

Recent and Different Modalities in Reconstruction of Scalp (Anterior Hair Line)

Essay

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

أَلَمْ تَرَ كَيْفَ ضَرَبَ اللَّهُ مَثَلًا كَلِمَةً طَيِّبَةً كَشَجَرَةٍ طَيِّبَةٍ أَصْلُهَا
ثَابِتٌ وَفَرْعُهَا فِي السَّمَاءِ ﴿٢٤﴾ تُؤْتِي أُكْلَهَا كُلَّ حِينٍ بِإِذْنِ رَبِّهَا
وَيَضْرِبُ اللَّهُ الْأَمْثَالَ لِلنَّاسِ لَعَلَّهُمْ يَتَذَكَّرُونَ ﴿٢٥﴾

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Introduction

Scalp reconstruction represents a challenge, as the reconstructive surgeon should strive for a cosmetically appealing result as well as for durable coverage to the exposed cranium. Restoring the hair-bearing surface without distortion of the hairline and hair direction and avoiding alopecia is an important goal.^[1]

Restoration of the anterior hairline can be difficult as traditional methods of reconstruction of the hair-bearing scalp using random pattern and transposition flaps can provide incorrect directional hair growth.^[2]

Initially, one must ask: what are the goals and priorities? What is the easiest way to close the defect and what is the best way to close the defect?^[3]

Knowledge of the anatomy of the scalp and forehead will assist the reconstructive surgeon in the choice of local flap options as well as choosing a potential microsurgical recipient vessels site if needed. Furthermore, such knowledge is important for understanding, evaluating and adequately reconstructing defects.