

Five Old Lines and Three New Lines That Can Help When Designing a Male Temporal Hairline or When Transplanting the Frontotemporal Apex

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The Importance of the Temporal Hairline

One of the main goals of hair transplantation is to create a “frame for the face.” A picture frame has four sides to control the gaze and center the focus. A “hair frame” has three or four sides.

There has been a great deal of attention paid to the design of the frontal hairline, including discussion about the proper height of the central peak, the shape of the hairline, and the methods used to make the transplanted hairline look more irregular and more natural.

The frontal hairline, however, is just the top of the frame. The temporal hairlines are the two sides of the frame and they are often less than perfect.

Defining the Components of the (Anterior) Temporal Hairline

If you look at Figure 1, the temporal point will be described as the triangular projection forward from the rest of the temporal hairline. The frontotemporal (FT) apex is the point at which the frontal and temporal hairlines meet. The superior (anterior) temporal hairline will be defined as that part of the hairline between the frontotemporal apex and the tip of the temporal point.

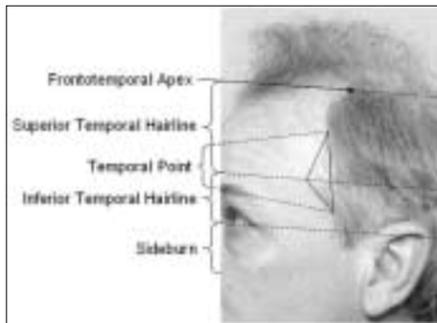


Figure 1. Components of the temporal hairline

The inferior (anterior) temporal hairline will be the part of the hairline between the tip of the temporal point and the sideburn. The sideburn will be described as commencing inferior to a horizontal line between the lateral canthus and the attachment of the helix of the ear.

Five “Old” Lines

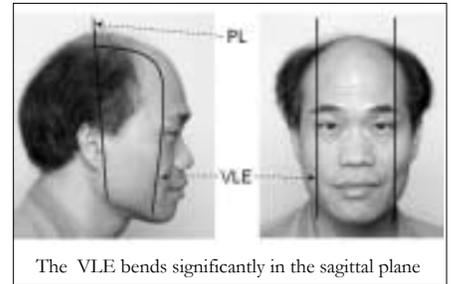
The vertical lateral epicanthal line (VLE). This line, extending vertically upward from the lateral epicanthus in the frontal view, has long been used to determine the placement of the frontotemporal apex.

Marritt, Alt, and Norwood stated years ago that the frontal hairline should be horizontal when viewed in profile.¹ Stough and Shapiro both use the VLE when describing how to build up the temporal fringes to keep the frontal hairline horizontal.

Stough made specific recommendations that, in profile, the frontotemporal apex should fall on a horizontal extension of the VLE and should be 1–2cm behind the receding temporal fringe or anterior sideburn, but that it should not be behind the pretragal line (PTL). He also noted that the distance from the central peak to the frontotemporal apex should be 4–7cm².

Shapiro described building up a lateral hump on the temporal fringe, when required, to place the frontotemporal apex on the VLE about 1cm anterior to the auditory meatus. He allowed that the frontotemporal apex could be slid downward and forward, when appropriate.³

In the frontal view, the VLE is easy to visualize but, in profile, the VLE bends significantly in the sagittal plane (see Figure 2). This makes it a less reliable landmark for beginners.



The VLE bends significantly in the sagittal plane

Figure 2. The vertical lateral epicanthal (VLE) line and the pretragal line (PL)

Mayer's Temporal Points and Mayer's Lines

Mayer has studied temporal points and has created a classification system.⁴

He has described an elegant rule that defines the tip of the temporal point as falling on the intersection of a line from the nasal tip through the pupil (which will be called NTP) with a line from the base of the ear to the central peak of the frontal hairline (which will be called ECP).

Mayer's classification system relates the temporal points to the anterior sideburn line (which will be called ASL). His N(ormal) and T(hinning) classes have the tip of the temporal point in the usual location. In his P(arallel) class, there is no temporal point and the temporal hairline lies along the ASL. In his R(eversal) class, the temporal hairline indents posterior to the ASL. Figure 3 shows the NTP, ECP, and ASL lines.

Three New Lines

Goals

Through observation and trial-and-error, intersecting lines were sought that could define a “usual” location for the frontotemporal apex.

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