

Letter to the Editor

Aesthetically Pleasant Ending for a Running Subcuticular Suture

I present a simple maneuver for finishing any running subcuticular closure in an aesthetically pleasant way.

The subcuticular suture, first described by Halsted [3] in 1889 as an attempt to reduce wound infection, was popularized by Davis [1] to improve wound aesthetics. In a classical buried running subcuticular suture, with the bites taken either vertically [2] or horizontally [4], the suturing starts in the distal corner of the incision and ends in the proximal corner. The start of a running subcuticular suture usually is easy, and can be performed either by taking a single intradermal bite right on the distal corner of the incision or by placing an inverted intradermal suture very close to it and then advancing it proximally. However, the ending may be cumbersome. The closure usually is ended with either a loop tied using a slip knot or an instrument tie, and the knot is buried by bringing the free end of the suture out through the skin away from the closure.

However, this classical ending of the running subcuticular suture may cause suture spitting attributable to inadequate burying of the knot, puckering, and dog-ear formation resulting from imperfect approximation of the corner. These aesthetically undesirable complications may be minimized, or even totally eliminated, by ending the running suture approximately 1 cm proximal to the corner on the

incision by tying the knot, cutting the tail on the knot, and placing a single intradermal buried vertical mattress suture between the ending of the running suture and the proximal corner. With this single interrupted last suture, the skin can be perfectly approximated at the corner, avoiding dog-ear, eliminating the bulky knot from the corner, and eliminating the tail from the knot.

Adil Ceydeli M.D., M.S.
*Division of Plastic Surgery
Medical College of Georgia
1467 Harper Street, HB-5040
Augusta, Georgia, 30912-4080
email: adilc@excite.com*

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