

Upper third reshaping: anatomical consideration of temporal area and safe treatment with fillers

The upper face should be assessed for volume loss in the temples and forehead, position of the eyebrow, and the presence of excess skin in the upper and lower eyelids. In addition, the presence of static lines at rest and dynamic lines during animation should be evaluated in the forehead, lateral canthus, temples, and eyebrows.

The temporal hollow occurs from bony reabsorption, muscle atrophy, and deflation of the fat pad over the temporal area. This causes a depression at the lateral brow and may result in a skeletonized appearance.

With age, the muscle under the temporal fascia atrophies, allowing more space for augmentation with a contouring product. There are two injection techniques that may be used to treat temporal hollowing, and each approach carries its own risks. In this frame, a safe and effective injection technique is presented, together with a cadaver dissection.

Understanding the anatomical structures and surface landmarks of the muscles, nerves and vessels will assist the aesthetic provider in performing safe and confident injection procedures of the upper face.

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