

## INTRODUCTION

The lips, situated at the center of the lower third of the face, play as a center role in expressing emotions, sensuality, and vitality. Comprising 3 distinct anatomical regions—the labial contour, lip vermilion, and labial mucosa—the lips hold both aesthetic appeal and functional implications for facial symmetry. Defects within this area can notably impact both. In the context of hyaluronic acid (HA) application for lip augmentation, the objective revolves around enhancing the lips' dimensional harmony with the individual's facial features. This involves increasing vermilion height, creating projection, alleviating perioral lines and wrinkles, adding volume, and mitigating excessive display of dentition. The sought-after filler for lip augmentation should yield aesthetically pleasing outcomes with natural tactile and dynamic properties that mimic facial expressions and speech patterns. Furthermore, the intervention should be reversible and exhibit a minimal rate of complications.

Application techniques targeting different anatomical zones within the lips yield distinct outcomes. Injecting the product retro-injectively from the lip center towards the sides accentuates the lip contour. Projection of the lips is achieved by injecting the product into the labial mucosa.

Conversely, oral mucosa filling results in lip volume enhancement as the adjacent dental arch propels the treated area forward.

Lip augmentation with HA is regarded as a safe and biocompatible approach due to its similarity to endogenous substances. Its efficacy stems from its emollient and protective properties, restoring skin turgor by filling intercellular spaces resulting from premature aging. Supported by robust literature, lip augmentation with HA has been demonstrated to yield gains in lip contour and volume, contributing to improved self-esteem and overall appearance.

The search for lip rejuvenation treatment is highly sought after, as lip projection brings facial harmony. From the age of 25, women and men have a decrease in the production of collagen and hyaluronic acid, consequently more mature lips demonstrate loss of contour and lip volume, leading to a lack of projection.

There is currently a demand for voluminous, proportional lips with a natural appearance, in particular upper lips where there is an eversion, facing the wet part of the lip. The purpose of this case report was to demonstrate a lip rejuvenation technique with AH (hyaluronic acid) medium reticulation, performed with needle, inserting the product into vertical locks, allowing projection, volume increase and lip contour.

## CASE REPORT

A 43-year-old female patient presented to the “Pro Clínic”, complaining of a thin upper lip compared to the lower lip, and sagging with loss of contour and volume (Fig. 1,2). There is currently a demand for voluminous, proportional lips with a natural appearance, in particular upper lips where there is an eversion, facing the wet part of the lip. The proposed treatment was medium reticulation lip filling with a needle, performing vertical locks everting the upper lip and contouring the edge of redness of the lips and increasing volume.

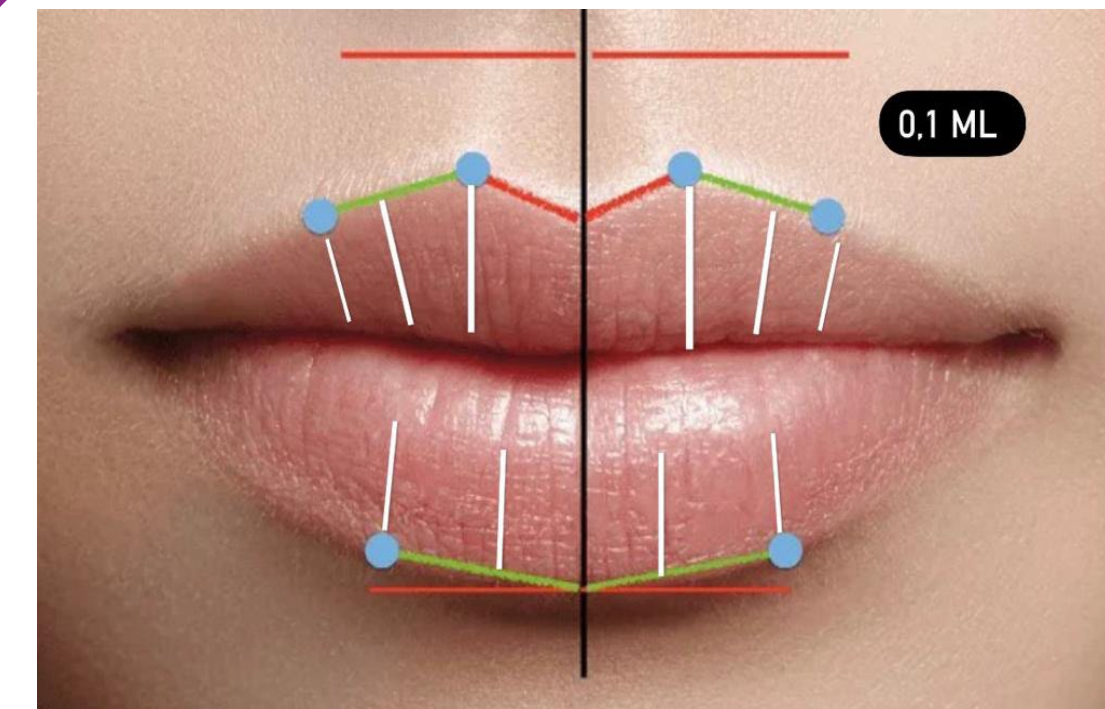


Fig.3

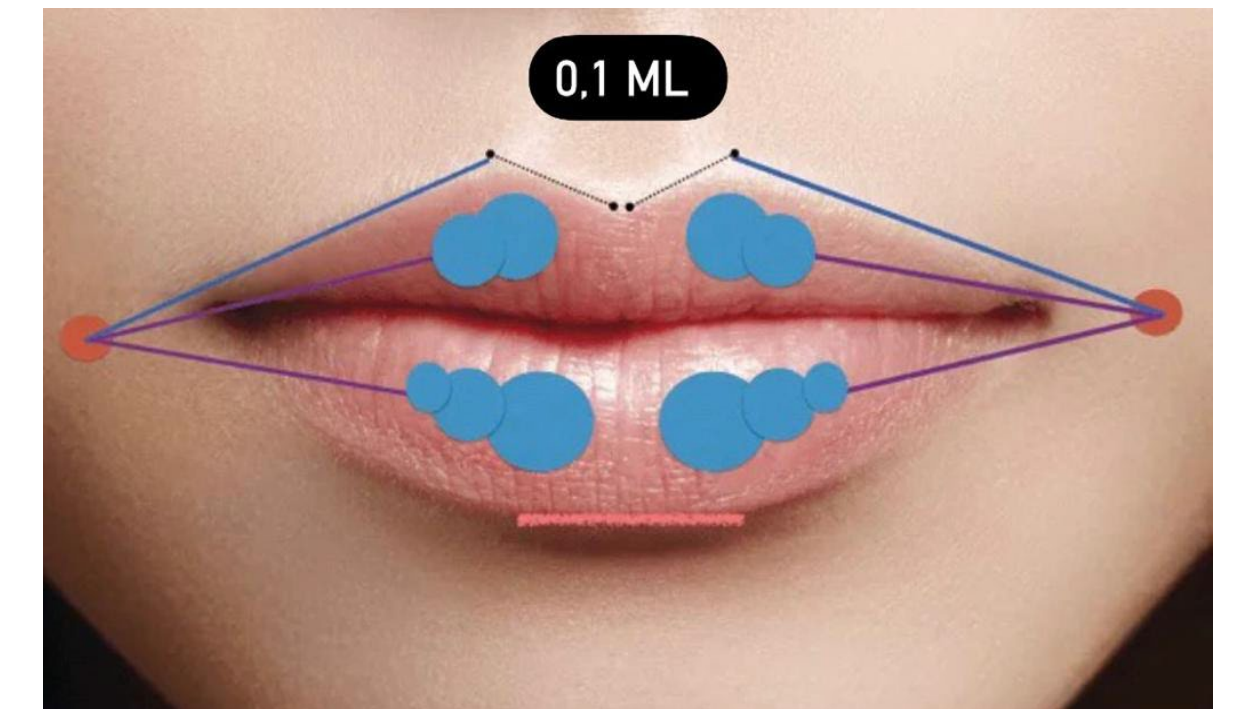


Fig.4

Source: <https://facemagazine.com.br/escultura-labial-procedimento-estrategico-na-harmonia-da-face/>

## Before

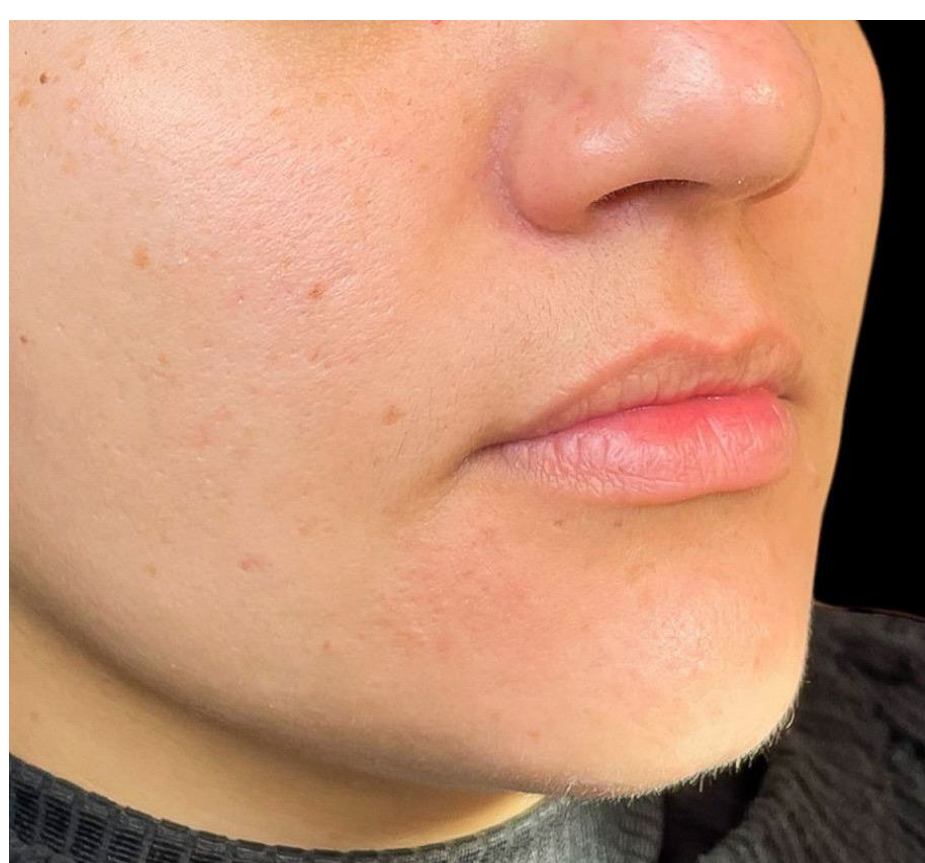


Fig. 1



Fig. 2

## After



Fig. 5

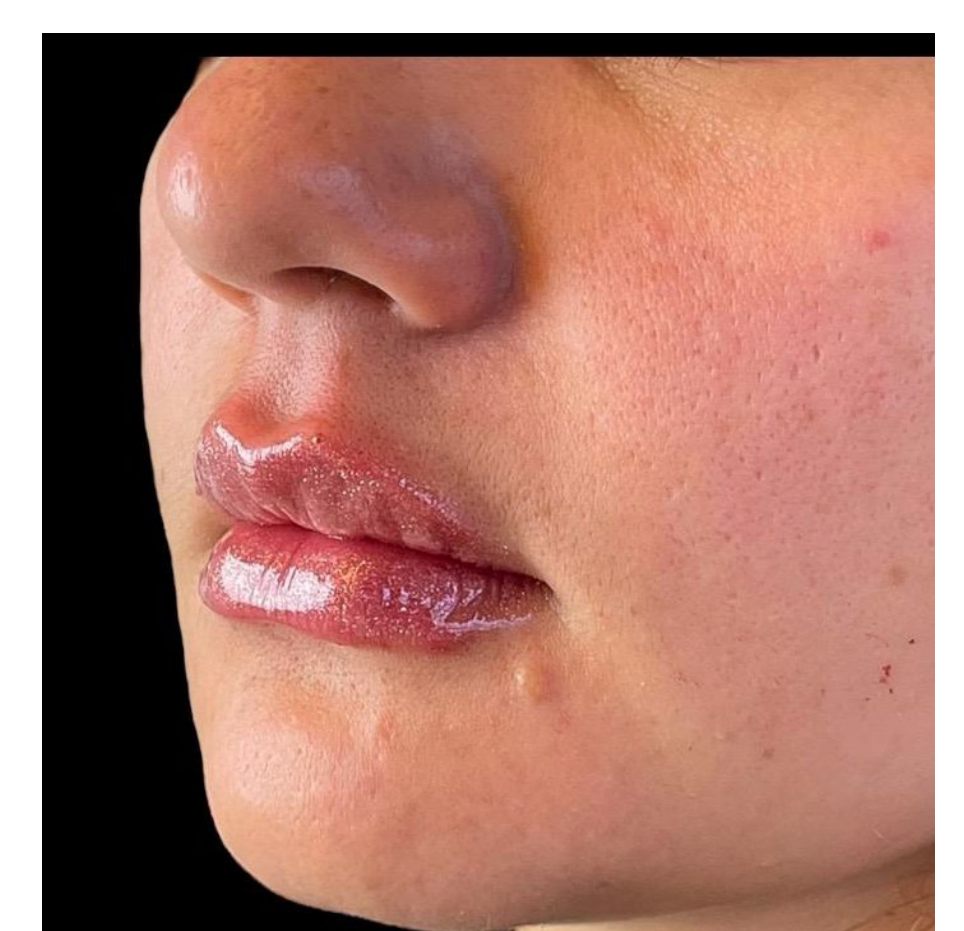


Fig.6

A photograph protocol, consent form and image authorization were carried out.

The procedure started with asepsis of the lips with 70% alcohol, followed by anesthetic blockade with 2% lidocaine with vasoconstrictor, in the branches of the infraorbital nerve, and branches of the mental nerve. The material of choice was Yvoire® CONTOUR S (Seokam-ro, Iksan-si, Jeollabuk-do, Korea). It started with a 27G needle in the cupid's bow region, performing aspiration and retroinjection of the product vertically, depositing 0.1 ml defining the high point of the lip, vertical locks were performed throughout the upper and lower lip (Fig 3).

After the procedure, a slight edema and erythema was observed, the patient already demonstrated a high degree of satisfaction and after 12 hours, she did not report edema, erythema and hematoma.

Subsequently, after all labial eversion vertically, lip contouring was performed by applying 0.1 ml and a small retroinjection horizontally, bringing volumization to both lips (Fig 4). A total of 1ml of hyaluronic acid was injected (Fig. 5,6).

## CONCLUSION

Lip filling performed with hyaluronic acid provided lip rejuvenation, preserving the original shape, achieving the desired result, with a natural appearance, projection, contour and volume.

## REFERENCES

- 1.Rohrich RJ, Ghavami A, Crosby MA. The roles of hyaluronic acid fillers: scientific and technical considerations. *Plast Reconstr Surg.* 2007; 120(6):41-54.
- 2.Pascali M, Quarato D, Carinci F. Filling procedures for lip and perioral rejuvenation: a systematic review. *Rejuvenation Res.* 2018; 21(6):553-59.
- 3.Luthra A, Shaping lips with fillers. *J Cutan Aesthet Surg.* 2015; 8(3):139-42.
- 4.Sarnoff DS, Saini R, Gotkin RH. Comparison of filling agentes for lip augmentation. *Aesthet Surg J.* 2008; 28(5):556-63.
- 7.Greene RM. Comparing the use of injectable fillers forthe youthful lipand the more mature lip. *Facial Plast Surg.* 2019; 35(2):134-39.

Patient allowed, through an informed consent term, the use of her images.