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인간 교상에 의해 발생한 부분적 하구순 결손의 양측 근점막 전진 피판을 이용한 재건: 증례 보고

(Reconstruction of a Partial Lower Lip Defect Caused by a Human Bite Using Bilateral Myomucosal Advancement Flaps: A Case Report)



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Purpose : Human bite injuries of the lower lip carry a high risk of polymicrobial infection and frequently disrupt the vermilion line, necessitating precise reconstruction for optimal functional and aesthetic outcomes.

We report the clinical outcome of bilateral myomucosal advancement flap reconstruction for a near-half-width lower lip defect caused by a human bite.

Methods : A 49-year-old male presented 1–2 days after sustaining a human bite injury. Examination revealed a contaminated lower lip defect involving nearly half of the lip width, with disruption of the vermilion line and underlying orbicularis oris muscle.

Under general anesthesia, meticulous irrigation and debridement were performed. Bilateral myomucosal advancement flaps were elevated, including orbicularis oris muscle, and advanced medially to restore muscular continuity and achieve precise vermilion alignment.

Intravenous amoxicillin-clavulanate and metronidazole were administered during hospitalization, followed by oral antibiotics after discharge. Postoperative wound status and signs of infection were closely monitored.

Results : No postoperative infection or wound dehiscence occurred. Sutures were removed on postoperative day 7. At 3-week follow-up, the continuity and symmetry of the vermilion line were well maintained, without microstomia or functional limitation in oral opening.

Conclusion : For human bite-induced lower lip defects involving nearly half of the lip width, bilateral myomucosal advancement flap reconstruction following thorough debridement provides reliable infection control and satisfactory functional and aesthetic outcomes.



Fig. 1. Preoperative lower lip defect



Fig. 2. Intraoperative photo



Fig. 3. Immediate postoperative vermilion reconstruction



Fig. 4. Postoperative outcome