

LETTERS

Upper eyelid platinum weight placement for the treatment of paralytic lagophthalmos: A new plane between the inner septum and the levator aponeurosis

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Dear Editor,

We have read the recent article by Oh et al. [1] entitled “Upper eyelid platinum weight placement for the treatment of paralytic lagophthalmos: a new plane between the inner septum and the levator aponeurosis” and wished to draw the attention of the authors and the journal’s readership to a significant oversight in the paper. Oh et al. [1] describe placing a platinum weight secured to the superior border of the tarsal plate after opening the orbital septum to expose the levator aponeurosis, and leaving the upper part of the weight resting on the levator apparatus. They claim this reduces implant visibility, implant exposure, and entropion. They also claim that this is “a compelling new technique for correcting lagophthalmos...[and] may be a new standard for determining the incision and dissection plane for platinum weight insertion.”

We would agree with the first assertion. We published a paper in 2004 [2] describing a surgical technique for the insertion of upper lid gold weights in paralytic lagophthalmos that is effectively identical to the technique described in the paper of Oh et al. [1] We described suturing the weight to the superior tarsal border after opening the orbital septum and then attaching the upper hole of the three-holed weight to the levator aponeurosis, behind the opened orbital septum. We found that the technique was effective in maximizing the long-term functional and cosmetic success of upper lid loading with gold

weights. There is clearly no difference in technique between us and Oh et al., [1] regardless of whether the material used for the weight is gold or platinum.

We disagree with the assertion that Oh et al. [1] have described a new technique. Our paper is easily found on MEDLINE searches and has been cited on at least 20 occasions in related publications. Authors should take care when claiming that a technique or observation is novel and make every effort to thoroughly search the relevant literature.

References

1. Oh TS, Min K, Song SY, et al. Upper eyelid platinum weight placement for the treatment of paralytic lagophthalmos: a new plane between the inner septum and the levator aponeurosis. Arch Plast Surg 2018;45:222-8.
2. Caesar RH, Friebe J, McNab AA. Upper lid loading with gold weights in paralytic lagophthalmos: a modified technique to maximize the long-term functional and cosmetic success. Orbit 2004;23:27-32.

Response to Letter: Upper eyelid platinum weight placement for the treatment of paralytic lagophthalmos: A new plane between the inner septum and the levator aponeurosis

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First, I would like to thank you for your interest in and comments on our paper.