

Liposuction (Liposculpting)

Liposuction (also known as liposculpting) is used to remove fat and contour areas of the body where it is difficult to lose fat through diet and exercise. It can be very effective in sculpting and defining these difficult areas.

Indications for liposuction

- Abdominal contouring
- Hip and flank contouring
- Back contouring
- Arm contouring
- Thigh, knee and ankle contouring
- Gynaecomastia (male breast enlargement) correction
- Submental (under chin) fat removal
- Breast reduction (in specific cases) and axillary/chest wall reduction
- Lipoma (fatty tumour) removal

Limitations of liposuction

- Liposuction is not a weight loss procedure. It is a body contouring procedure best carried out when you are at a stable weight with no planned changes in your weight.
- Liposuction removes fat from underneath the skin and relies on the skin “snapping back” to give a smooth contour. If too much fat is removed or there is poor skin quality or tone, then the skin may not snap back enough and there may be loose skin in the area after liposuction.

- If you have preexisting loose skin in the area you wish to have liposuction in, liposuction alone will not give the best result. In this situation combining liposuction with another procedure e.g. abdominoplasty or tummy-tuck in the abdomen or having the abdominoplasty instead of the liposuction will be recommended. (The specific procedure recommended will vary depending on the location and your individual situation.)
- Liposuction does not treat internal fat. It removes the fat underneath the skin but will not remove fat deeper in the body e.g. within the abdominal cavity. If this is suspected to be a limiting factor in your case, your surgeon will advise you of this after your assessment.
- There is a limit to how much liposuction can be performed in one sitting for safety reasons. This amount will vary depending on the circumstances but your surgeon will always put your safety first when planning surgery.
- Liposuction will not remove cellulite, stretch marks or scars
- Histopathology or histological analysis of liposuctioned fat cannot be carried out as the tissue is fragmented by the process

Procedure details

Pre and post surgery clinical photographs of the treated areas will be taken. Liposuction is carried out through very small incisions where fluid is infiltrated and then a suction cannula is used to remove the fat. A narrow metal tube (suction cannula) attached to a suction pump is inserted through the very small skin incisions and used to remove the unwanted fat by moving it through the area to be treated under the skin. Most surgeons inject a local anaesthetic and adrenaline solution beforehand to help reduce pain and bleeding.

Liposuction has the advantage of having very small scars and of being very effective in removing subcutaneous tissue. It does rely somewhat on the ability of the skin to snap back and this is something that varies from individual to individual and lessens with age.

Power or suction assisted liposuction is normally used. For very small areas, hand held syringes may be used. Variations of liposuction utilise ultrasound or laser to assist in breaking down and removing the fat.

Liposuction can be carried out under local anaesthetic (while you are awake) or general anaesthetic (while you are asleep) depending on the extent of the surgery planned and your wishes. Depending on the extent of surgery, you may be able to go home the same day or after one night in hospital. Liposuction is usually performed as a day case procedure.

Combination surgery

Liposuction is often combined with other procedures to give the best possible results for those procedures. Some common combinations include:

- Liposuction and abdominoplasty
- Liposuction and open correction of gynaecomastia
- Facelift and submental (under chin) liposuction
- Liposuction and thigh lift
- Liposuction and breast reduction
- Liposuction and brachioplasty (arm lift)

Post-operative course

You will have bruising and swelling in the treated area afterwards which will peak at day 2 to 3 and slowly resolve over the weeks following this. Most of this will go in the next 4 to 6 weeks but swelling can persist for up to 6 months especially in areas such as the ankles. You will have small scars in the areas the suction cannulae have been inserted and you often have some temporary numbness of the overlying skin. Some fluid may ooze from these areas in the beginning.

You will need to wear a compression garment for 4 to 6 weeks postoperatively. This helps to provide support to the skin and to keep swelling controlled.

Recovery

Most people return to work between 5 and 14 days depending on the extent of the liposuction and the nature of their work. Light activities can be resumed within 2 weeks and normal activities are usually unrestricted after 4 to 6 weeks.

Other points about liposuction surgery

Changes in weight following liposuction

The fat cells that are removed during liposuction are permanently removed. However, the remaining fat cells can increase or decrease in size if you gain or lose weight. It is important to realise that if you gain weight after liposuction, you can regain it in the areas treated by liposuction as before or in a slightly different pattern of weight gain than before. This is why liposuction is best viewed as a body contouring rather than a weight loss procedure and best performed when you are at a stable weight with no further weight changes planned.

Stretch marks and scars

Existing stretch marks and scars will not be removed by liposuction.

Ageing

The natural ageing process of the body continues regardless of surgery and so may over time alter your body shape and skin tone and laxity.

Amount of fat removal possible

Not all fat can be removed with liposuction. Some fat remains behind in liposuctioned areas and this gives a smoother contour afterwards. There are also safety limits regarding overall amount of fat that is safe to remove in one sitting. The exact limit that is safe to remove can vary from person to person depending on their size and weight and any medical conditions that they may have. Internal/visceral body fat e.g. inside the abdomen around your bowel or liver cannot be removed by liposuction.

Complications

Early complications (within the first week of surgery)

Bleeding (haematoma)

It is common to have some mild oozing from the surgical incisions for a few days following liposuction. If there is any suggestion that excessive bleeding after liposuction surgery has occurred, you may need to go back to the operating theatre to have the bleeding stopped and the wound washed out to evacuate the collected blood. This is very rare.

Infection

Rates of severe infection in liposuction are low. Minor wound infections or inflammation may occur - if it does happen, an infection will be treated with antibiotics. Rarely, a return to the operating theatre to wash out the wound might be required.

Blood clots

Blood clots in the veins of the legs (DVT - deep venous thrombosis) are rare after liposuction. Preventative measures are taken (such as calf compression stockings) if you are having a general anaesthetic. If a DVT does develop, you will need various investigations and treatment as appropriate. The risk can be reduced further by drinking plenty of water postoperatively and gently mobilising. A pulmonary embolus (PE) describes a blood clot that has broken off from the DVT and lodged in the blood vessels in the lungs. This can be serious (at times, fatal), and again, appropriate investigations and treatment are instigated should this be suspected after your operation.

Fat embolism

This is a rare complication of liposuction where fat can enter the blood stream and travel to other sites in the body. If the fat travels to the lungs and causes blockages there, it can have very serious implications for breathing and the heart and lungs. This can be fatal.

Perforation of the abdominal wall and internal organ damage

Specific to abdominal liposuction – there is a rare but serious risk of perforation of the abdominal wall, which can lead to internal organ such as bowel or bladder damage. While this is extremely rare, it can be serious and would require treatment with antibiotics and in a severe case, a further procedure by a general surgeon to correct this.

Perforation of the chest wall and internal organ damage

Specific to chest liposuction - the rare but serious complication of perforation of the chest wall, which can lead to internal organ such as lung damage. While this is extremely rare, it can be serious and would require treatment with antibiotics and at times a further procedure e.g. insertion of a chest drain to correct this.

Too extensive a procedure

When fat and fluid are removed, your body reacts by sending fluid from your circulation to the area. If too large an amount is removed this can lead to low blood pressure and the

need for intravenous fluid support. For this reason most surgeons limit the amount of fat that they will remove in one procedure. This is a very rare occurrence as your surgeon will have planned your surgery with your safety and well-being at the forefront of her mind. The amount of fat removed will be monitored throughout the procedure.

Intermediate complications (within 6 weeks of surgery)

Delayed wound healing

In some people the wounds take longer to heal than in others: this may be due to having had a mild infection of the wound, due to a reaction with the stitches or from “overdoing it” straight after surgery. Normally this is a minor inconvenience, which can be managed with observation or special dressings as an outpatient. Occasionally it can lead to a troublesome infection developing as described above.

Wound dehiscence

Occasionally an incision can open or gape. This is normally only a very small area and can be managed by observation and wound care. It usually does not leave any lasting problems. Rarely, the wound may need to be resutured.

Persistent swelling

Some swelling to the liposuctioned areas is normal after a liposuction operation. Most of the swelling usually resolves during the first 6 weeks after surgery. In some cases it can be more severe and persist longer than usual.

Asymmetries and irregularities

While no-one is perfectly symmetrical, and no two sides of the body are 100% symmetrical, every effort will be made to achieve good symmetry after your surgery. However, there will inevitably be subtle differences between each side. Occasionally there are significant asymmetries and irregularities that need to be addressed with further surgery (a revision operation).

Numbness or hypersensitivity

The skin of the liposuctioned area may be numb or over sensitive in the aftermath of surgery. The feeling usually normalises eventually but can take several weeks or even months in some cases. Occasionally normal sensation does not return completely.

Late complications (more than 6 weeks from surgery)

Poor scar formation

Scarring will occur whenever the skin is cut and of course, every effort is made to place scar lines where they will heal well and be least visible. Although scarring on average is minimal, scar maturation varies from person to person and occurs over 6 to 12 months, with scars passing through a red, itchy and lumpy phase, prior to settling down to thinner, softer less distinct lines. Normally the scars from liposuction surgery heal well and are barely perceptible but occasionally, they may tend to thicken and may require steroid injections to help them settle down. In some cases, minor surgical scar revision surgery may be needed. Hypertrophic or keloid scars can occasionally occur – these are thickened and lumpy scars that are more common in people of Asian or Afro-Caribbean descent. Occasionally a stretched or indented scar may form.

Loose skin

The skin may fail to snap back especially if a large amount of fat is removed. If this fails to settle, it is usually only corrected by skin excision procedures e.g. in the abdomen, an abdominoplasty or tummy tuck procedure. Pre-existing loose skin, skin with poor tone or elasticity, skin with stretch marks, skin after large weight loss and older skin are at higher risk of loose skin after liposuction.

Contour irregularities

Occasionally small contour irregularities can become apparent after liposuction. Sometimes these settle with time and tissue massage. Rarely, further surgery (liposuction or lipofilling) is necessary to correct this.

Chronic pain

Occasionally patients suffer from chronic pain after surgery. This is not always predictable or easily treated. It is more likely to occur if you suffer from severe or complex pain prior to your surgery. Further surgery or referral to a pain specialist may be indicated in this situation although it must be appreciated that there is not always a surgical solution to chronic pain.

The sub-optimal result

Despite performing the operation as accurately and carefully as possible, some people will feel that their result is not exactly as they were hoping it would be. This may be due

to one of the problems described above occurring or due to unrealistic expectations of the surgery e.g. mild asymmetries, some residual fatty tissue or less than expected definition of the area which has had liposuction or due to weight gain after having liposuction surgery. It is important that you discuss your expectations in advance of the surgery so that you can understand what to realistically expect from the surgery in your particular case and so this situation is avoided as much as possible. (Additional costs may be incurred for further procedures.) Should you be left with a sub-optimal result, this will be discussed with you along with the subsequent appropriate treatment options. Treatment may include revision surgery.

Longevity of procedure

Liposuction surgery has a high success rate and is considered an excellent procedure for contouring the body.

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The natural ageing process of the body also continues regardless of surgery and so may over time alter your body shape.