Patient education leaflet: Frequently asked Questions (FAQ’s)

Lipobodysculpting

Disclaimer: This leaflet has been produced to give you general information. Most of your questions should be answered by this leaflet. It is not intended to replace the discussion between you and your doctor but may act as a starting point for discussion. If after reading it you have any concerns or require further explanation, please discuss this with a member of the healthcare team.

1. What is Lipobodysculpting?
It is an advancement in the field of cosmetic dermatology (A sub speciality of dermatology which caters to applications and treatments leading to improvement in appearance of skin and body image). Lipobodysculpting involves changing body shape by removal of fat from an unwanted area and adding to areas that have lost fat due to aging or disease. It aims to give the body a more acceptable cosmetic look that is desired by the person. As the name suggests, it is a type of liposuction and fat grafting done under tumescent local anaesthesia (safest form of liposuction). The patient and the surgeon discuss and decide the areas from where the fat is to be removed and the areas which require insertion of fat.

2. How is the procedure done?
As mentioned, the procedure is done under local anaesthesia. This prevents the need for hospital admission. One of the biggest advantages of performing this procedure under tumescent local anaesthesia is that it causes minimal blood loss. Hence, the patients can be safely sent home with adequate instructions after the procedure.

3. What is tumescent anesthesia?
Tumescent anaesthesia is anesthesia achieved by injecting larger volumes of a mixture of saline, lidocaine, adrenaline and sodium bicarbonate solutions, that are mixed in a formula suggested by Dr Jefferey Klein (inventor of the concept of tumescent local anaesthesia).
anaesthesia) from California, USA. Only a small proportion of the injected drug gets absorbed which gives rise to minimal side effects. Drowsiness is the most common side effect. Other effects include seizures and arrhythmias of heart but are fortunately very rare.

4. **How will the procedure be done?**

The procedure starts with marking the areas to be treated followed by thorough cleaning and draping.

- The first part of the procedure is making very tiny openings with a round sharp punch at specific sites to gain access to the fat compartment which is to be removed. Through these openings the anaesthetic solution mixture is injected using thin steel tubes called cannulas. The tumescent fluid is spread in all layers of the fat (first deep and then superficial). After this phase of around 45 minutes, the area gets numb and pale in appearance. Fat is then removed first from the deeper layers, then sequentially from the superficial layers. Once the surgeon is satisfied that enough fat removal has been done from each side (gauged by the pinch test), the procedure is stopped.

- If the patient has also opted to have fat grafted into other body or face areas, then the fat is collected in sterile large syringes, allowed to stand and decant.

- A triple layer bi-modal compression dressing is done after completion of fat removal. This has shown to accelerate the drainage of injected fluid and prevent any collections inside the fat compartment. Once the drainage stops, healing of the fat compartment starts along with fusion of the skin holes that were made for access.

5. **What kind of compression garments I will need to wear and for how long?**

The compression garments, made of a stretchy synthetic material, will help avoiding complications of the procedure viz. pain, collections in the fat compartment (hematomas, seromas) and consequent infections. You will be required to wear it at
all times for at least 3-4 weeks. This will aid in getting a good shape. On some occasions, there can be residual irregularity in terms of fat removed leaving bumps. Wearing of compression garment for upto 4 weeks prevents any lymphatic collections.

6. **How long is the discharge likely to persist post-surgery?**

   Blood tinged fluid leaking from the openings made during the procedure, can go on for upto 24 hours after. One advantage of this drainage is that there are no collections inside the fat compartment and the healing commences as soon as it stops. *Collection in the fat compartment after liposuction when all openings are sealed is a very common problem which can end in long healing phase and poor cosmetic result.*

7. **Can/should this procedure be done under general anesthesia?**

   It is beneficial to do this under local anaesthesia for patient benefit as there will be no need for long hours of fasting before and after the procedure. Also, this removes the need for hospital stay after the procedure.

8. **How early can I resume work post lipobodysculpting?**

   Most patients return to normal work-life within 48 hours of the procedure. This makes it least disruptive for the patient.

9. **When will the removed fat be injected?**

   For patients who desire to get fat grafted in their face or other body areas for enhancing their appearance, it is done at the same session (fresh fat injection gives the best results). The area’s best suited for donation of fat for grafting are lower abdomen, outer thighs and waist. Fat is least fibrous in these areas. The area to be injected is numbed again with more of the similar anaesthetic solution but in small quantities. It is cleaned and draped for the procedure. The fat injection is done using blunt tipped steel cannulas. Volume restoration is done gradually without depositing too much fat at any place. At all times the aesthetic appearance is of primary concern.
during the procedure. Excess fat deposits are difficult to get rid of unlike fillers which can be moulded or dissolved.

10. **How soon will I get a normal appearance post fat grafting and for how long it will last?**

Fat grafting gives a swollen effect for a few days after the procedure that resolves slowly within a week. The grafted fat is slowly resorbed over a month. At this stage the complete effect of the fat grafting is seen. It is advisable to repeat fat grafting in the area only after three months of the first procedure. Eventually, the grafted fat becomes permanent at the site unlike fillers which are always temporary.

11. **What are the post-operative precautions to be followed?**

Patients are advised to avoid exertion and exercise for at least two weeks following lipobodysculpting so as to allow the fat compartment to heal and prevent dislodging the grafted fat. It is advisable to maintain hygiene with gentle cleaning of the area treated. Moisturising creams are given to apply to help with maintaining skin health and healing.

12. **Who is likely to benefit most from this procedure?**

Lipobodysculpting gives the maximum benefit in those seeking body shaping. The ideal patient is one who has a Body Mass Index (BMI) less than 30. Placement of fat into the face for rejuvenation or under scars and other depressed surface areas due to disease gives very good long-lasting results.

13. **What are the advantages and disadvantages of Lipobodysculpting?**

Usually fat lost after dieting and exercise tends to come back. Lipobodysculpting results in permanent fat cell removal from areas of excess fat. Fat cells once lost cannot grow back. Hence this is a permanent body shaping procedure. Similarly, the fat cells grafted under the skin can survive for long periods. One disadvantage of fat grafting is that around half of all fat placed gets absorbed by body. So the procedure
of fat grafting needs to be repeated at three monthly intervals to achieve permanent effect.