

19. *The Chances of a Lengthened Columella's Being Hairy*

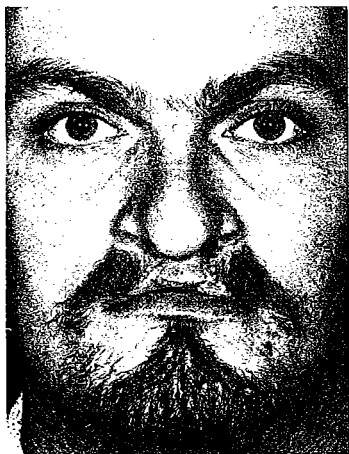
THERE are some surgeons who consider the prolabium exclusive property of the lip and deny any justification for its being parceled off to the columella. One of their arguments has been fear of the threat that hair will be transported to the nose from the prolabium. After 25 years of extensive experience at Rooksdown House and Roehampton, both in England, where hair has not been reticent to grow, as exemplified by the mustaches of the Queen's Guard and the bushes of the Beatles, Bill Holdsworth says quite simply:

Lip skin looks well in the columella and rarely is there trouble from growth of hair.

In 1950 Ferris Smith of Grand Rapids, in typical dogmatic style, stated:

Hair may grow on the elevated philtrum skin, but it is not probable, because this skin belongs to the columella. The author has had one instance in numerous cases.

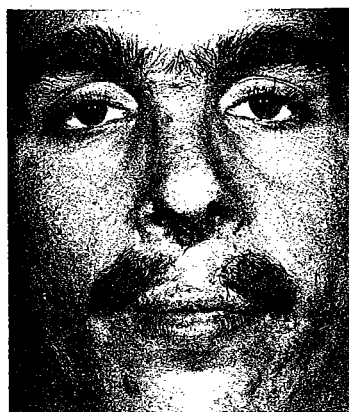
When the total prolabium is used for mid-prolabium flaps, as first described by Gensoul and modified by Blair, Brown and Veau, there is, of course, a greater chance of carrying hair to the nose. Fortunately the mid-prolabium flaps have been displaced for the most part by side flaps from the prolabium, as described by Skoog and Onizuka, or the *forked flap*. Let's take a moment to evaluate their hairy possibilities.



A BALD DEFENSE

In the first place, this is not a problem in female bilateral clefts. Furthermore, most male prolabiums do not yield luxuriant hair growth but produce a mere fuzz which proves to be as ineffectual on the lip as inoffensive on the columella.

As pointed out by Summerfield King, the mucocutaneous edge around three-quarters of the prolabium, including a slim portion of the adjacent skin, is hairless. Thus the lateral skin sides of the prolabium for almost the entire amount used in the prongs of a forked flap or other prolabium side flaps are more or less hairless from the beginning.



Whenever an incision is made in a hair-bearing area, the healed scar is hairless, partly because of the injury to adjacent hair follicles and partly because of the lack of hair in any healed scar. Thus when the incisions are made for the forked flap parallel to the sides of the prolabium and almost within the hairless area, these cuts increase the area of hairlessness. Of course, when the forked flap is used in secondary bilateral cleft cases, the scars already present, which are incorporated in the forks, are also hairless.



Indeed it is a brave or lucky hair follicle that survives these odds, and one that is still standing up along the front of the columella is reminiscent of the flag raised by the little group of heroic marines on Iwo Jima. What is more, it can be quite easily destroyed by electrolysis or mowed down by one upward sweep during the morning shave. In other words, the forked flap should never lose by a hair!