

## Response to “Is There a Role for a Noninvasive Alternative to Face and Neck Lifting? The Polydioxanone Thread Lift”

Dario Bertossi, MD; Giovanni Botti, MD; Alessandro Gualdi, MD; Piero Fundarò, MD; Riccardo Nocini, MD<sup>®</sup>; Ali Pirayesh, MD; and Berend van der Lei, MD, PhD

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We would like to thank Dr Bernardini for his comments<sup>1</sup> on our article “Effectiveness, Longevity, and Complications of Facelift by Barbed Suture Insertion” in *Aesthetic Surgery Journal*.<sup>2</sup>

A barbed suture lift and a modern facelift may indeed have very different prices, depending on socioeconomic circumstances and the nature of the private practice. However, comparing these two procedures in terms of quality and durability reveals a huge difference; basically a thread lift results in short-term lifting<sup>3</sup> without really solving the facial aging problem—a task that requires a modern facelift, which offers a significant long-term lifting effect generally combined with additional lipofilling to replace volume loss and initiate rejuvenation of the skin, the latter frequently being induced by the stem cells of the lipograft.<sup>4,5</sup> Moreover, a facelift also allows bidirectional lifting: by vertically repositioning the superficial muscular aponeurotic system and repositioning excess skin in a more oblique direction it is possible to obtain a far more natural facial rejuvenation than can be achieved with the blind, unidirectional “scrunching up” of tissues that a thread lift produces.

We agree with Dr Bernardini that nowadays the short-term effects of relatively simple noninvasive procedures are popular and definitely have become an important cornerstone in our daily practice: these procedures, such as the use of fillers, toxins, and lasers in combination with microneedling, offer safe nonsurgical rejuvenation and their lack of longevity does not therefore present an issue. However, for thread lifts, this is not the case: although Dr Bernardini states, based on our study,<sup>2</sup> that the

complication rate with thread lifts is low, we have concluded from these same figures that the complication rate is high. This difference in opinion arises from how complication rates are categorized: in our practice the observed complication rate after thread lifts is regarded as high because we consider that a high-quality demanding private practice should really achieve complication rates of below 1% to 3%. Practitioners used to higher rates of complications, as apparently Dr Bernardini is, might regard 11.2% of procedures resulting in superficial displacement of the thread into the dermis and an infection rate of 6.2% as low.

Threads are, in our opinion, not justified as a lunchtime treatment for the aging and sagging face: the modern surgical facelift (which can also comprise a short scar facelift),

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Dr Bertossi is a Maxillofacial Surgeon, Section of Oral and Maxillofacial Surgery, Department of Surgical Sciences, Dentistry, Gynecology and Pediatrics, University of Verona, Verona, Italy. Dr Botti is a plastic surgeon in private practice in Brescia, Italy. Dr Gualdi is a plastic surgeon in private practice in Milan, Italy. Dr Fundarò is a general surgeon and aesthetic surgeon in private practice in Bologna, Italy. Dr Nocini is an Attending Doctor, Section of ENT, Department of Surgical Sciences, Dentistry, Gynecology and Pediatrics, University of Verona, Verona, Italy. Dr Pirayesh is a plastic surgeon in private practice in Amsterdam, The Netherlands. Dr van der Lei is a Plastic Surgeon, University Medical Center of Groningen, The Netherlands.

### Corresponding Author:

Dr Dario Bertossi, Department of Maxillofacial Surgery, University of Verona, Policlinico GB Rossi, Piazzale LA Scuro 10, 37134 Verona, Italy.

E-mail: [dario.bertossi@univr.it](mailto:dario.bertossi@univr.it)

mostly combined with lipofilling, is currently the gold standard to truly address facial sagging, mitigate (mandible) bone loss, and deal with excess skin.<sup>4,5</sup> Even with great experience in thread lifting the potential for complications is much higher than experienced with fillers and toxins.

We think that as a semiopen surgical procedure, the use of threads may be justified for selected patients who are not suitable for extensive surgery.<sup>2</sup>

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