



## Rigotomy Using Myringotomy Blades Prior to Lipofilling

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Dear Sir,

Lipofilling is a commonly used procedure for filling up irregular contour defects in the body. In the breast, lipofilling is a useful adjunct for contour filling. Irregularities caused by scarring result in tethered bits of scar and skin, causing contour defects that need to be released for better effect [1]. A needle or coleman cannula is commonly used in clinical practice for subcutaneous rigotomy of scar tissue prior to lipofilling [2]. The use of an epidural needle for fat transfer has also been described [3]. This allows one to utilize the small lipofilling scar without the need for increasing its length. However, the needle often cannot reach the furthest sites due to its short length and a cannula gets blocked or easily bent [4].

We describe the use of a myringotomy blade which we have found very useful and effective for reaching and performing rigotomy procedures. This is the first known description of its use in the literature and has been used in our surgical practice (Fig. 1).

The myringotomy blade is an ear, nose and throat (ENT) surgical instrument that is passed down the external ear canal for incision of the tympanic membrane for insertion of grommets in the treatment of otitis media. The blade is spear tipped and can be used to cut in both a forward and backward sweeping motion. The handle is long and angled as seen to facilitate this with only a small incision made. The lipofilling incisions are made with an 11 blade stab through the skin. Any area that is tethered by scar is then released via the insertion of the myringotomy blade. A sweeping motion is performed with a palm over the affected area such that the motion is controlled. The blade is passed in a superficial subcutaneous plane just under the dermis for release of scar without buttonholing the skin. The procedure is then stopped when the scar is adequately released and the contour defect is softened.

We have used this technique in our practice for a while now in conjunction with lipofilling for the treatment and improvement of contour defects in the breasts. This could be easily used for areas such as the buttocks or other areas that require lipofilling and rigotomy which is further away from the incision sites. This allows the clinician to avoid further stab incisions, and the blade is already readily available as an established procedure in ENT. We highly recommend it to aid the clinician in smoothing over any puckered areas or scarred areas prior to lipofilling.

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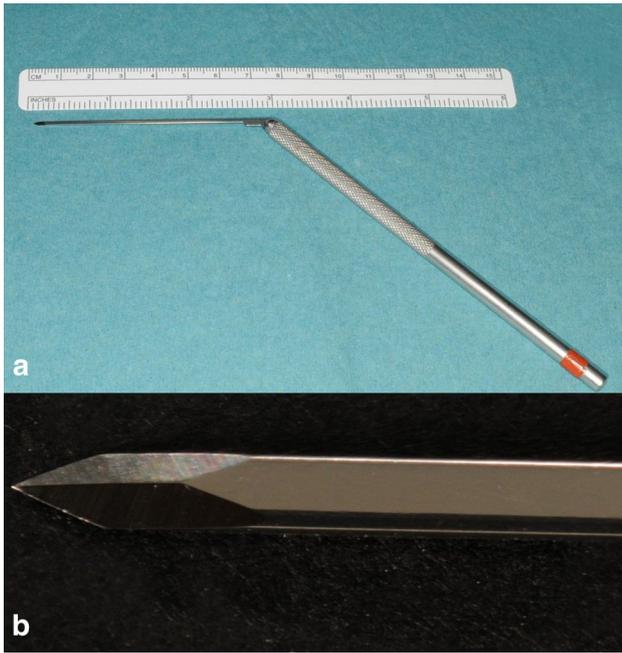
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### Compliance with Ethical Standards

**Conflict of interest** The authors declare that they have no conflicts of interest to disclose.

**Human and Animal Rights** This article does not contain any studies with human participants or animals performed by any of the authors.



**Fig. 1** **a** Photograph of the myringotomy blade and **b** photograph of the double-edged spear tip myringotomy blade allowing a sweeping motion of release of tethered scars

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