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DE CONFRONTACIONES TERAPEUTICAS EN MEDICINA Y CIRUGÍA COSMETICA
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Surgical Pearls in the Management of Body Contouring by Liposculpture from Fournier’s Syringe to Lipomatic

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PEARLS

“little concepts” that can make the difference between a good and a great result, between a satisfied and a dissatisfied patient

They can be:
• technical reminders
• more practice management oriented
• used with a variety of different techniques
• useful and easy improvements
• integrated as a trial in our practice
1. PHOTOGRAPHY AND COMPUTER IMAGING

- Computer enhanced imaging must be conservative and realistic
- A consent form must be signed prior to performing computer enhanced imaging
2. MARKINGS

- concentric circular patterns with “+” in areas with fat excess
- parallel lines for adherence areas
- circular patterns with “-” in area of dimpling
- short lines for sites of access incision
- new preoperative photographs with markings on the computer monitor to allow last-minute questions
3. CANNULAS

- Mercedes type
- Small (Standard) Caliber (3 or 4 mm diameter)
4. POSITIONING, PREPPING AND DRAPING

The ‘’unrestricted patient mobility’’ position

- painting in standing position
- supine on a sterile - draped operating table
- arms extended at 90 degree angle
5. QUANTITATIVE ASSESSMENT OF FAT REMOVAL

checking the partial and the final results

by having the patient stand up

to avoid waves or sagging skin

(effective available in outer thigh, hips and abdomen)
6. SUBCUTANEOUS INFILTRATION

- MODIFIED KLEIN’S formula:
  - lidocaine 600 mg
  - epinephrine 1 mg
  - sodium bicarbonate 8,4 % (1mEq/ml) 12,5 ml
  - normal saline solution 1000 ml

- SAFE LIDOCAINE DOSE should never exceed 35 mg/kg weight (500 cc of infusion solution for 10 kg weight)

- ELECTRONIC SCALE attached to a Klein infusion pump
7. ACCESS INCISIONS

- slightly bigger than the cannula’s diameter
- placed staggered or asymmetrical
- a skin protection with Fixomull tape allows:
  - less outflow of tumescent fluids
  - passage with less skin damages
  - less problems of residual scars
8. SYRINGE SUCTION

• easiest technique to begin

• best technique to teach the beginners

• main technique for a lot of surgeons
9. BE CONSERVATIVE

- secondary surgery for additional fat removal
  rather than have a group of uncorrectable overresections
- better to correct very large deformities in two different times stages
10. LIPOSCULPTURE ASSISTED BY COMPRESSED AIR – VIBROLIPOSUCTION (L.C.A.)

- new technology

- suction liposculpture by the use of classical cannula with pneumatically assisted movements

- a safe and an efficient technical improvements

- low frequency, no heat generating, no burns
11. THE MOTION OF THE ENGINE PROVOKES THREE EFFECTS

1. A backward and a forward (translatory motion) of the cannula with 10Hz frequency (600 beats a minute), amplitude of the motion about 5 mm

2. A vibratory wave propagated along the cannula at:
   - access incisions
   - the tip of the cannula

3. A motion of nutation (effect of top) at the extremity of the cannula, perpendicular resultant of vibratory wave.
Vibratory wave
at:
- access incisions
- tip of the cannula
12. RESULTS OF THESE THREE EFFECTS

• dislocate adipose lobules
• better extract in association with a classical depression smoothing the fatty cells brings about the emulsification
• less destructive for adjacent conjunctive tissue, vessels and nerves
Endoscopic images of Lipomatic action
ADVANTAGES OF LIPOMAT\-IC

- FOR THE PATIENT:

- shorter operating time
- better comfort
- less traumatic
- less bruising
- less swelling
- faster recovery
- less residual pains
- safe and danger free
ADVANTAGES OF LIPOMATIC

- FOR THE SURGEON:
  - less physical effort
  - faster evacuation of excess anesthetic fluid
  - larger number of areas treated in one session
  - greater precision of work
  - more uniform results
  - works in all directions of the space
ADVANTAGES OF LIPOMATIC

C. From technical and aesthetical point of view

- allows liposculpture of:
  - areas with lots of stretch marks
  - very adipose zones and obese patients
  - axillary thoraco dorsal region
  - upper abdominal wall
  - female and male breast
- revision liposuction in secondary cases
- the only choice for elderly people
- matchless superficial liposculpture
11. OTHER WAY TO USE THE LIPOMATIC

In the operating room, with a specialized treatment heads attached to the same motors, using the same massage and aspiration effect, we can produce a similar effect as other existing machines.
Other way to use the LIPOMATIC
12. OPERATIVE STRATEGY

- **L.C.A. – LIPOMATIC** as the universal method of remodeling of body adiposity

- **LIPOSCULPTURE with FOURNIER’S SYRINGE**
  - only in:
    - small refinements
    - lipofilling
13. WOUND CLOSURE with SUTURES vs OPEN DRAINAGE

- suture with one resorbable stitch for more than 5 mm access incision
- strategic use of surgical ROUND ADITS:
  - helpful over areas such as thighs and abdomen
  - remain patent for a long time
  - less bruising, swelling, tenderness
  - less incidence of seromas and hematomas
  - faster rate of recovery
14. DRESSING THE TREATED AREAS

- self adhesive-backed tape (FIXOMULL) over the liposuction areas
- super-absorbent compression sponges or pads (for 24 to 72 hours)
- two degrees of sequential compression in so called “bimodal compression”:
  - first, high-compression with special adjustable garments (for 24 to 72 hours)
  - second, mild degree compression (6 to 10mm Hg) with medical-grade support hose (for at least 4 to 6 weeks)
Some Aesthetic Results
LIPOSUCTION: GOOD RESULTS BUT NOT MIRACULOUS
LIPOSUCTION: GOOD RESULTS BUT NOT MIRACULOUS

before

after
LIPOSUCTION: GOOD RESULTS BUT NOT MIRACULOUS

before

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Thank You Master Fournier for Your Support in the Development of Liposculpture in Romania
In the name of God,
from the past
to the
new millennium
I give you
Liposculpture,
my technique !
Thank You
For Your
Attention!