicular unit grafts. Therefore, hair transplantation technology would be a combination of art and science, if the novel methods applied for harvesting and implantation. In this study, we have shown different hair transplantation cases in Asian male. This study exhibited different states of hair transplantations, such as hairline transplantation, bilateral sideline around temporal area, sideburn transplant, eyebrow transplantation, and mustache and beard transplantation combined in different cases. Notably, we use our own and patented delicate implanter to insert different sort of follicles into different part of the recipient sites. This study may highlight the significance and safety of combination of different parts of facial hair transplantation at one time to change face impression, especially on Asian male patients. Our novel technique may also advocate future directions in multiline facial hair transplantation, which we define as harmless, consistent, and available typical procedure for designated facial cosmetic surgery.

Keywords: Hair transplantation, Follicular Unit Surgery, Asian male, Hairline, Eyebrow, Sideburn, Whisker, Mustache and Beard

Introduction

Hair transplantation have become the typical of care in the treatment of male pattern baldness [1-3]. Micro-and minigrafts hair transplantation have also been described for restoration of hair-bearing areas outside of the scalp including eyebrow, eyelash, mustache and beard restoration [4, 5]. Improvements in hair transplantation techniques have prepared possible real-looking facial hair transplants. Transplanting eyebrows, beards, and sideburns have all developed widespread techniques, since the amount of evidence readily presented and the outcome can be exceptional. Asian males of genetic factor present lack of hair on the face compare to western males. The marking of sideburn, mustache, goatee and hairline alteration induced by cosmetic surgery can be attractively restored using hair transplant techniques. In our clinic, we have tremendous case experience in facial hair procedures. This extensive long time experience has provided an appreciation of the aesthetics of these areas, which provide patients with realistic expectations. Asian males are normally originated with soft face line, frontages appear plane and smooth with single eyelid; their nose bridges are in general leaning flat with shorter chin and few having large magnitude of facial hair, such as side burns, mustache, and goatee like Caucasian male. Due to extensive cross-cultural interaction between the East and West, those of the Western society heavily influence many of the Asian perspectives of aesthetic beauty. As a result, we see a strong growing trend of face plastic surgery as blepharoplasty, rhinoplasty, and bone reduction surgery in many Eastern regions like South Korea, China and Taiwan to westernize the petition on Asian males’ face contour, hoping to build up their manliness. Many of the oriental males attempt to bring up their image of strength and masculine appeal through hair transplant on eyebrows, mustache, hairlines etc. The racial and biological differences among Asians and Westerners, such as their facial configuration, nose, eyes, shape of head, are distinctively identifiable. These differences sometimes labeled Westerners as dolichocephalic, and Easterners as mesocephalic. With differences, the golden rule of aesthetic from western perspective will need to adjust to tailor the oriental facial rule. The author, through hair transplant, is able to help the clients of Asian males to change the contour of face shape and features in a quick and safe way of combination of facial hair transplant, without the need to trim their bones or reshape their looks through plastic surgery.

Correspondence to: Yi Jung Lin, Gaudit Hair Transplant Clinic, Taipei- 104, No.91, Sec. 3, Nanjing E. Rd., Zhongshan, Dist., Taipei City 104, Taiwan, Tel: +886-2-25159296; Fax: +886-2-25159296; Email: yi25162006[AT]gmail[DOT]com

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*This article is reviewed by *Xavier R, France; "Ahmed Mohamed Medra, egypt
Planning

Aesthetic design and creativity

Full facial hair aesthetic design needs immense skill; it requires even more than general hair restoration. Hair transplant physician is not just a doctor who restores and transplants patients’ hair follicles for redistribution, but artist to perform all cosmetic creativity and facial hair rearrangement. Artistic design is the key to overcome facial flaws.

Some elements such as color, quality, and density of the donor hair, as well as the contrast between the hair and the skin colors, are considered being important as they affect the result. For the better results, the difference between the donor hair and the skin must be comparatively less [6]. First, the position of the hairline is one of the most significant processes in face frame design. According to the suggestion given by Michaelangelo, locate the perfect hairline in a bald patient could consider but not definitely essential to split the face into three equal segments [7]. The shape of hairline also differs according to the variation of the shape of the face-round, oval or triangular. Commonly around 250-300 single hair grafts and 300-500 double hair grafts behind are used to position a natural and new hairline in almost single person. The micro hair grafts in the hairline should be put in an irregular saw-toothed pattern of macro- and microirregularity to provide a natural look [8]. As for eyebrow, sideburn, mustache, and goatee, we apply single hair grafts for outline the contours, and the double hair grafts in between the area. Besides, curved and disordered hairs could be used in different places for particular effects as customized needs.

Donor area preparation

Local anaesthesia is used for the entire procedure. A solution is made from 20 mL of 2% xylocaine with 40 mL of normal saline, to which 1 mL of adrenaline (1:70000) is added on harvesting; then changing to 20 ml of normal saline while implant (1:40000, super juice). The hair in the donor area is kept to a length of 16-18 mm and the local anaesthetic solution is injected just around the donor area. The donor area is then tumescenced by injecting normal saline into the entire zone. After 20-30 minutes for completely hemostatic effect to reduce bleeding, the donor area should be stilled at the completion of infiltration, since this provides exceptional anaesthesia and results in least bleeding.

Harvesting

A single-bladed knife is used to harvest the donor strip. We consider it very important that when harvesting the donor area, the blades continue parallel to the direction of the hair, so that the hair roots will not be damaged. Once the strip has been harvested, the gap can be closed with double layer sutures. We prefer deep sutures by 4-0 vicryl in the subcutaneous tissue to reduce the width of the scar. An interrupted or running suture of 3-0 or 4-0 monofilament nylon can oppose the skin.

Graft preparation

The yielded donor strips are directly immersed in cold normal saline, which is done by keeping the tray covering the grafts, immersed in saline on ice. Hydrating the donor grafts with ice-cold saline is significant entire the surgery as it impacts the survival rate of the grafts. While a single large strip has been harvested, it can be separated into smaller pieces [9] before the cutting of single grafts. The hypodermal fatty tissue underneath the hair roots is stripped leaving up to 2 mm of fat below the hair bulb. We use DIMIS-T 100A of high solution of digital microscope and Samsung LED monitor for follicle dividing. Despite preparing graft using a dissecting microscope gives the dividing a little slower, however, it is worth the effort and much more perfect.

Preparation of the recipient area

Anaesthesia for the recipient area includes a supratrochlear and supraorbital nerve block, followed by a ring block in the frontal area beyond the zone of hair transplantation when doing the hairline. Except the hairline, we use directly local infiltration anesthesia on the different facial recipient sites. The recipient area also should be tumescenced well with normal saline. To minimize bleeding and pain, the recipient area should be turgid before implant.

Graft insertion

The grafts are inserted and loaded in the patented implanters with TiN coated disposable needle before follicle transplantation. It is important to employ an atraumatic technique for graft placement. A steady pressure is applied to ensure that the grafts are flush with the surrounding skin. Burying the grafts beneath the level of the skin must be avoided because it can give a pitted appearance and lead to the formation of epidermal cysts. A cobblestone appearance is seen if the grafts are too elevated from the surface. Grafting sessions can last up to five or six hours, depending on different parts or follicle numbers may be transplanted.

Postoperative care

The patient is discharged the same day. Some swelling is apparent after a hair transplantation surgery and the patient should be informed of this prior to the procedure. The patient is educated not to wash his facial hair until 9th postoperative day. While combing the hair in the transplanted area for three weeks, the tooth of the comb should not incursion against the transplanted grafts. Wearing clothes like T-shirts should be avoided for three weeks. Hair oils or other stronger shampoos as well as helmets are also to be avoided for the same period. This is continued for a period of two to six months. This has been shown to promote earlier growth of the transplanted hair.

Results

The author uses delicate implanter for insertion to create ideal aesthetic appearances for patients (Figure 1). We conduct hair transplant to patients on facial region transforming them to the new energetic and masculine new looks; and through fine techniques of applying different types of follicles to surgical spots. Follicles come in different determinants: diameter, length, curve, and color (later is not a big concern for most
Asians, except gray hair, which is not the subject of discussion for this paper. The primary areas of facial hair transplant includes: scalp hair, hairline, sidelines around temporal area, sideburns, eyebrows, beard, mustache between nose and lips, goatee around chin area, and whisker where sideburns and goatee connecting together. We could see the great transformation of a man without facial hair in these areas.

Type 1 ~ 5 normally categorizes case analysis of aesthetic facial hair design. Type 1 is referred to as having two areas of facial implant, the most common condition includes hairline and eyebrow implants (Figures 2-4); Type 2 is for those with three facial areas of hair implants conducted (Figures 5, 6). Type 3 (Figures 7, 8) and Type 4 are patients with four facial hair transplants and five-face hair implants performed (Figures 9, 10). Type 5 are those having six parts or more of facial hair transplant performed, refer to as whole face aesthetic design and hair transplant (Figures 11, 12).

The author recognized that most patients come for aesthetic facial hair design and implantation, rather than hair restoration purposes only. If a patient wants additional transplant for cosmetic reason, Dr. Lin will further investigate the patient’s family history of hair loss, analyze and evaluate all possible options, and explain the different variations of hair plastic surgery to clients. Patients are satisfied with some key points to pay attention includes:
Figure 4: Type one - Two parts of hairline and eyebrow

Figure 5: Type two - Three parts of eyebrow, mustache and goatee

Figure 6: Type two: three parts of hair line, mustache and goatee

Figure 7: Type three: four parts of eyebrow, mustache, goatee, and sideburn
Figure 8: Type three: four parts of hairline, sideline around temporal area, eyebrow, sideburn

Figure 9: Type four: five parts of hairline, sideline around temporal area, eyebrow, mustache, and goatee

Figure 10: Type four: five parts of eyebrow, sideburn, mustache, whisker connection around sideburn and goatee, goatee

Figure 11: Type five: six parts of eyebrow, sideburn, whisker connection around sideburn and goatee, mustache, hair connection upper and lower beard, and goatee
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- Hairline and eyebrow transplant: instead of double eyelid cosmetic surgery, hairline and eyebrow transplant is able to make upper part of one’s face to look more stereoscopic and attractive.

- Sideline around temporal area and sideburn implant: maximal processing of sideburn implant is able to disguise the problem of prominently wide cheeks and helps to reduce the image of chubby flat looking face.

- Mustache transplant: the upper lip mustache transplant is able to cover-up facial flaws of leaning flat nose bridges of general Asian males.

- Goatee and whisker where sideburns and goatee connecting together implant: the goatee and lower lip beard is able to disguise wide and short mental problem. The beard implanted and grown by the chin area helps to reduce the image of squared looking jars, while providing a slimmer facial appearance and enhance the dynamic looks of charm.

With substantial amount of experiences, the author has been able to accurately assess for the total amount of hair follicle needed for transplant, overly excessive extraction is a waste of follicle lives, while too little is not sufficient to make up the cosmetic beauty; therefore, necessary experience and prior regulation are both very important.

**Significance of implantation sequence**

Significance of implantation sequence: full facial design requires at least two different such facial recipient sites’ implant. Time, level of difficulty, and anesthetic amount applied are different, as each case is customized and uniquely premeditated to tailor the needs of individual; consequently, the implant sequence and local anesthetic application are crucial to ensure the facial transformation through hair implants smoothly. Overall touchup and care: post operation care and follicle survival rate are important, as visual beauty are also primary concerns of aesthetic hair transplant.

To highlight the importance of cosmetic hair implant, it is very important to have adequate communication with patients before surgery, and understand the expectation of patient needs, their occupation, lifestyle, genetic condition, overall conditions, and so on, as they are all influential factors. Full-face hair transplant is able to dramatically improve the appearance and self-esteem of patients, as the author has successfully conducted various trichology surgeries.

**Long-term follow-up and care**

Once the facial hair begins regrowing after 3 to 4 months, these transplanted hairs will need to be combed and trimmed in a regular basis. The author will instruct the patient to trim the hairs by following the outline contour and hair flow. Not to cut too much to destroy the design outlines at first. After two to three instruction, the patients often do a good job by themselves. The hairs usually need to be trimmed every two to three weeks.

**Final thoughts on eyebrow, sideburn, whisker, and beard hair restoration**

All these facial procedures are effective when performed properly on patients who have informed and realistic expectations. Achieving consistent results requires adherence to careful technique and the assistance of experienced hair technicians. As someone who has specialized for the past 10 years in transplants to these areas, the author has found the results to be exceedingly rewarding and the surgeries challenging.

**Conclusion**

Recent advances in technology have made hair replacement surgery a viable option for many people but we must utilize this technique prudently. It is very important to form a team because one individual cannot perform the entire procedure single-handedly. Fine-tuning and accuracy in all steps of the surgery are essential to get good results. No compromise should be made with proper lighting in the operating room and with the quality of the instruments. A comfortable ambience in the operating room and use of audio-visual entertainment break the monotony, both for the patient and the surgical team. It is important to remember that a patient is worse off after a poorly performed hair replacement surgery. If done judiciously, transplantation is a very rewarding procedure, both for the surgeon and the patient.

**Competing Interests:** The authors declare no conflicts of interest.

**References**


