



Full thickness skin grafts for surgical defects of the nasal ala – A simple and versatile single stage reconstructive option: Our experience over 10 years

Skin cancers of the nasal ala are commonly encountered in Dermatologic surgical practice. The proximity to the free margin, need to preserve the alar crease for optimal aesthetic results and the thick, sebaceous nature of the nasal ala present a challenge for the reconstructive surgeon. This is compounded by the relative lack of adjacent tissue reservoir. Various techniques have been described to reconstruct surgical defects of the ala including melobial transposition ?aps, Island pedicle ? aps, spiral ? aps. Interpolated melolabial ? aps provide an elegant reconstructive option. Full thickness skin grafts have received little attention in the reconstructive literature. The authors present their experience with full thickness skin grafts for reconstruction of partial thickness defects of the nasal ala in the largest series to date. Techniques to optimise the outcome are discussed including the utility of combined soft tissue hinge ?aps and cartilage grafts in conjunction with full thickness skin grafts.