

Restoration of Female Body Configuration by Combined Liposculpture with Lipomodelling Post Massive/ or Moderate Weight Loss

Dr. Mohamed Abdel Hafeez

Abstract:

Introduction And Purpose:

Female naturally should has unique feminine body shape that give her the attractive look, and the most attractive body shape all females seek and want it is hour- glass body shape.

In female patients after massive weight loss whatever through dieting or bariatric surgeries they lose massive weight in relatively short time and the end result will be complete loss of feminine body + a lot of skin excess the hour- glass body has many standards waist/hip ratio should be from 0.6 to max 0.7 lateral profile : buttocks should be heart shape or round shape with two high defined angles , one between the upper border of buttock area and lower back and the other angle between the lower border of buttock area and the upper thigh posteriorly anterior/posterior view : rounded curvy trochanteric areas without any depressions upper thigh medially not touching each other with narrow inverted triangle space in between flat abdominal wall with low profile mons mound inferiorly

Key words: Liposuction, Body Configuration, Abdominoplasty, Obesity

Introduction

And these is what we try to reach through this strategy the changes happened in female after massive weight loss:

After bariatric surgery the patient start lose the weight progressively till as protocol six months after reach fixation of weight we was start dealing surgically with skin excess and the end result of this female has no skin excess any more but looks like a man without any feminine configuration because most of fatty areas lost and she became has no more extra fat at this stage.

To control your body wt. and reach normal range BMI after obesity or over wt. is good target but to preserve or create curvy beauty body shape in parallel line this is most middle east women Patients post massive wt loss lose beauty feminine body shape look after loss of

supporting adipose tissue matrix most of them become ruler shape type with more skin redundancy, and when these patients reach for plateau of fixed weight point after losing most of body fat proceed with different surgeries to manage body skin redundancy, the patients will resume their skin tightness again but will keep in ruler body shape that is not desired to have by most of eastern ladies.

Materials and Methods:

My aim to start with them before to lose most of supporting fats to get a benefit from this fat cells to give them almost near hour – glass body shape image.

Through 3D lipomodeling which is combined with different degrees of liposculpture according to pre-op map and plane (to enhance waist narrowing and increase hip circumference laterally and posteriorly to try to keep w/h ratio near 0.6, and give buttock augmentation projection , upper medial aspects of both thighs smart liposculpture , and abdominal wall etching can be done in

Dr. Mohamed Abdel Hafeez
Consultant plastic surgery
King Fahd Specialist Hospital, Saudi Arabia

some cases will not in need for abdominoplasty later) then after 3 month start with skin redundancy surgeries upper and lower body lift.

The Study Started on 40 Patients Divided into two Groups Each Group 20 Patients

The first group with mild to moderate wt. loss and with mild to moderate skin redundancy in this group with 3D configuration of the body with combined liposculpture and lipomodelling.

I did for the abdominal wall aggressive liposuction with concentration on superficial fatty layer with small cannula with friction movement to the dermal layer.

And two drains inserted in abdominal wall and one drain posteriorly in sacral triangle.

These drains kept in place for 3-4 days under -ve pressure to help these three combination (thermal friction injury by liposuction small canula + -ve pressure drains + tight garment) to help adhesion of abdominal skin to underlying abdominal wall 8 weeks tight full garment postoperative the second group post massive wt. loss and massive skin redundancy in this group I tried to use mild over correction for the areas build up with lipomodelling to balance the wt loss curve specially post sleeve gastrectomy and in this group no dermal injury to abdominal skin wall and no -ve pressure drains as with massive skin redundancy they must need abdominoplasty later but in both groups advice patient for ultrasound massage three times a week for 4 weeks post operative.

Results:

These patients fully satisfied with this body shape even in presence of skin redundancy that will start deal with after 3 months, the other benefit of this strategy will decrease abdominal wall subcut. fat thickness which facilitate and subcutaneous optimise abdominoplasty results later.

1- First Group: Patient with moderate gradual weight, loss with mild to moderate skin redundancy they have satisfied with new shape and configuration of the new body image and the mild degree of redundancy improved and no one of them ask for abdominoplasty later and among this group no patient develop any complication.

2- Second Group: Patient post massive weight loss ,with massive skin redundancy Satisfied with new feminine configuration of the body even with presence of skin redundancy that they know will start deal with three months later among this group two patients develop local complication.

One develop 8th day post operative mild fat liquefaction at the loose ischial area because the skin here is very loose. After this I avoid injecting any fat to this area. Another patient develop local inflammation in the site of liposculpture in one thigh and controlled conservative with antibiotic and antiinflammatory medicine.

Conclusions:

Adding lipomodelling and liposculpture for body shaping in these type of patients post wt. loss give chance to them not only to get normal BMI but to keep beauty feminine body shape too that is more desired to most of middle east women and the other advantage too specially for abdominal wall and waist as most these patients post massive weight loss will need abdominoplasty and as combined aggressive liposuction specially for waist areas with abdominoplasty can harm lateral costal perforators supply the abdominal flap and can harm viability of the flap leading to distal skin necrosis and wound dehiscence so separation of liposuction three months before abdominoplasty will help to save abdominal flap.

References:

- 1- Shermak MA, Chang D, Magnuso TH, Schweitzer MA. An outcomes analysis of patients undergoing body centoming surgery after naive weight loss. *Plant recenter. Surg.* 2006;118:1026-31.
2. Song AY, Jean DR, Hurwitz DJ, Fernstrom MH, Scott JA, Rubin JP. A classification of contour deformities after banatric weight loss. the Pittsburgh rating scale. *Plant Recenter surg.* 2005;116:1535-44.
3. Taylor J, Shermak M. Body centoming Pouoing name weight loss. *Obeset surg.* 2004;14:1080-5.
4. Kesselring U. Regional fat aspiration for body centoming. *Plant. Reconstr. Surg.* 1983;72:610-619.

