



DERMATOLOGICAL SURGERY

RETROAURICULAR INTERPOLATION FLAP ("BRIDGE FLAP") FOR REPAIR OF LARGE HELICAL RIM DEFECTS

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Introduction: The helical rim of the auricle is one of the most common sites of skin cancer to occur. Smaller excisional defects can be closed directly, and larger defects by a helical rim advancement flap, with a variety of modifications.

When a helical rim advancement flap is used to close a larger defect, the auricle becomes considerably smaller in size. Besides the esthetic concern, conchal bowl- or behind-the-auricle- hearing devices may not fit anymore, and acoustics may be impaired if the size of the auricle decreases by more than a third.

Objective: To design and use a helical rim repair that does not compromise the auricle in its size, shape and function.

Materials and methods: We use a pedicle retroauricular "bridge" flap to fit into the large helical rim defect. After 3-4 weeks the transposed flap tip is autonomized so that the pedicle can be dissected, to be wrapped around and shape a neo-helix

Results: The retroauricular interpolation flap is very safe and predictable. It yields anatomically and functionally optimal restitution of the missing helical rim.

Conclusions: The retroauricular pedicle flap is a safe and simple procedure to repair a common type of skin (auricle) defect after skin cancer surgery.

