

How I Correct Silicon Granuloma in Chin

by Ago Harlim

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How I Correct Silicon Granuloma in Chin

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Objectives* (describe the learning outcomes)

A special technique to make a better result in natural shape of chin and reduce the opportunity of granuloma recurrence caused by silicone injection

Introduction

Silicone liquid injection have been used for cosmetic for more than 40 years. Many complications have been reported such as granulomatous, inflammatory responses, migration, and discoloration of the tissue. In 1992, the FDA has banned silicone liquid injection for cosmetic uses. However, silicone injection is still being practiced illegally. Liquid silicone injected to chin cause granuloma, inflammation, and a witch looked like face.

Materials / method

Many methods has been used to remove the granuloma but excision were the best among all. We used knife to do the excision, only to the granuloma without damaging the skin. The incision from under the skin in submental area and then we cut the excess skin for make better shape of chin. Using a knife to remove silicone granuloma is better than curettage, and for the inflammation we use corticosteroid injection.

Results

Combination knife with special technique and corticosteroid injection can make a better result in natural shape of chin and reduce the opportunity of silicone granuloma recurrence.

Conclusion

Granuloma on the chin can be removed by excision with special technique which result in aesthetic and low recurrence of granuloma.

Introduction

Silicone is discovered in 1824 by Jons Jacob Berzelliuss. Silicones are polymers, together with carbon, hydrogen, oxygen, and sometimes other chemical. We can find silicone everywhere because it is used in many household, microchip, computer, cosmetic, electronics.[1-3] Solid silicone is used to augment to reconstruct the cheeks, the chin, brow bone, calves, pectoral areas, testicles, buttock augmentation. For medical augmentations, we only used solid silicone medical grade. However, silicone liquid is still used in many country to do cosmetic contouring. Silicone liquid used as injection into the face and body illegally. Because of economic reason, they used industrial silicone for the injection.

After few years, there are many complications have been reported such as granulomatous, inflammatory responses, migration, and discoloration of the tissue. In 1992, the FDA has banned silicone liquid injection for cosmetic uses. However, silicone injection is still being practiced illegally. [4-6]. Liquid silicone injected to chin cause granuloma, inflammation, and a witch looked like face. In this presentation, we proposed to treat the chin granuloma because of silicone injection by knife surgery and other modalities.

Methods

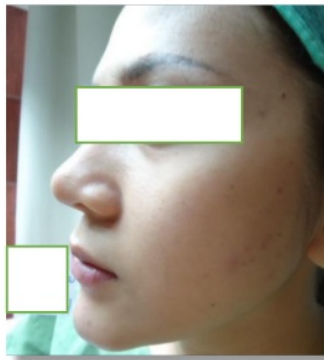
Preoperative preparation

The patient should be asked if he took a medicine which can make prolonged bleeding such as anti-cholesterol drug, vitamin E and blood test should be performed before the operation. Chronic diseases are important to ask when we do the anamnesis. [7-9].

Technique and procedure

The technique to remove the chin granuloma depends on the affected area; however, basically we will first make a design planning. Sometimes there are more than one granuloma on the chin and asymmetric. We have to evaluate whether we need to remove the excessive skin from the dorsal chin after performing curettage and excision of the granuloma or not.

The design or images and following the plan should be discussed with the patient.



First, we have to make the boundary of granuloma and make the design of excision area just under the submental crease.





You have to cut the granuloma with knife jut under the skin, you have carefully this time because the knife can cut the the skin above. After that you can see the granulloma already separated from skin



After take out the granuloma by knife, and curettage on the lateral part, we can stitching it

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Postoperative Management

1. Use gauze for a week to prevent splint displacement.
2. Prescribing antibiotics for 5–7 days.
3. Prescribing analgetics every 4–6 hours as necessary.
4. Prescribing anti-inflammatory drugs for 5–7 days.
5. Normal saline solution for the chin to overcome postsurgical nasal congestion.
6. To reduce swelling, apply cold compress within the first 48 hours.
7. If there is a seroma, we can remove it by suctioning using syringe during the follow-up visit.
8. Avoid any trauma for 2 weeks.
9. Remove the stitches on day 7
10. Have a normal diet, but avoid foods that cause excess lip movement such as apples and corn on the cob for 2 weeks after surgery.

Remaining the fibrosis and the redness

For the rest of fibrosis, intralesional injection of can be used every 2 weeks. First injection should wait until the inflammation decreased [10]. Subdermal injection of triamcinolone acetonide at a dose of 10 mg/ml or a combination of triamcinolone acetonide and 5-fluorouracil will make better result. Etanercept, which works on TNF- α receptor and Fc-IgG1 binding, has been reported providing good result for silicone granuloma [11,12].

For the inflammations such as the redness and telangiectasias, vascular laser such as PDL laser or long pulse Nd Yag will improved the performance.

Result

Combination knife with special technique, corticosteroid injection and vascular laser can make a better result in natural shape of chin and reduce the opportunity of silicone granuloma recurrence.



Figure 1. Before and after the chin granuloma have removed

Conclusions

Granuloma on the chin can be removed by excision with special technique which result in aesthetic and low recurrence of granuloma.

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