## II. Secondary Bilateral Cleft Deformities

## Introduction to Part II

Unless the surgeon has been unusually unskilled, most severe secondary bilateral cleft lip deformities have resulted following *complete* double clefts. In the beginning, that is, the surgeon faced a premaxilla presenting varying degrees of projection and deviation flanked by lateral maxillary elements in varying degrees of relative retroposition. In front of this irregular and treacherous platform was a prolabium of varying size and shape, with little or no muscle in it, attached to a short columella of varying length. The lateral lip elements may also be of varying size both in length and in bulk.

Yet what the secondary surgeon faces, although indirectly influenced by the original deformity, has been seriously altered by what the previous surgeon did and how that affected subsequent growth.

## An inseparable interrelation

Secondary bilateral deformities of the lip and nose are somewhat difficult to divide into separate chapters without repeating interrelated aspects. Choice of treatment of a nasal discrepancy often depends directly on the condition of the lip postoperatively. Thus, as it is difficult to divorce one aspect from the other, they will be dealt with together when necessary and separately when possible.

## Repetition for teaching

It is planned that the reader can look up a certain subject and get a rather complete coverage. As examples must also appear in depth in the case studies, repetition is occasionally necessary and is acceptable only as it reduces the number of times the reader must interrupt his concentration to flip about in the book.