# PRESIDENT'S E-MAGAZINE

ISAPS
November 2026



## MONTHLY UPDATE FROM YOUR ISAPS PRESIDENT

### CONNECTING CULTURES, SHARING KNOWLEDGE AND LEADING THE FUTURE IN AESTHETICS



Vakis Kontoes, MD
ISAPS President

Dear Friends, Colleagues,

As I begin this message, I want to thank Dr. Arturo Ramírez-Montañana. He has served us well during his presidential term, and I am privileged to step into this role and grateful for all the work he has done.

I also want to thank you all for entrusting me with the responsibility of being your new President. I am honored and excited to work with you.

As I start this role, I have many goals, which I share in this month's interview. One of my main goals is to keep building our ISAPS community, with a special focus on you, our members. We are all committed to the future of ISAPS and our specialty, and I look forward to what lies ahead. I am also eager to work with our national societies and Global Alliance Partners as we build a stronger worldwide network.

I care deeply about supporting the next generation of aesthetic surgeons, and I want to make our fellowship and mentorship programs even stronger. When we give residents and young surgeons these chances, we help them get what they need to lead our specialty forward.

I am also looking forward to working with our Board members from around the world. Together, we will keep working to inspire and support Aesthetic Education Worldwide® for the safety of patients, and continue to grow our specialty in safe, innovative, and caring ways.

Thank you again for this honor. I look forward to seeing you soon!



Vakis Kontoes, MD
ISAPS President



Vakis Kontoes, MD (Greece)
ISAPS President 2026-2028

## Meet Your Newly Elected ISAPS President (2026-2028)

This month, we are thrilled to welcome Dr. Vakis Kontoes as our next ISAPS President. In this issue, we explore his vision, the power of humantarian work, learn why ISAPS gatherings are so impactful, and offer a glimpse of the Olympiad World Congress coming soon to London.

**ISAPS: Congratulations on being elected as the new ISAPS President! As you begin this new chapter, which goals are you most excited to pursue over the next two years?**
**KONTOES:** Thank you so much for the warm congratulations! It is a sacred task and a profound honor beyond words or measure to lead the **International Society of Aesthetic Plastic Surgery (ISAPS)** for the 2026-2028 term, after my enrollment as a member back in 1999, joining the Board of Directors in 2016, and working in the positions of Education Council Chair, Membership Chair, Secretary, and President-Elect during these last 10 years.

As we look toward the next two years, the goals I am most energized to pursue focus on elevating our global community through three core pillars:

1. **Advancing Patient Safety & Global Education**
   - **Standardizing Excellence:** Expanding our digital and in-person educational platforms to ensure plastic surgeons worldwide have access to the latest evidence-based techniques and safety protocols. Patient safety in ISAPS, along with its main mission, "Aesthetic Education Worldwide," comes first. ISAPS Academy will play a very decisive and pioneering role towards this goal
   - **Expanding educational events worldwide** with Master Courses on different topics
   - **Organizing local educational events** worldwide within our members' eligibility and cooperation
   - **The London Olympiad World Congress next year and the World Congress in 2028:** Executing in London, one more transformative Olympiad World Congress, serving as a master class of innovation, peer-to-peer learning, and scientific exchange among our members, given the exclusive format of this ISAPS educational event. Our Olympiad Congresses feature unique, competitive abstract presentations where the audience and a scientific committee vote on the best work. This democratic format gives a voice to brilliant surgeons from all over the world, not just established names. *A quick note: despite our efforts to keep the Olympiad in 2027 in Dubai, as decided and approved by the Board, the current situation in the region obliged us to postpone it and hold it in London.*
   - **Executing the World Congress of 2028 in Greece**, adding one more landmark event to the collection of our ISAPS history. Soon we will give more details about this great event.

2. **Fostering Inclusivity and Professional Unity**

   I am here to work with our members, for our members, and to make our ISAPS even stronger and better. No one is superfluous in ISAPS. Everyone should have a voice and a shared responsibility for the future of our Society, no matter our position. Bridging communities by strengthening collaboration among national societies within our **Global Alliance Program** **(GAP)** to create a truly interconnected global network is another important goal. Moreover, empowering the next generation by creating more mentorship opportunities and resources for residents and young plastic surgeons as they begin their careers will shape, protect, and develop our specialty.

   I look forward to working closely with our committed Board members and every member around the world to shape a safe, innovative, and compassionate future for aesthetic plastic surgery.

3. **Amplifying Humanitarian and Philanthropic Work**

   - Strengthening our **humanitarian programs** and disaster-relief initiatives. I believe our expertise should not only enhance aesthetic medicine but also offer reconstructive aid to those who need it most globally.
   - Global Outreach: Encouraging more members to actively participate in surgical missions that restore form and function in underserved regions.

**ISAPS: Could you tell us more about your humanitarian work? What experiences have you had, and what difference have they made?**

**What advice would you offer to aspiring aesthetic plastic surgeons who hope to make a positive impact on those in need?**

**KONTOES:** As a plastic surgeon, I have always believed that our specialty possesses a profound dual nature. While aesthetic surgery **enhances quality of life and self-confidence, humanitarian reconstructive surgery has the power to heal deep trauma and grant a completely new beginning** to individuals who have suffered immensely.

My involvement in **humanitarian work is the core of my medical philosophy**, and I have been supporting humanitarian missions with **"Omada Aigaiou"** (Aegean Team) in Greece for the last 25 years to remote islands of the Aegean Sea for medical services, infrastructure work, etc. Moreover, I have participated in philanthropic missions in Central Africa in the past. It is one of the main reasons I want to significantly strengthen ISAPS's philanthropic initiatives during my presidential term.

For young colleagues and residents who hope to make a positive impact, my advice is centered on these core principles:

- **View Plastic Surgery as One Unified Art:** There is no real dividing line between aesthetic and reconstructive surgery. The precision, tissue respect, and anatomical mastery you develop in aesthetic surgery are the exact same tools you will use to reconstruct a damaged limb or face.
- **Start Locally, Think Globally:** You do not need to travel to the other side of the world to make a difference right away. Start by volunteering your skills to vulnerable, underserved populations within your own local community or country.

- **Connect with the ISAPS Humanitarian Programs Task Force:** I highly encourage every young surgeon to get involved with ISAPS's humanitarian programs. Joining an established, organized network ensures your efforts are safe, well-supported, and sustainable.
- **Protect Your Empathy:** Technical excellence is mandatory, but the capacity to listen to a patient's suffering with a compassionate heart is what elevates a good surgeon into a true healer.

**ISAPS: You attended the World Congress in Cancún. What makes you recommend the ISAPS Congresses and Olympiads to other plastic surgeons? Can you share some of your favorite experiences from these events?**

**KONTOES:** We just welcomed our global community to the ISAPS World Congress in Cancún, and I can say without hesitation that attending these events is one of the most impactful decisions plastic surgeons can make for their career.

The future of aesthetic plastic surgery is truly shaped by those who show up. ISAPS events are not just standard medical conferences; they are immersive, high-level scientific and cultural experiences.

- **Unparalleled Educational Formats:** We continuously push the boundaries of how we share knowledge. In Cancún, for example, and in future Congresses, delegates will experience "Interactions with the Masters," "State-of-the-Art Lectures," and "Deep Dives with the Experts." These sessions bridge the gap between abstract theory and real-world clinical applications. Moreover, unlike events driven purely by commercial trends, ISAPS places patient safety at the absolute center of its scientific curriculum together with education. Our panels focus heavily on evidence-based protocols, avoiding and managing complications safely.

Over the years, my time with ISAPS has given me unforgettable memories that combine scientific excellence with lifelong global friendships. I am really blessed to have so many friends around the World with whom we have shared experiences, knowledge, but also concerns and deliberations, all so useful for the development and status of our specialty.

I remember so many different experiences from my journey at ISAPS over 25 years, **encountering different traditions, mentalities, philosophies, and civilizations** that, if I mention some, I might omit others. Hence, I do not want to mention any names or locations, so as not to treat anyone unfairly or to honor anyone more than others, as everyone deserves the same. However, I should not omit mentioning the fact of hosting the first-ever ISAPS Olympiad World Congress in Athens.

Hosting the ISAPS Olympiad Athens World Congress 2023 in my home country was an incredible honor but also an unprecedented responsibility, since this organization would shape the future of ISAPS Olympiad World Congresses. Watching over 60 of the world's top-rated, renowned speakers and over fourteen hundred international colleagues come together under the Athenian sky to network, share knowledge, and celebrate our specialty was profoundly moving.

Whether you are looking to master a specific technique, share your own data, or find a global mentor, there is simply no place like an ISAPS meeting to make it happen.

**ISAPS: As preparations begin for next year's Olympiad in London, what can participants expect, and how does London stand out as a host city?**

**KONTOES:** As preparations begin for the **ISAPS Olympiad World Congress**, participants can look forward to a phenomenal fusion of world-class science, democratic clinical competition, and an inspiring global atmosphere. ISAPS Olympiads are designed to push the boundaries of traditional medical education, creating an intense but collaborative learning environment:

True to its name, the core of the Olympiad is its democratic abstract competition. Brilliant minds and rising stars from around the globe present their original research, innovative techniques, and clinical findings. A peer-voting system alongside an expert scientific committee determines the absolute best work, elevating fresh voices onto the global stage.

The scientific program will feature masterclasses, live-on-stage video breakdowns, and deep-dive technical panels. Attendees will learn direct refinements for facial rejuvenation, advanced body contouring, and complex case management from a highly curated international faculty.

In alignment with our society's absolute priority, the sessions will heavily focus on patient safety, managing complex aesthetic complications, and advancing evidence-based protocols to minimize risk globally.

Expect robust networking forums and tailored symposia specifically designed to connect residents and young plastic surgeons directly with global mentors.

London is a magnificent, historically rich backdrop that naturally complements the progressive spirit of an ISAPS gathering. It has always been a premier epicenter for medical history and academic research. Its unique capability to blend historical heritage with avant-garde scientific innovation makes it a perfect pairing for the "Olympiad" concept.

Beyond the lecture halls and science, London provides a legendary aesthetic backdrop for our networking events. From historic private galleries to iconic landmarks along the River Thames, the city allows delegates to foster global collaborations in a remarkably memorable setting.

The Olympiad is a milestone event that will completely recharge delegates' practice and broaden their perspective on where aesthetic surgery is heading next.

**ISAPS: What inspires you most about being part of the #ISAPSFamily, and which opportunities do you find especially rewarding?**

**KONTOES:** What inspires me most about being part of the **#ISAPSFamily** is the profound sense of global unity and our shared devotion to excellence. We are not just a scientific organization; we are a vibrant, borderless community where knowledge is shared freely with a singular focus on patient safety.

The ability to exchange insights, surgical refinements, and clinical challenges with top-tier colleagues from well over 100 countries is extraordinary. We are united by a common passion for our specialty and a mutual desire to deliver the highest standard of care.

Within the ISAPS community, there are no "hidden secrets." The world's leading masters sit at the exact same table as young residents, completely ready to share their successes, analyze their complications, and teach with transparency and humility.

**Mentoring the Next Generation**. Providing young plastic surgeons and residents with the precise tools, international fellowships, and guidance they need to excel is incredibly rewarding. Investing heavily in the future of our specialty is a vital duty we all share.

**Philanthropy via the ISAPS Humanitarian task force**: Organizing and participating in surgical missions that fundamentally alter lives in underserved regions is the ultimate fulfillment of our medical oath. Using our aesthetic and reconstructive skills to restore hope where medical resources are absent, is a deeply moving experience.

The **#ISAPSFamily** stands as a global beacon of scientific progress and genuine humanitarianism, and I am incredibly proud to guide our community into this next chapter. Because together, no matter the position of each one of us in ISAPS, the target should be one and only: ***TO MAKE OUR ISAPS EVEN STRONGER AND BETTER.***

**#ISAPSFamily. Stronger Together.**

## ISAPS World Congress 2026 Post Report

The ISAPS World Congress in Cancún brought together **1,270 in-person participants and 111 virtual participants**, creating a vibrant hub for **Connecting Cultures, Sharing Knowledge, and Leading the Future in Aesthetics**. Visionaries from across the globe gathered to inspire, exchange ideas, and spark meaningful conversations, making this congress truly unforgettable.

We thank the Education Council and Congress Chairs for preparing another comprehensive scientific program with **more than 800 sessions presented by speakers from 72 countries**.

You can still **register to watch content on-demand**. Recordings are available for courses, the Resident's Symposium, registered master classes, and all main sessions except for poster-discussion sessions on the Open Stage. Attendees will have access to the **virtual platform for one year following the event**.

Attendees are reminded to **claim their CME credits by April 30, 2027**, the final submission deadline for this event.

### You can still benefit from the experience!

*Select the **virtual option** on the **registration page** and view sessions on-demand for up to one full year!*




## ISAPS Olympiad World Congress London
## September 1-4, 2027

**The next ISAPS Olympiad is taking shape...**
**Get ready to join the competition.**

*"Preparations are underway, and we can't wait to welcome the #ISAPSFamily together in London."*
**ISAPS President, Dr. Vakis Kontoes**




## Key Dates:

- **December 1, 2026** - Abstract Submission & Registration Opens
- **February 26, 2027** - Abstract Submission Closes
- **March 1, 2027** - Abstract Submission Discount Deadline

**Register Your Interest**

This month's Education Corner highlights recipients of distinguished **scientific awards from the 2026 ISAPS World Congress**. Honorees include authors of the **most-downloaded and most-cited article in the APS *Journal***, the recipient of the **Best Presentation Award**, and the **Foad Nahai Award for Patient Safety**. We invite readers to congratulate these awardees and review their outstanding articles. To see the full list of awards and recipients, **visit the website**.

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## Recently published in *Aesthetic Plastic Surgery...*

**Most downloaded article:**

### Systematic Approach to Deep Plane Facelift

***Boris M. Ackerman • Nirav B. Savalia***

The senior author has developed a systematic approach to performing Deep Plane Facelift, which allows the procedure to be performed in a safe, efficient, and reproducible fashion.

**Most cited article:**

### Frontalis Only Contracts in One Direction: AI - Quantum Elasticity and Resistance Gradient Reveals True Nature of Forehead Muscle Movement

***Eqram Rahman • William Richard Webb • Parinitha Rao • Shabnam Sadeghi-Esfahlani • Nanze Yu • Patricia E. Garcia • Sotirios Ioannidis • Karim Sayed • Wolfgang G. Philipp-Dormston • Ada R. T. Almeida • Woffles T. L. Wu • Greg J. Goodman • Jean D. A. Carruthers***

The biomechanics of frontalis muscle contraction and its interaction with skin remain contentious, particularly the debated bidirectional movement theory. This study introduces the quantum elasticity and resistance gradient (QERG) model to explain observed skin dynamics during frontalis contraction using elastic resistance principles.

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**Become a member** to have full access of **APS Journal**

For questions, please contact **memberservices@isaps.org**.

## ISAPS World Congress 2026
## Best Presentation Early Career Award

The **Awards Ceremony in Cancun** was the perfect time to come together to recognize and celebrate the contributions of individual presenters and APS Journal authors to the scientific development of our specialty and to acknowledge their contributions to Aesthetic Education Worldwide®. Please join us in congratulating all our winners, including **Dr. Viviana Mannella for the Early Career Award!**

**From Experience to Precision: Artificial Intelligence for Surgical Planning in Mastopexy and Reduction Mammoplasty**
- Viviana Mannella, MD

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ISAPS® PATIENT SAFETY
SAFETY UPDATE OF THE INTERNATIONAL SOCIETY OF AESTHETIC PLASTIC SURGERY

Our online library gives you access to the latest patient safety statements and guidelines. You'll find evidence-based resources, along with statements from Global Alliance Partners. We've also made it easier to browse by article type and topic.

**This Year's Foad Nahai Award for Patient Safety:**

**Safety of Combining Versus Isolated Cosmetic Breast Surgery and Abdominoplasty**

***Samuel Knoedler • Michael Alfertshofer • Dany Y. Matar • Giuseppe Sofo • Gabirel Hundeshagen • Oliver Didzun • Amir K. Bigdeli • Sarah Friedrich • Thilo Schneck • Ulrich Kneser • Dennis P. Orgill • Leonard Knoedler • Adriana C. Panayi***

**Patient Safety Guidance Library**

ISAPS QUAD A
THE GLOBAL ACCREDITATION INITIATIVE

**November 13, 2026 I ISAPS & Quad A: What Goes Wrong Behind the Scenes - Common Facility Errors and Practical Solutions I 16:30 UTC**

Click here ***for your local time***.

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We invite ISAPS members and non-members to join our **free webinar**, presented through the **Global Accreditation Initiative in partnership with QUAD A**, on **November 13, 2026**.

**Learning Objectives:**

- Identify common operational and compliance vulnerabilities in aesthetic surgery facilities.
- Evaluate how gaps in documentation, training, policies, and oversight can affect patient safety.
- Implement practical strategies to reduce risk and strengthen facility performance.
- Apply a proactive approach to continuous readiness, quality improvement, and safety culture.

**Physicians and non-physician staff, including nurses, assistants, and technicians**, are welcome to participate. This webinar will include a live Q&A session where you can engage directly and get your questions answered. Don't miss it!

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**Moderator:**
Andrea Margara, MD
(Italy)



**Speaker:**
William Rosenblatt, MD
(United States)

Sign up today for your complimentary registration.

**Register**

# MONTHLY E-MAGAZINE




## ISAPS MedOne

MedOne is your **destination for clinical education and reference**, essential for developing and refining clinical skills. Established practitioners can stay current with the latest research and master complex procedures, while residents can review essentials, prepare for boards, and strengthen their skills.

**Features:**

- A fully searchable database of 100 best-selling e-books written by top surgeons
- Step-by-step details for reconstructive and aesthetic procedures
- 2,156 teaching videos by master class surgeons
- Premier journal content with search results from PubMed
- Training center Q&A to assess subject knowledge

**Become a member today to start enjoying MedOne today.**

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The **ISAPS Video Library** contains **over a thousand educational video**s, many of which are created exclusively for ISAPS members by leading surgeons in the field. The library **offers on-demand content from ISAPS Congresses, ISAPS Official Courses, the ISAPS L.I.F.T. Program, and various ISAPS webinars**. This video content encompasses a comprehensive range of procedures and techniques.

**Video Library**






## Super Early Bird Registration Deadline Ends in Less Than Two Weeks! NOVEMBER 15, 2026.

Join us in **St. Louis, Missouri, from March 5-7, 2027, for our next Face Masters Course!** You will have the chance to deepen your knowledge and expertise through **live dissection master classes, video surgeries, and expert-led strategy panels** that reflect the latest thinking in facial rejuvenation. This is a unique opportunity to see, up close and personal, how our **expert faculty** approach different surgical challenges and to network in a relaxed, friendly setting.

**Program Highlights:**

**Day 1**: A master class in endoscopic techniques for the face & neck
**Day 2:** New frontiers in open face & neck procedures
**Day 3:** A comprehensive exploration of current regenerative & ancillary practices

**All teaching sessions are complemented by deep-dive, live, on-stage dissection masterclasses.**

*Secure your place and* **register today**.




**Super Early Bird Deadline: NOVEMBER 15, 2026**
Places are strictly limited to maintain a personal learning environment.
**ISAPS members save the most! Not a member? Join today.**

**Register**

## PRACTICE MANAGEMENT

### What Your Patients Notice That You Don't

*From Great Clinical Results to an Unforgettable Experience*



We are living in an era of commoditization.

In seconds, patients can find dozens of highly qualified plastic surgeons performing similar procedures, using the same techniques, showcasing impressive results, and charging comparable fees.

**In this context, patient experience emerges as one of the most powerful ways to stand out.**

**Patient Experience Begins Before the Consultation**

Plastic surgeons spend years mastering surgical techniques, yet often devote little attention to what happens before patients even walk through their practice doors.

Patient experience begins when someone discovers you online, reads your reviews, or sends their first message. And it continues long after surgery.

Creating an extraordinary experience requires mapping the entire patient journey and intentionally designing every touchpoint.

You can be the world's greatest surgeon, but if those early interactions fail, patients may never reach your office.

**Six Strategies to Elevate the Patient Experience**

**1. Make Patients Feel Expected, Not Just Welcomed**

Instead of asking patients for their names, greet them by name before they introduce themselves.

Don't ask questions your team should already know, such as whether it's their first visit or which doctor they're seeing.

Welcome them at the door rather than from behind a counter. Create waiting areas that feel like hotel lounges or living rooms. Sit beside patients instead of speaking across a desk.



## PRACTICE MANAGEMENT

**2. Antiipate Needs**

If patients frequently express the same concern, address it before they ask.

For example, if most patients worry about scarring, offer them a complimentary scar-care treatment on surgery day.

**3. Surprise and Delight**

Consider the 95/5 rule: manage 95% of your budget wisely so you can invest the remaining 5% in unexpected gestures.

Imagine a patient mentioning an upcoming anniversary. Surprise them with flowers and a handwritten note on that special day.

It's not about the cost. It's about making someone feel remembered.

**4. Train Your Team, Don't Just Give Instructions**

Your team plays a defining role in how patients experience your practice.

Don't simply tell them to answer WhatsApp or Instagram inquiries. Define how to respond and handle different situations.

Document protocols, train your team, and regularly audit their execution.

**5. Make First and Last Impressions Memorable**

The first and last moments often have the greatest impact on the overall experience. And chances are, you won't be there for either.

Intentionally design these moments to ensure every patient receives an exceptional welcome and a thoughtful farewell.

**6. Experience Your Own Practice**

Periodically evaluate your practice through a mystery shopper exercise, either personally or with someone you trust.

Try booking an appointment, sending a message, or visiting your practice as a patient.



# PRACTICE MANAGEMENT

**Beyond Business Results**

Exceptional patient experience builds loyalty, referrals, positive reviews, and testimonials. These increasingly influence patients' decisions and become powerful drivers of trust and growth.

But its value goes beyond business.

As plastic surgeons, we have the privilege of being part of meaningful moments in people's lives, from preparing for a wedding to navigating a divorce.

You cannot control what someone is going through when they walk through your doors.

**But you can create a space that feels almost magical, where they feel seen, heard, and genuinely cared for.**

Your patients come expecting excellent medical care.

**Give them an experience worth remembering.**

***Paz Martorell, MD – ARGENTINA***

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## Interested in more practice management tips?

- Check our **L.I.F.T. program** online
- Login and listen to the recording from the **ISAPS Business School: Leading the Patient Journey – from Marketing to Patient Conversion** webinar, free for members in our **Online Video Library**.

# MONTHLY E-MAGAZINE




## December 12, 2026 | Male Genitalia Surgery and Female to Male Gender Reassignment | 13:00 UTC

Click here *for your local time*.

More details coming soon.

**FREE for ALL ISAPS members and only $100 for non-members.**

**Recordings of previous webinars are available on the ISAPS Video Library.**

**Register**




## November 21, 2026 | Glidelift™ - A No Visible Scar Approach | 13:00 UTC

Click here *for your local time*.

**Speaker:** Ozan Sozer, MD (United States)
**Experts:** Fausto Viterbo, MD (Brazil) and Can Cedidi, MD (Germany)
**Moderator:** Patrick Tonnard, MD (Belgium)

**FREE for ALL ISAPS Members and only $50 for non-members.**

**Recordings of previous webinars are available on the ISAPS Video Library.**

**Register**

GUEST ENTRY FROM ISAPS GOLD GLOBAL SPONSORS:

# Funnel-Assisted Breast Implant Insertion with Hyaluronic Acid: Clinical Outcomes in 200 Patients

**Dr Julián Hernández, MD**
ARTI Clinic, Colombia

Reducing tissue trauma and implant contamination during breast augmentation remains an important consideration in surgical practice. Funnel-assisted insertion follows the "no-touch" principle, limiting direct handling of the implant during placement. While antiseptic agents such as chlorhexidine and povidone-iodine are commonly used as funnel lubricants, their use may be associated with adverse effects. Hyaluronic acid offers an alternative lubricant for implant insertion.

We evaluated our experience using the GC Aesthetics® HydroCone™ insertion funnel lubricated with hyaluronic acid (HA), comparing surgical outcomes with traditional manual implant insertion. The technique was described in the original publication using the commonly recognised Keller Funnel terminology.· The findings were published in Plastic and Reconstructive Surgery – Global Open in February 2026.

This retrospective cohort study included 200 patients undergoing primary breast augmentation between January 2022 and December 2024. Of these, 100 underwent funnel-assisted insertion with HA lubrication and 100 received manual implant insertion. All patients had at least 12 months of follow-up. The analysis examined incision size, implant insertion time, postoperative complications and patient satisfaction using the BODY-Q questionnaire.

The mean patient age was 25.3 years, with a mean body mass index of 21.8 kg/m$^2$. Median implant volume was 330 mL. Of the 200 patients, 78% underwent breast augmentation combined with liposuction, while 22% underwent breast augmentation alone.



Funnel-assisted insertion with HA was associated with significantly smaller incisions and shorter implant insertion times. Mean scar length was 32 mm in the funnel group compared with 37 mm following manual insertion (P = 0.025). Mean implant insertion time was 5.9 seconds compared with 57.6 seconds, respectively (P = 0.001).

Postoperative complications occurred in 1% of patients in the funnel group compared with 8% in the manual insertion group (odds ratio 0.11; 95% confidence interval 0.01–0.94; P = 0.04). The manual insertion group experienced one case of capsular contracture, one infection, four cases of skin hypopigmentation and two cases of suture dehiscence. One case of suture dehiscence was reported in the funnel group.

Figure 4. Intraoperative image demonstrating sterile loading and delivery of the breast implant using a no-touch funnel technique. Source: Hernández et al.[1]




| Outcome | Funnel + HA (n=100) | Manual (n=100) |
|---|---|---|
| **Mean scar length** | 32 mm | 37 mm |
| **Mean insertion time** | 5.9 seconds | 57.6 seconds |
| **Patients with complications** | 1% | 8% |

Comparative findings from the published study. Scar length P = 0.025; insertion time P = 0.001; complications P = 0.04.[1]

Patient satisfaction improved significantly following surgery in both groups. Mean BODY-Q chest satisfaction scores increased from 54.3 preoperatively to 92.6 at six months (P < 0.001). Importantly, there was no statistically significant difference in six-month satisfaction between the funnel and manual insertion groups (P = 0.712).

These findings suggest that funnel-assisted insertion lubricated with HA may offer advantages in reducing incision size, insertion time and postoperative complications. The shorter insertion time and reduced mechanical contact may contribute to less tissue trauma and a lower risk of implant contamination.

However, the results should be interpreted within the limitations of a retrospective, single-surgeon study. The relatively short follow-up does not establish long-term outcomes, particularly for complications such as capsular contracture. Further prospective studies are needed to validate the findings and directly compare HA with antiseptic lubricants.

Overall, this study provides clinical evidence supporting funnel-assisted insertion lubricated with HA as a "no-touch" approach to breast implantation. The observed reductions in incision size, insertion time and complications are encouraging, while comparable patient satisfaction was maintained across both groups. Continued research will be important in establishing the longer-term benefits of this technique.

## Reference

1. Hernández J, Ruiz N, Ramírez B, Varela A. Experience Using the Funnel Insertion Method Lubricated With Hyaluronic Acid for Breast Implantation. Plastic and Reconstructive Surgery – Global Open. 2026;14:e7456. doi:10.1097/GOX.0000000000007456.




## Threads Today, Surgery Tomorrow: A Collaborative Approach to Facial Rejuvenation

APTOS

Facial rejuvenation is entering an era of increasingly personalized, multimodal treatment strategies. Patients rarely present for surgical consultation without a history of aesthetic interventions, while growing interest in earlier facial rejuvenation is redefining the relationship between minimally invasive and surgical procedures. Within this evolving landscape, an important question emerges: should thread lifting and surgical facelift be considered competing techniques, or complementary approaches?

### A Shared Foundation in Plastic Surgery

Thread lifting originated within plastic surgery, pioneered by Dr. Marlen Sulamanidze and subsequently advanced through innovations in thread materials, designs, and techniques. Today, absorbable and nonabsorbable threads offer mechanical soft-tissue repositioning, while selected absorbable materials additionally stimulate collagen formation and tissue remodeling[1,2].

Thread lifting and rhytidectomy address different degrees of facial aging through distinct but potentially complementary mechanisms. Threads are generally positioned within subcutaneous tissue, whereas contemporary facelift techniques frequently incorporate manipulation of the superficial musculoaponeurotic system (SMAS) and deeper anatomical structures2. This anatomical relationship provides a rationale for their compatibility when appropriate techniques and tissue planes are respected.

### Does Previous Thread Lifting Preclude Facelift Surgery?

Concerns regarding fibrosis and altered tissue planes have generated debate about subsequent rhytidectomy. Histological investigations demonstrate localized collagen deposition and tissue remodeling following absorbable thread implantation, representing part of their biological mechanism of action[3].

Skouras et al. reported that although previous minimally invasive interventions, including thread lifting, may increase the technical complexity of subsequent rhytidectomy and necessitate modifications to surgical dissection, facelift procedures remained feasible and were performed using adapted surgical techniques[4]. However, the available clinical evidence regarding the impact of prior thread lifting on subsequent facelift surgery remains limited and should be interpreted with caution. Both Skouras et al. and Yordanov provide low-level, retrospective clinical evidence with important methodological limitations. Skouras et al. evaluated patients with various previous minimally invasive interventions without establishing a clearly defined thread-specific cohort, while Yordanov's findings were based on only ten patients with a history of repeated thread lifting procedures[4, 5]. These limitations restrict the generalizability of their findings and preclude definitive conclusions regarding the impact of thread lifting on subsequent rhytidectomy. Importantly, isolated observations of increased surgical complexity




should not be interpreted as evidence of an absolute contraindication. Rather, they highlight the importance of individualized preoperative assessment, anatomical expertise, and appropriate surgical planning.

**Threads and Facelift: A Continuum of Rejuvenation**

Rather than competing for the same patient, thread lifting and facelift surgery may serve complementary roles at different stages of facial aging.

Before surgery, threads provide a minimally invasive option for patients with early-to-moderate tissue laxity who do not yet require, or prefer to postpone, surgical correction. Appropriate thread treatments may help bridge the interval between early facial aging and eventual surgical intervention.

During surgical rejuvenation, thread-based suspension can be integrated with selected surgical techniques to provide targeted tissue repositioning and additional support. Çelik described combined applications of threads and surgical facial rejuvenation, illustrating their potential within multimodal treatment approaches[6].

After facelift, thread lifting may offer a less invasive option for addressing selected residual or recurrent soft-tissue laxity, potentially complementing surgical results without immediately resorting to revision surgery. Individualized anatomical assessment remains essential.

**Conclusion**

Thread lifting and surgical facelift should no longer be viewed as competing or mutually exclusive approaches, but as complementary components of modern facial rejuvenation. Neither previous thread implantation nor a history of facelift surgery constitutes an inherent contraindication to the other. Threads may provide an intermediate option before surgery, complement selected surgical techniques, and offer additional rejuvenation opportunities following facelift. The question is no longer whether patients should choose threads or surgery, but how both approaches can be strategically integrated into a personalized, long-term facial rejuvenation journey.

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4. *Skouras G, Skouras A, Skoura E. How minimally invasive treatments can render a subsequent face lift more difficult. Plast Reconstr Surg. 2023;152(1):76-84.*
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## Comment on: *Threads Today, Surgery Tomorrow: A Collaborative Approach to Facial Rejuvenation*

**Yordan P. Yordanov, MD, PhD, FEBOPRAS**
ASD Consult, Sofia, Bulgaria

As an actively practicing plastic surgeon focused on facial rejuvenation—and one of the cited authors—I read with great interest the ISAPS Sponsor Guest Entry article entitled "*Threads Today, Surgery Tomorrow: A Collaborative Approach to Facial Rejuvenation*", published in the November 2026 issue of President's E-Magazine.

I fully agree with the unlisted author(s) that facial rejuvenation is entering an era of multimodal treatment strategies. However, when combining different modalities, practitioners must carefully consider the efficacy and safety profile of each technique. While facelift surgery remains the proven gold standard for facial rejuvenation[1], more than 25 years after Dr. Sulamanidze received the first patent, robust long-term evidence supporting the use of threads is still lacking. Two rigorous systematic reviews[2,3] conducted according to PRISMA guidelines have clearly demonstrated this limitation of thread lifting. In the interest of scientific and clinical objectivity, these studies should have been acknowledged in an industry-authored article.

Furthermore, to the best of my knowledge, no published article has claimed that previous thread lifting strictly precludes future facelift surgery. Nevertheless, many independent authorities[2-4], including myself[5], have observed that thread-induced tissue changes are unpredictable and uncontrollable, increasing the risk of both medical and aesthetic complications during subsequent surgical procedures. Given that patient safety is our highest priority in plastic surgery, this cannot be overlooked. Instead of merely dismissing independent studies like ours as low-level, retrospective clinical evidence with methodological limitations, the industry should invest in rigorous randomized clinical trials to establish long-term safety and efficacy. This is how contemporary evidence-based medicine (EBM) works.

On the subject of EBM—and in conclusion—I encourage readers to be properly informed and to evaluate both peer-reviewed literature and industry articles such as this one with the same critical eye, reading between the lines and paying close attention to disclosures. Notably, we can still find authors who declare no conflict of interest[6] despite their well-documented involvement in the development, manufacturing, and marketing of these devices. Setting ethical considerations aside, this should serve as a major red flag regarding the objectivity of their conclusions.

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