During my training and my fellowship in head and neck reconstruction, my curiosity and eager for facial reanimation was stirred up. In Belgium, facial reanimation is rarely done and mostly by plastic surgeons. As a maxillofacial surgeon, we are not specially trained in facial reanimation techniques. Therefore, to expand my knowledge as well as to introduce these techniques in Belgium, I was honored to fulfill a 3-months fellowship at the highly renowned center of Prof.F. Biglioli. Hereby I want to thank EACMFS society and the company Stryker, which support the Leibinger Prize, to make this opportunity possible.

On my first day I had a very warm welcome of the entire team at the Ospedale San Paolo in Milan. The department is known in Italy and beyond for facial reanimation and reconstruction in the head and neck. Furthermore, they are highly specialized in vascular anomalies in the head and neck region as well as craniofacial and cleft patients. As my main field of interest is reconstruction and especially facial reanimation, I was divided to the team which was mainly involved in this kind of surgery.

After the introduction we went immediately to the operation theatre. On this day a squamous cell carcinoma at the trigonum retromolare was scheduled for resection and primary reconstruction with a buccinator flap. An average week schedule in the operating theatre consisted out of 2-3 patients for facial reanimation, 2-3 patients with an intra- or extraoral tumor for resection and reconstruction, alongside parotidectomies and more common maxillofacial surgeries. On a daily base, resection and reconstruction of skin anomaly was performed under local anesthesia. Also, small corrections after a facial reanimation surgery was performed in that matter.

Before I came to Milan I had a basic knowledge about facial reanimation, mainly from reading about it. During each surgery, Prof.F. Biglioli was very teaching minded and took his time to explain and show all the tips as well as the pitfalls in this kind of surgery. Most of the time I was involved in the surgery and was trained in all the steps needed to perform this kind of surgery. I started with harvesting a n. suralis graft as well as a fat graft, upgrading after a few weeks to harvesting a m. gracilis flap, and ending with the preparation of the n. massetericus and branches of the facial nerve. During my fellowship I learned to decide which procedure on which patient has to be performed. In facial reanimation there are some guidelines but there are so many factors to be considered to make the final operation plan. For this reason, every patient was discussed by Prof.F. Biglioli before the operation whilst he highlighted the clinical signs which were considered in the final decision of the operation plan. The "ultimate" facial reanimation procedure was the 'triple innervation procedure' for recent facial palsy, which was published by Prof.Biglioli. I was lucky that during my time at the department there were more patients than average for this kind of procedure.

Besides facial reanimation, I learned a lot on the techniques for reconstruction after ablative surgery. I was trained to reconstruct large defects mainly by microvascular free flaps. At this department they try to use large local flaps or pedicled flaps for reconstruction due to the fact that the patient population were mainly elderly. Furthermore, my experience in local skin flaps for dermal tumors was increased highly as this was a daily treatment at the clinic. The end of my fellowship was highlighted with the in-house organized facial reanimation course, which was a good overview and recap of what I had learned the past months. During these months of my fellowship I got in contact and obtained some of the Italian life style, which involves drinking a lot of coffee. During my free time I was able to discover more of the beautiful city of Milan, of which the center is astonishing.

I highly recommend this experience to every young surgeon and especially the training by Prof. F.Biglioli if you are interested in facial reanimation and head & neck reconstruction techniques.

For this amazing experience I would like to thank with all my heart Prof.F.Biglioli as well as Dr.D.Rabbiosi, which assisted/teached me a lot during surgery.

Christophe Spaas M.D., D.D.S