Anatomy of the lips
The lips extend from the lower end of the nose to the upper end of the chin. They mainly consist of bundles of striated muscle called the orbicularis oris, with skin externally and the pink mucous membrane internally. The skin is healed directly to the muscle and there is no layer of fat in between. Between the muscle and pink mucosa there is a thin layer called the submucosa that contains mucous glands. The vermilion border is that line or slight ledge area between the normal white skin and the pink portion of the upper lip. The vermilion zone contains no hair or sweat glands. There is a small rolled or puckered border in this region. It is often referred to as the “Cupids Bow”. The philtrum is the region in the middle of the upper lip directly beneath the midportion of the nose where there is a depressed area between two “columns” and gives the upper lip the classical features we recognize so easily.

Aging of the lips
The lips and especially the upper lip are a very obvious gauge of the progression of environmental and chronological aging. The aging and wrinkling of the upper lip is influenced by at least four factors: accumulated sun exposure, genetics, smoking, and the natural maturing process. These factors combine to create wrinkling and flattening of the upper lip with a loss of the “Cupid’s bow”. Small vertical cracks and wrinkles cross from the skin into the mucosa of the lips causing the lipstick to “bleed” into these regions. Often the first sign of aging is this wrinkling and flattening of the upper lip. In order to reverse these factors, lip augmentation is designed as an artistic technique. Lip rejuvenation and enhancement is one of the most frequently requested cosmetic procedures.

Rejuvenation of the lips
Goals for lip rejuvenation are directly related to the anatomy of what you have, and your expectations. Most of the time rejuvenation consists of just adding volume to the lips to allow more pink to show. Other times it involves correcting uneven lips. Aging lips can be seen from elongation or stretching of the upper lift or drooping corners of the lips. In addition to this and in later stages, wrinkle lines appear that cross over the vermilion borders of the upper and lower lips. The options for treatment depend on your anatomy and expectations. Surgery and incisions are used to raise up long lips or drooping corners. Injection of filler materials or fat can sometimes be used for this as well. Injections of filler materials (such as Restylane, Perlane, or Juvederm) are very good for adding volume to the lips and filling wrinkles. Your own fat can be used for this purpose as well. Augmentation of the submucosa in the vermilion border gives anterior projection and more shape and contour. Augmentation under the skin of the upper lip improves anterior projections and creates a more youthful convex shape. Augmentation of the vermilion border gives flare to the upper lip.