

Background

- Facial rejuvenation with rhytidectomy is the aesthetic standard for addressing anatomical changes of the aging face
- There has been growing interest in assessing patient satisfaction following surgical aesthetic procedures

Study objective:

- To investigate patient satisfaction following rhytidectomy as well as identify any factors that may positively or negatively impact satisfaction

Methods

This was a prospective survey-based study on patients who underwent rhytidectomy by two facial plastic surgeons between 2012 to 2020.

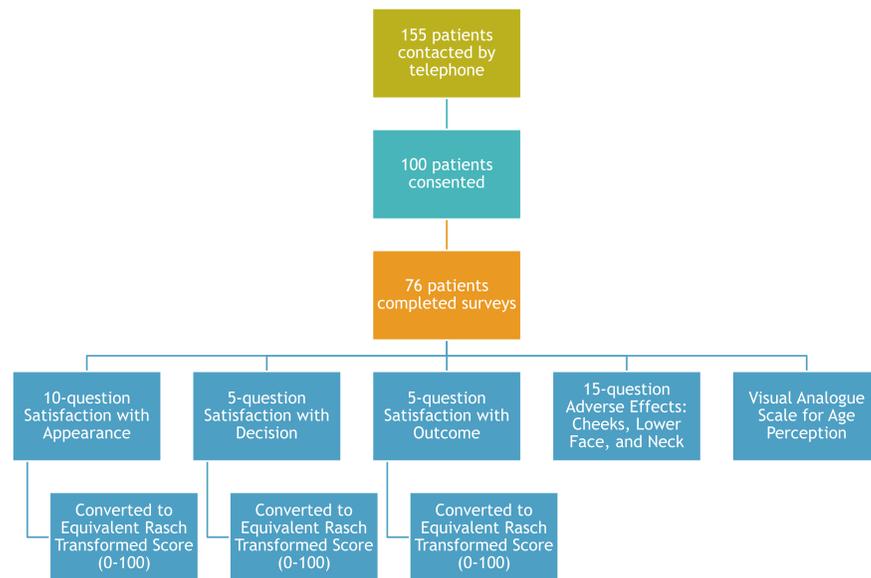


Figure 1: Study Schematic

- Patients were consented via telephone
- Completed a survey comprised of several instruments taken from the FACE-Q™ Aesthetics Database
- Equivalent Rasch Transformed Scores ranged from 0 to 100 with higher scores indicating greater satisfaction

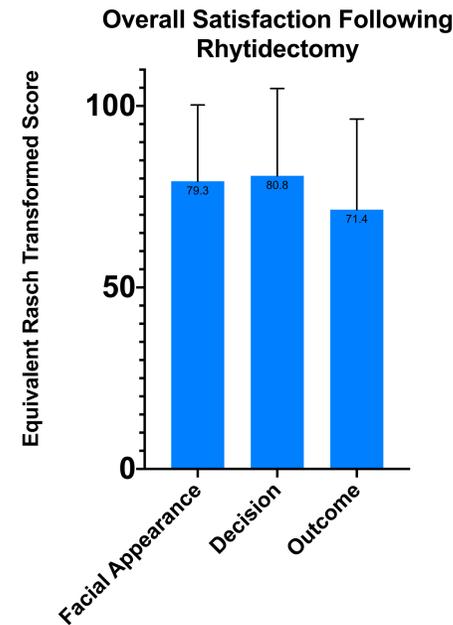
Outcome Measures:

- Primary Endpoint: to assess factors that may positively or negatively impact patient satisfaction, experience of adverse effects, and age appraisal following rhytidectomy

Results

A total of 100 patients consented to this study with 76 completing surveys. Five (6.6%) patients were male and 71 (93.4%) female with an average age of 61 (range, 28-78). Forty-one percent (n = 31) had a history of prior office procedures (e.g., botox, fillers, laser) and 20% (n = 15) had a history of prior facial cosmetic surgeries (e.g., blepharoplasty, rhinoplasty, brow lift) excluding rhytidectomy. Average follow up was 11.6 months (range, 0.3 to 70 months).

Figure 2: Overall, all patients showed high satisfaction with facial appearance (79.3 ± 21.0), decision (80.8 ± 24.0), and outcome (71.4 ± 25.0).



Age Appraisal 1 Year From Rhytidectomy

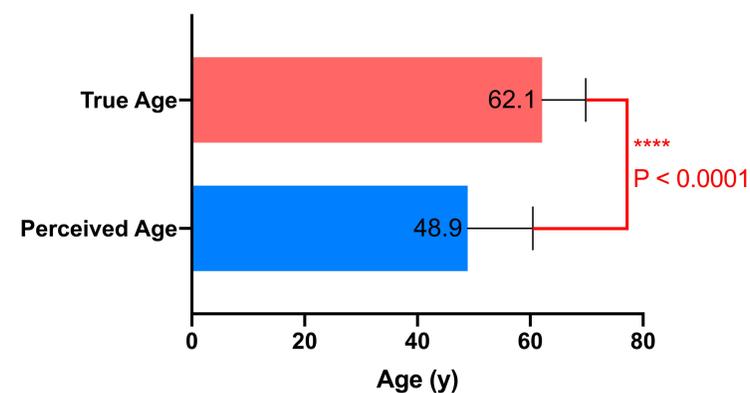


Figure 3: When asked how old they felt 1 year after surgery, patients reported an age that was on average 13.2 years younger than their true age (p < 0.0001)

Patients who were at least 3 months out from their rhytidectomy were asked:

"In the past week, how much have you been bothered by:"

- 19% had no bothersome adverse effects (n = 14)
- 80% had 1 or more adverse effect that bothered them "a little" (n = 59)
- 28% had 1 or more adverse effects that bothered them "a lot" (n = 21)
- Patients with a higher BMI tended to have more bothersome adverse effects (p = 0.017)

AEs Experienced Within the Past Week (N = 74)	N	%
Numbness	41	55%
Tightness	25	34%
Irregular facial contour	22	30%
Visibly noticeable scars	22	30%
Facial sensitivity to touch	19	26%
Tingling	19	26%
Palpably noticeable scars	17	23%
Pulling	15	20%
Itching	14	19%
Discomfort	10	14%
Swelling	10	14%
Parts of the face feeling too firm	9	12%
Difficulty making certain facial expressions (e.g. smiling)	6	8%
Bruising	5	7%
Difficulty with certain facial movements (e.g. whistling)	5	7%

Satisfaction with Appearance, Decision, and Outcome

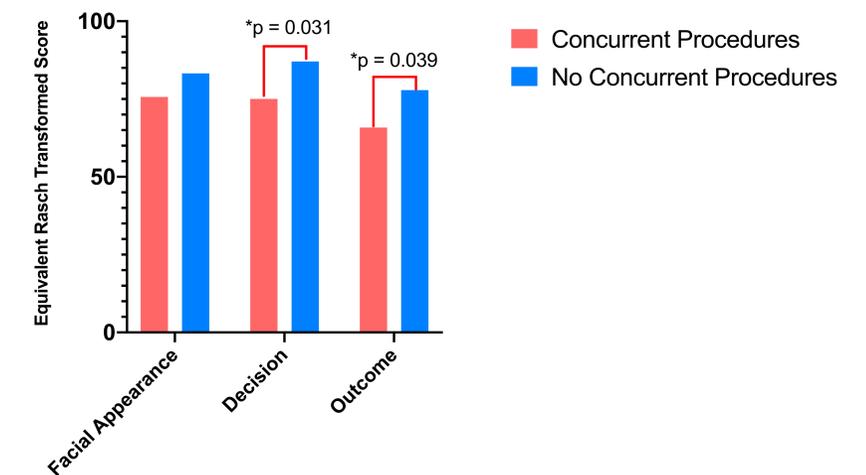


Figure 4: On average, patients were significantly less satisfied with their decision and outcomes if they had concurrent procedures performed. Concurrent procedures included blepharoplasty, chin implants, endoscopic brow lift, and platysma myotomy.

Conclusion

- Patients are generally satisfied following rhytidectomy
- Concurrent procedures may negatively impact patient satisfaction
- When recommending concurrent procedures to rhytidectomy, we stress the importance of investigating patient motivation for the procedure as well as expected outcomes in order to obtain the highest patient satisfaction.

References

1. Pusic A, Klassen AF, Scott AM, Cano SJ. Development and psychometric evaluation of the FACE-Q satisfaction with appearance scale: a new PRO instrument for facial aesthetics patients. *Clin Plast Surg.* 2013;40:249-260.
2. FACE Q @ Memorial Sloan Kettering Cancer Center, Anne Klassen and Stefan Cano 2009 ©
3. Statistical analysis was performed using GraphPad Prism 8 for macOS