

GENERAL INFORMATION

Liposuction is a surgical technique to remove unwanted deposits of fat from specific areas of the body, including the face and neck, upper arms, trunk, abdomen, buttocks, hips and thighs, and the knees, calves, and ankles. This is not a substitute for weight reduction, but a method for removing localized deposits of fatty tissue that do not respond to diet or exercise. Liposuction may be performed as a primary procedure for body contouring or in combination with other surgical techniques such as facelift, abdominoplasty, or thigh lift procedures to tighten loose skin and supporting structures.

Liposuction, also called Suction-assisted lipectomy, is a surgical procedure performed by using a hollow metal surgical instrument known as a cannula that is inserted through small skin incision(s) and is passed back and forth through the area of fatty deposit. The cannula is attached to a vacuum source, which provides the suction needed to remove the fatty tissue. Tumescent liposuction technique involves the infiltration of fluid containing dilute local anesthetic and epinephrine into areas of fatty deposits. This technique can reduce discomfort at the time of surgery, blood loss, and postoperative bruising.

ALTERNATIVE TREATMENTS

Alternative forms of management consist of not treating the areas of fatty deposits. Diet and exercise regimens may be of benefit in the overall reduction of excess body fat. Direct removal of excess skin and fatty tissue may be necessary in addition to liposuction in some patients. Nonsurgical external heating or cooling treatments may also be considered to reduce fat. Treatment with deoxycholic acid can also be considered. Risks and potential complications are associated with the alternative surgical forms of treatment.

SPECIFIC RISKS OF LIPOSUCTION SURGERY

Liposuction in General:

There is a possibility that large volumes of fluid containing dilute local anesthetic drugs and epinephrine that is injected into fatty deposits during surgery may contribute to fluid overload or a systemic reaction to these medications. Additional treatment including hospitalization may be necessary.

Fat/Air Embolism:

In rare cases, during or after liposuction and/or fat grafting, fat particles or air can enter the vascular system and can travel to the heart, lungs, or brain. This can result in significant complications including death.

Fat Necrosis:

Fatty tissue found deep in the skin might die. Fat necrosis may produce areas of firmness within the skin, hard lumps, localized tenderness/pain, or skin contracture. Calcifications and oil cysts may occur. Additional surgery to remove areas of fat necrosis may be necessary. There is a possibility that contour irregularities in the skin may result from fat necrosis.

Damage to Deeper Structures:

There is the potential for injury to deeper structures including nerves, blood vessels, lymphatics, muscles, and internal organs such as the intestines, liver, kidneys, spleen, and lungs (pneumothorax) during any surgical procedure. Injury to deeper structures may be temporary or permanent, and may result in significant illness or death.

Asymmetry:

Symmetrical body appearance may not result from a liposuction procedure. Factors such as skin tone, fatty deposits, bony prominence, and muscle tone may contribute to normal asymmetry in body features.

Ultrasound-, VASER-, & Laser-Assisted Lipectomy:

Burns: Energy may produce burns and tissue damage either at the location where the cannula is inserted into the skin or in other areas if the cannula touches the undersurface of the skin for prolonged periods of time. If burns occur, additional treatment and surgery may be necessary.

Cannula Fragmentation: Ultrasonic energy produced within the cannula may cause disintegration (fragmentation) of the surgical instrument. The occurrence and effect of this is unpredictable. Should this occur, additional treatment including surgery may be necessary.