

Epicanthal Folds

- Epicanthal folds are oblique or vertical folds from the upper or lower eyelids towards the medial canthus.
- Usually bilateral, they may involve both the upper and lower eyelids.
- These folds are caused by excessive development of the skin across the bridge of the nose.
- Produce pseudoesotropia

Evolution of the Epicanthus (Kwon's Theory): Etiology and Processes

- * Underdeveloped nasal bone,
- * An excess of horizontal medial canthal skin relative to the vertical skin shortening,
- * An excess of orbicularis muscle, and abnormal skin tension are causes of the epicanthus

Classifications of Epicanthus Fold

Туре

- Full exposure of the lacrimal lake
- There is no epicanthal fold in this type

Type II

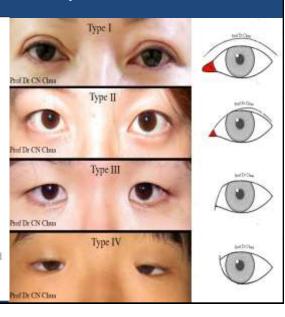
- Partially covers the lacrimal lake
- The epicanthal fold joins the skin at the margin of the lacrimal lake

Type III

- The lacrimal lake and caruncle are covered almost completely
- Fold in the lower eyelid curves laterally to blend in with the lower eyelid skin
- Round medial palpebral fissures

Type IV

- Rare anomaly of the reversed epicanthal fold
- Fold originates from the lower eyelid and blends with the upper eyelid skin



Epicanthus are classified by Duke-Elder into 4 types :

Epicanthus superciliaris:

fold originates from the brow and follows down to the lacrimal sac

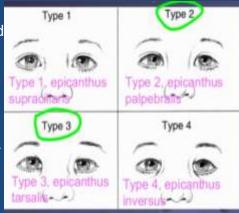
Epicanthus palpebralis:

involves both upper and lower eyelids

Epicanthus tarsalis:

fold most prominent along upper eyelid

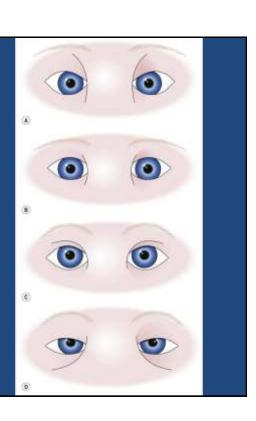
Epicanthus inversus: most prominent along lower eyelid

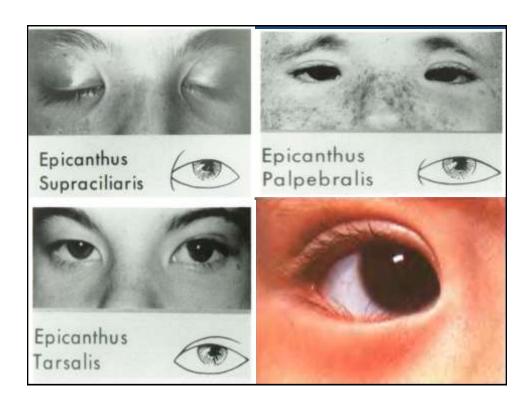


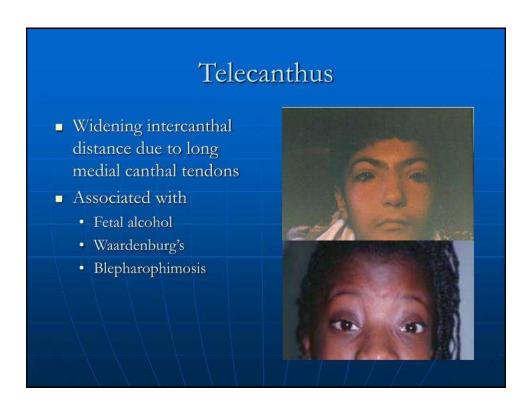
2 and 3 are the most common in Asians

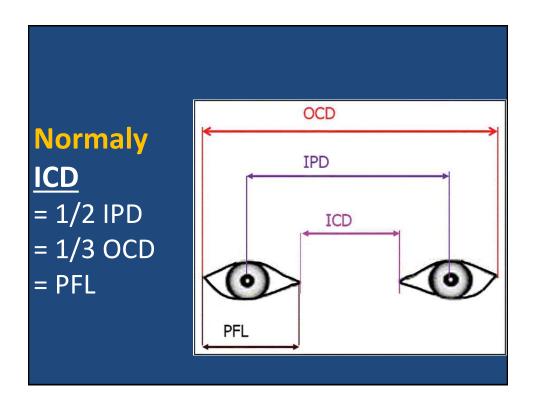
Epicanthus.

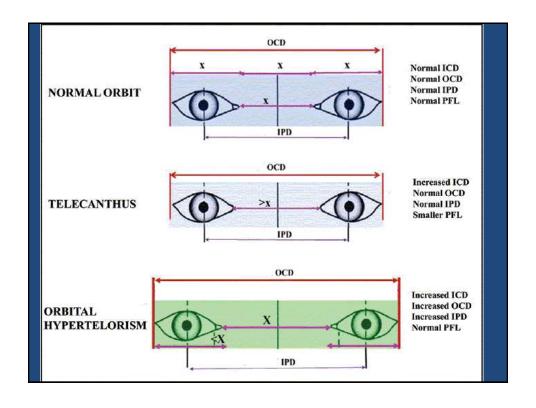
- (A) Superciliaris;
- (B) palpebralis
- (most frequent);
- (C) tarsalis
- ("Asian
- epicanthus");
- (D) inversus



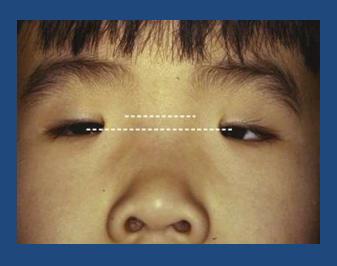








Telecanthus



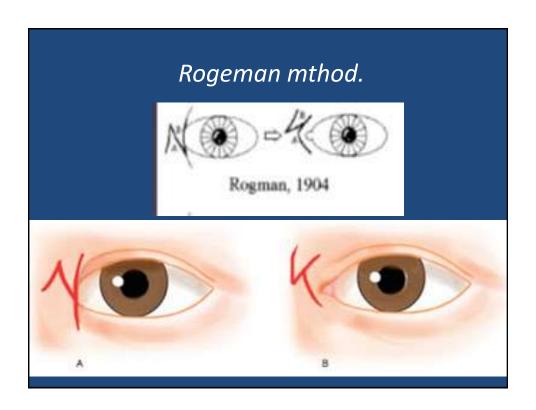
EPICANTHOPLASTY

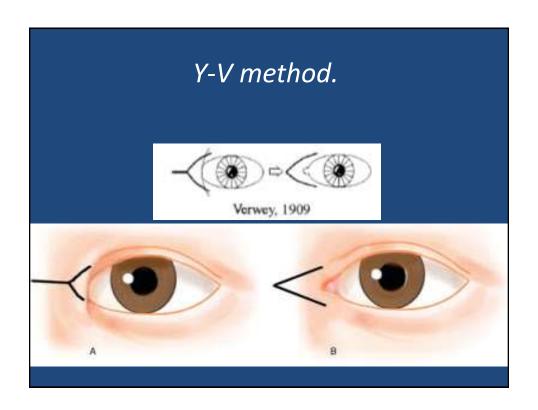
The goals of the surgical treatment of the epicanthal fold :

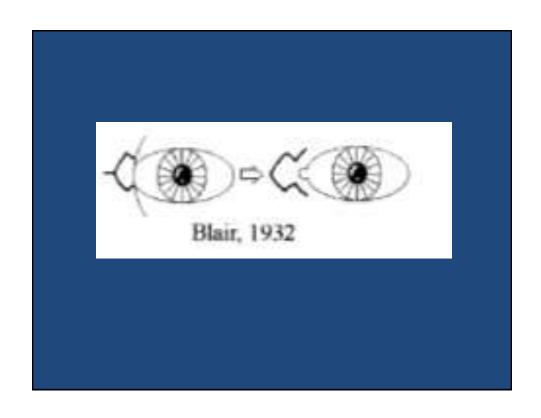
are elimination of the fold and establishment of normal relationships between the different anatomic structures with a minimum of scarring.

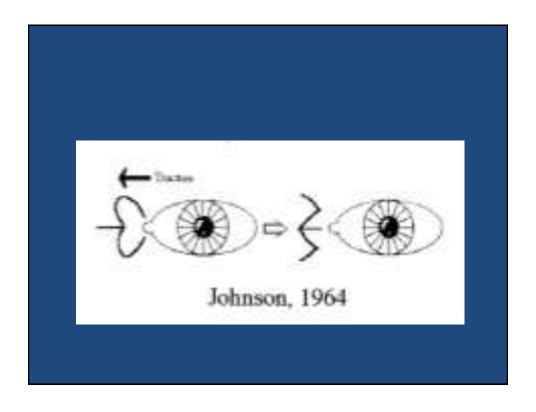


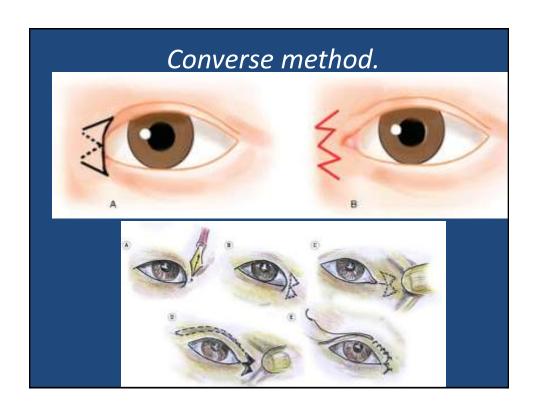


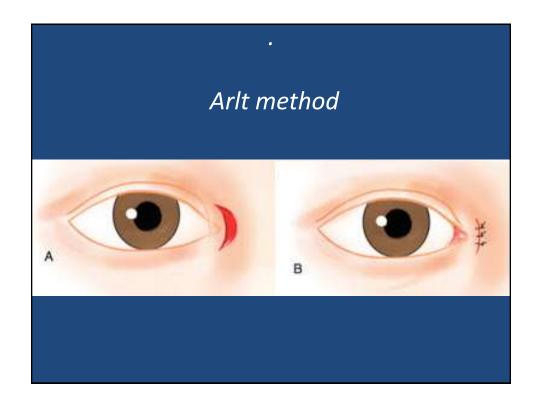


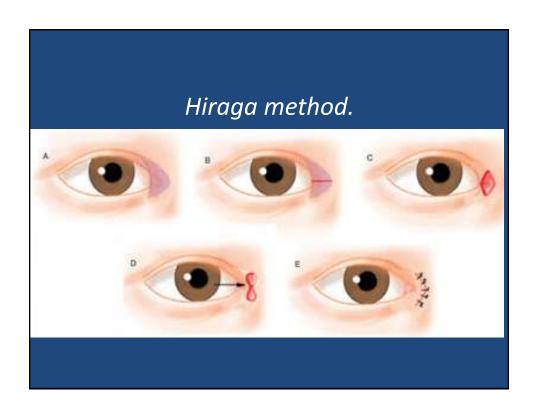


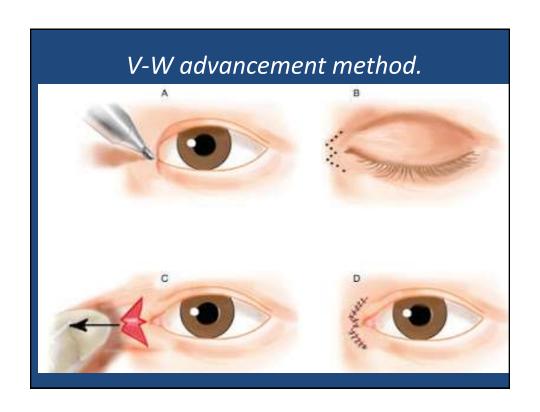


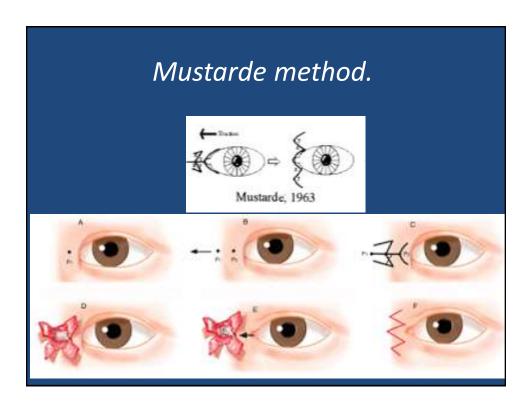


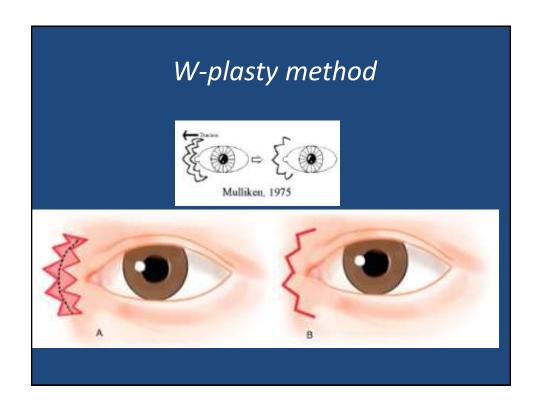


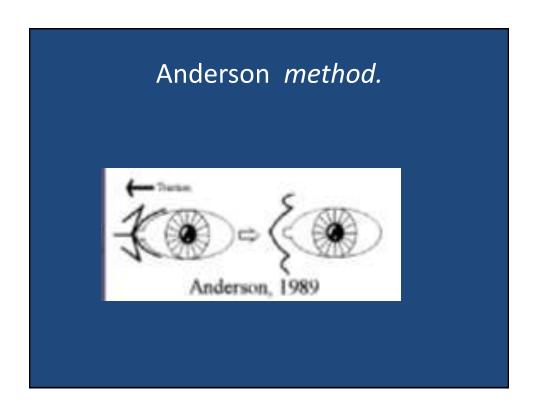


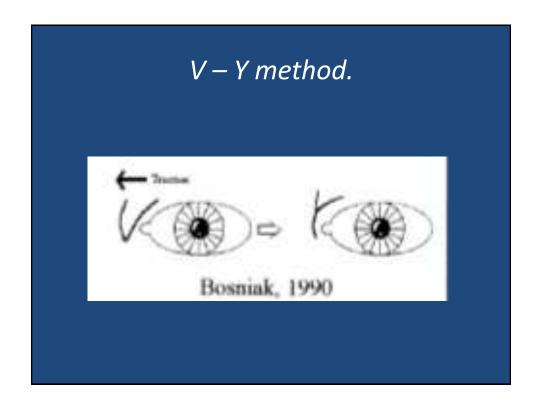


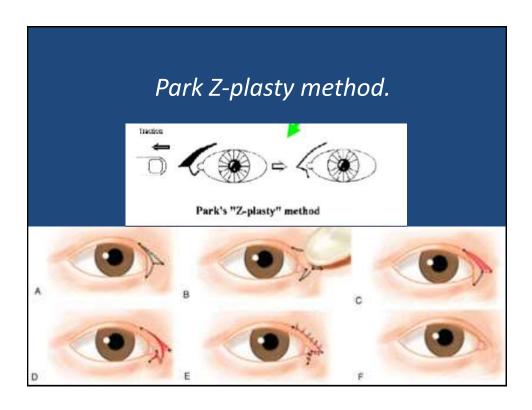






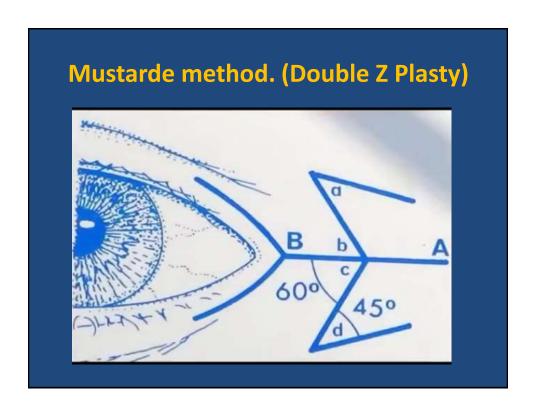


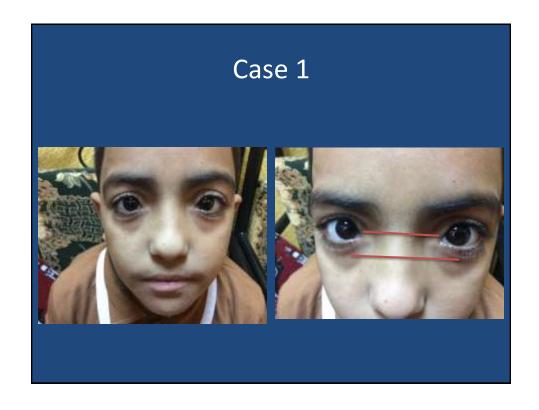




The most popular techniques

- * Mustarde method. (Double Z Plasty) •
- * Y-V Plasty •
- * Combind epicathoplasty and doubled eyelid surgery (Park Z-plasty method).

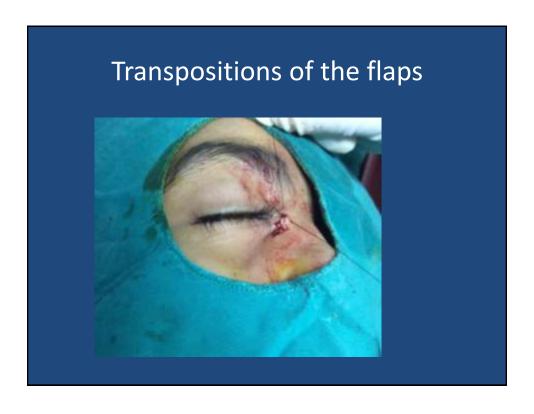










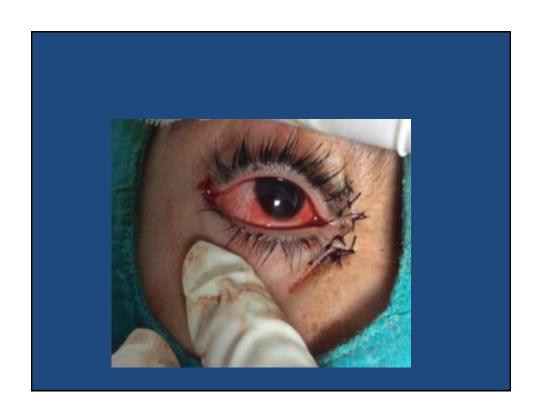






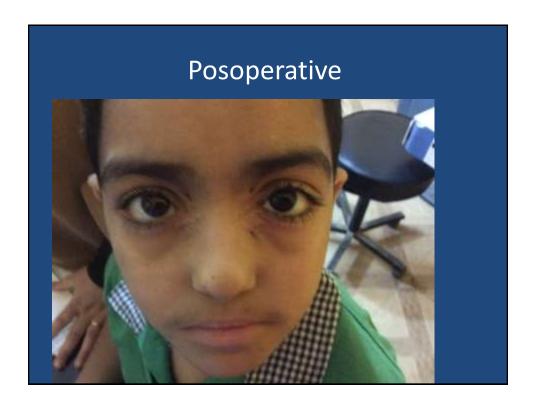






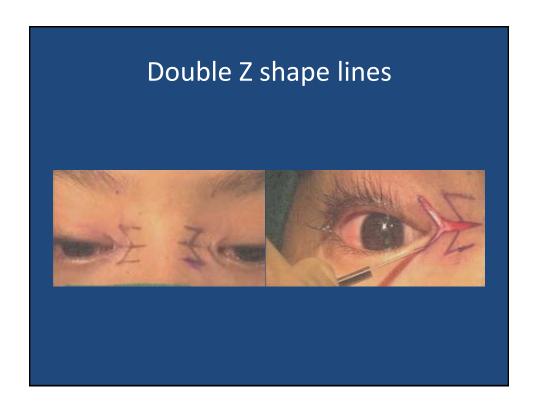


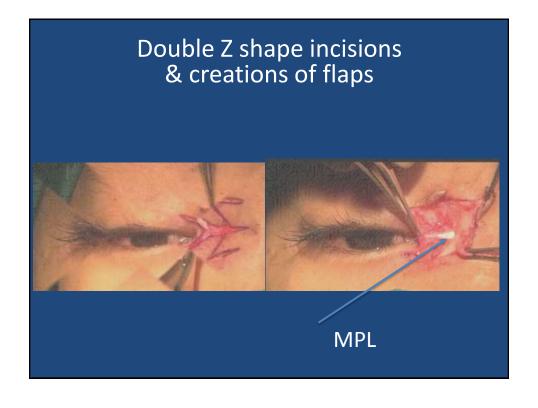


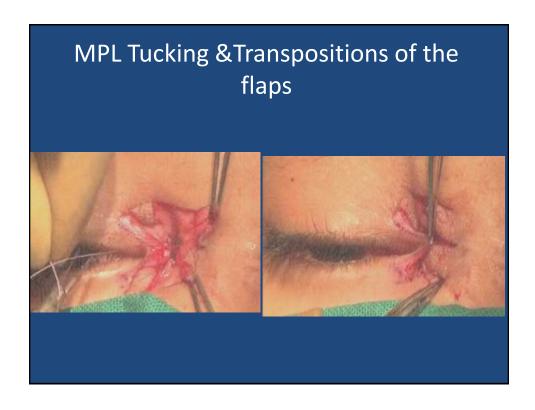


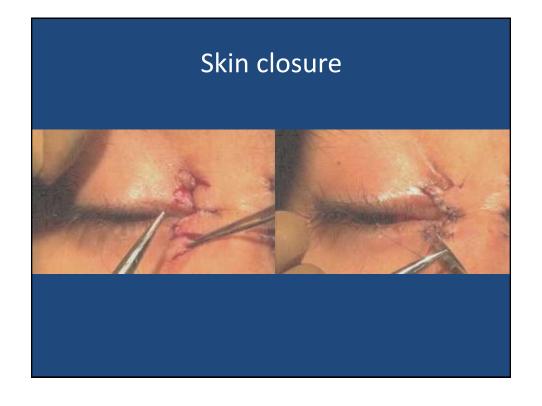




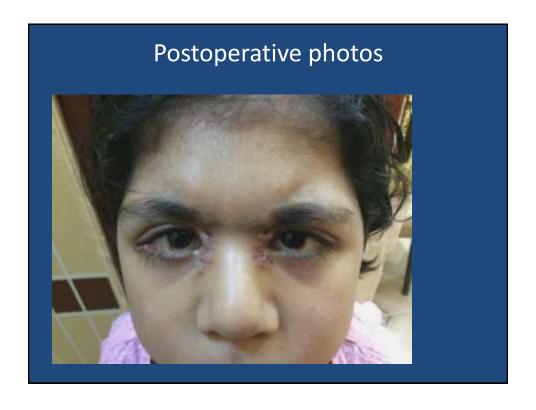


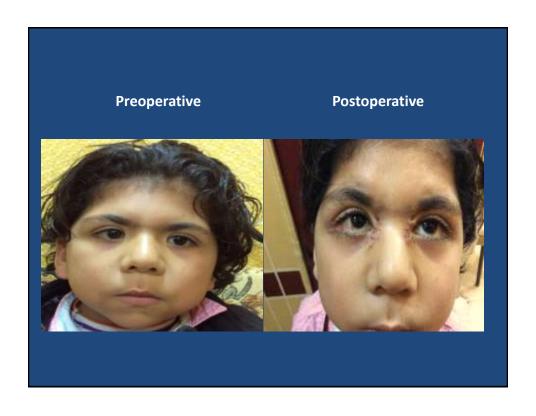












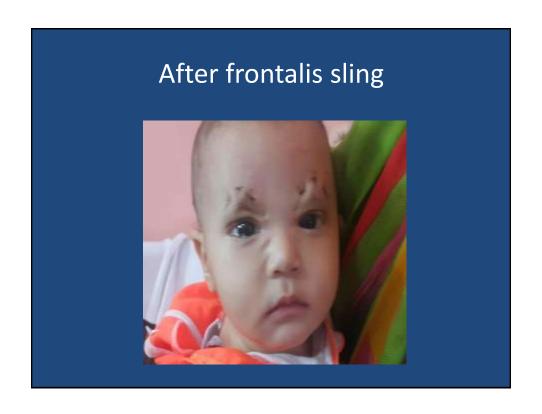


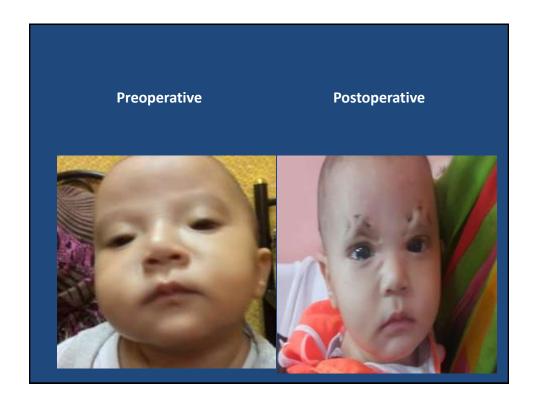


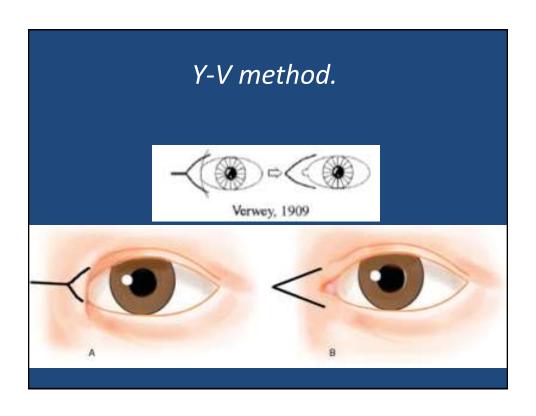


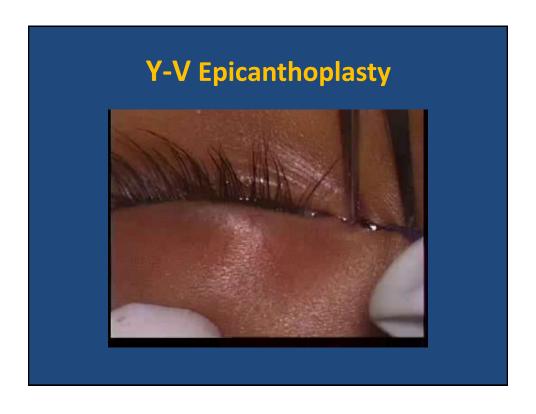












Combind epicathoplasty and doubled eyelid surgery

Surgical treatment of telecanthus

MPL plication or tucking •

MPL resection •

Transnasal wiring •

Miniplate and screw

