

# Editorial



Dear Colleagues,  
Progress in plastic and reconstructive surgery arises from the integration of clinical practice, research, and a willingness to innovate beyond traditional boundaries. Over the past two decades, the field has advanced remarkably. Perforator flaps, such as the DIEP and SCIP, have become standard techniques, offering improved precision with reduced donor-site morbidity. Supermicrosurgery has enabled effective treatment of lymphedema and refined ultrathin flap procedures. Sensory reinnervation – particularly in breast reconstruction – is significantly enhancing patient outcomes. Meanwhile, technological tools like ICG angiography, 3D surgical planning, and advanced nerve coaptation methods have further improved safety and success rates. Autologous fat grafting has emerged not only as a volume enhancer but also as a powerful regenerative tool, especially in irradiated or traumatized tissues.

Supermicrosurgery has enabled effective treatment of lymphedema and refined ultrathin flap procedures. Advances in nerve repair techniques – especially regenerative peripheral nerve interfaces (RPNI) – are improving functional outcomes and patient quality of

life, particularly in breast and extremity reconstruction. Meanwhile, technological tools like ICG lymphangiography and angiography, 3D surgical planning, and advanced nerve coaptation methods have further improved safety and success rates.

These advancements reflect not only surgical innovation but also a deep commitment to evidence-based research. Preparing and publishing scientific work is an essential part of this process – it transforms clinical experience into shared knowledge, invites critical feedback, and helps refine our understanding of what truly benefits patients. Far from a mere academic exercise, publication is a vital moment of reflection – an opportunity to clarify ideas, evaluate outcomes, and contribute meaningfully to the future of our field.

This issue of *Acta Chirurgiae Plasticae* embodies that spirit. Macek offers a valuable retrospective comparison of two temporalis muscle-based dynamic reanimation techniques for long-standing facial paralysis: lengthening temporalis myoplasty and minimally invasive tendon transfer. Urbanová presents a double-center study on cleft lip and palate risk factors in the Czech population, identifying gaps in prenatal diag-

nosis. Manjuntath discusses the management of ambiguous genitalia and disorders of sexual development. Mishra contributes a case series on schwannomas demonstrating excellent functional outcomes. Borza examines radiological images to assess the distances between the maxillary artery and key bony landmarks in the temporomandibular joint region. The findings provide valuable insights for surgeons, helping to minimize the risk of arterial injury during procedures in this anatomically complex area.

In case reports, Lin Wu presents an innovative adaptation of the medial plantar artery flap for sole reconstruction.

In regenerative medicine, Isoldi reports a case where fat grafting played a crucial role in traumatic limb salvage. Bartková's letter calls for implementing standardized screening tools in suspected pediatric burn abuse cases.

I wish you a pleasant reading.

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