

# Graphic modification of the Midface Degloving Procedure

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## Introduction

A retroruberous alveolodental gingival incision modification is proposed replacing the traditional vestibular base, as it is felt less aggressive.

## Material and Method

Our degloving modification technique was designed in our surgical (paediatric) practice as the natural surgical pathway to access to labio-nasal and mesio-facial structures; we did not use any horizontal incision in the labiovestibulogingival base.

We use the graphic description of Casson to explain our full retroruberous alveolodental gingival incision (FRTAGI), sometimes with medial vertical discharges and other selected incisions (FRTAGI: V?). Our modification avoids the most notable of the incisions: the full long vestibular fundus incision (FLVFI) which could develop into several complications leading to deformities and stenosis.

That is why we propose (FRTAGI: V?) and qualify it using selective vertical discharge, usually an incisal middle, to be used in sweeping out and approaches that are similar to Casson's. That brings less morbidity, since it does not enter the gingivojugolabial tissue of what is doubtless the most functional portion of oronasosinusmaxillary soft structures and facial structures, all the foregoing within a spectrum that is functional aesthetic, valuable and necessary.

## Discussion

We seek to replace the intraoral incision in the vestibular fundus of the upper jawbone (FLVFI) with the gingival incision described (FRTAGI: V?).

Fig. 1: Gingival incision (FRTAGI: V?)

Fig. 2: Exposing mesiofacial structures

