

Liposuction

Dirk Lazarus, June 2009

LIPOSUCTION is a surgical procedure used to reduce localised fatty deposits which do not respond to diet or exercise. It is not a treatment for obesity, a method of losing weight or an alternative to a healthy lifestyle. The surgery is best performed if you are at, or close to your ideal weight for height. Liposuction = liposculpture = suction assisted lipectomy. Liposuction is a re-shaping procedure to allow you to feel more comfortable with your body, to fit into clothes better, etc.

In women I commonly treat tummy, love handles, saddlebags (outer thighs), inner thighs, knees, buttocks, back, arms, neck. In men the common areas treated are the chest, tummy and neck.

Some Pre-Operative Advice

If you are a smoker, you should try to stop smoking 1 week before surgery and avoid smoking until healing is complete. If you are on any medication, please inform us (this includes the oral contraceptive pill). Avoid aspirin containing drugs before and after surgery. *Arnica*, a homeopathic remedy, may help to diminish bruising and swelling in the area, but it should only be started on the second postoperative day, as it can increase the risk of bleeding if taken early. It is available from health shops. No specific diet or exercise program is required prior to surgery although the closer you are to your ideal weight, the more satisfactory the outcome is likely to be.

Prior to surgery arrange to have plenty of clean linen and towels - some fluid tends to leak out post-operatively and you may need to change soiled linen. Also ensure that you arrange for someone to drive you home from the clinic and to look after you on your first post-operative night. Make sure that for a few days after the surgery you have as few commitments as possible so that you can recuperate in peace.

Drink plenty of fluids the day before surgery. These days I also suggest, especially for patients who are flying in a few days before surgery, to go for a long walk the day before surgery. This should help prevent leg clots.

Hygiene is obviously important and you should bath or shower on the morning of surgery.

On the day of surgery you should be fit and healthy. You should not be suffering from a cold, flu or any other illness. If you think you might be anxious the night before surgery, or if you want something to help you sleep, ask for this beforehand and it will be prescribed.

Anaesthesia and Surgery

I do almost all liposuctions as day case surgery in my own ambulatory surgical facility. On arrival at the clinic on the day of surgery, you will be given a sedative tranquiliser as a pre-med. An anaesthetist will then put up an IV drip through which she will give you a cocktail of drugs to keep

you asleep, pain-free and unaware. This is twilight or conscious sedation and differs from general anaesthesia in that no tube will be put down your throat and no paralysing drugs or gases will be given. This allows a quick recovery with a minimal hangover effect. In addition to the sedation, most patients (usually not men) will receive a spinal injection in the back. While similar in some ways to an epidural that you might have had with the birth of children, it is not as difficult or painful as when you are at the end of pregnancy. The spinal injection will numb and paralyse you from below your breasts for about 4 hours. In addition to the twilight and spinal, you will receive large volumes of local anaesthetic, usually 2-4 litres, which is the so-called super-wet or tumescent technique.

Incisions are small (5 mm, quarter inch) and are camouflaged in natural body lines to leave fine, inconspicuous scars. Multiple incision sites will be used to minimise contour irregularities. Suction is performed with thin cannulae (2-4 mm) to minimise contour irregularities. Fat removal is done until the desired shape is reached. The endpoints of liposuction are when the aspirate (what one liposucks out) becomes bloody. For day case surgery in my ambulatory facility, I do not like to remove over 3kg (3 litres) of fat. This is to minimise risks for safety reasons.

Recovery

You should drink plenty of fluids and pass lots of urine for the first 24-48 hours following surgery. Also, although you should rest up, you should try to mobilise: in other words, sit in a chair or walk around a little. This not only helps to mobilise fluid and thus reduce pain in the areas treated, but also prevents the development of leg clots.

Post-operatively you can expect some pain and discomfort for which we will give you pain killers to take home. Pain thresholds vary from patient to patient – some patients are fine after a few days, others need a week or two.

You will be leaky. The cuts for lipo are left open to allow the fluid to drain out and this fluid becomes blood stained. The leakiness will last a day or two. You should plan ahead and have some towels and spare linen.

Bruising will last 2-3 weeks and in some patients can be quite marked. Bruising tends to gravitate downwards and so may affect your genitalia or the areas below the pressure garment.

Swelling tends to last a little longer and slowly subsides over 3-4 weeks. As a result of the swelling, you will actually be heavier after surgery and may not fit into your usual clothes.

Some patients experience emotional changes after surgery, perhaps some depression or tearfulness. This generally resolves as your recovery proceeds.

Final appearance is really only achieved months after surgery when each little liposuctioned tunnel shrinks down. For all surgery, an exact end-result cannot be predicted due to uncontrollable factors such as how you scar, etc.

If, following surgery, you maintain a healthy lifestyle, a sensible eating plan, perform moderate exercise and maintain your weight, you will be satisfied with the long term results.

Driving can be resumed when you are moving easily, usually by about a week after surgery. A few days to a week off work is usually all that is required. Gym and exercise can be resumed after about 3 weeks, but your body will tell you. Moving around after surgery is a good thing – it will allow fluids to mobilised. You are not going to damage or break anything by moving around. Spending too much time on your feet early on, however, will lead to ankle swelling and should be avoided. If you do develop swollen ankles, a good exercise is to lie flat on the floor with your bottom close to the wall and your legs pointing up and leaning against the wall.

Pressure Garments

Pressure garments help dissipate the swelling and will improve your comfort post op. For women who have the usual lipo of thighs and perhaps tummy and love handles, I prefer to use a firm fitting pressure garment which extends from below the breasts to below the knees. The garment is made from a corset-like material and fastens with zippers or clips. The garment should be firm-fitting, but not constrictively tight. You will need to wear the garment for 3 weeks day and night and thereafter for a further 3 weeks day or night. Garments may be off-the-shelf (we sell them), or you can get them custom made by an occupational therapist experienced in this. I recommend two garments so that one can be worn while the other one is washed.

For tummy lipo, we will give you a tummy binder which I recommend you wear for about 3 weeks.

For neck lipo, we will give you a neck binder which you need to wear for about a week.

Check ups

Usual follow ups are within a day or two of surgery (patients operated on a Friday will be seen on the Monday as their first visit), a few days after that for a change of dressings and about a week later. Additional or further follow up is arranged as is needed. For local patients I will usually see you at 3 months post-op and a year post-op. I have an open door policy after surgery – if you have any concerns or want a check up, I will see you without charge.

Patients who are not from Cape Town will usually be seen for three post-operative visits prior to their departure home. The usual minimum recommended duration of stay post-operatively is 2-3 weeks. Longer is better. If you return to Cape Town, I would like to see you for a check up and will not charge for that.

Risks and complications

All surgery carries the potential for risks and the possibility of complications. Risks, however are low and complications are rare. Minor complications are more common than major complications. If a complication occurs then my policy is to aggressively manage it. This may not need surgery, but certainly I will want to see you more frequently to ensure that your recovery goes as smoothly as possible.

If performed by a Plastic Surgeon under proper conditions on a healthy patient, liposuction is a relatively safe procedure. Major problems such as kidney failure, leg clots which migrate to the lungs, fat emboli and damage to underlying structures are possible, but very rare.

The commonest complications are minor persistent swelling and bruising and some degree of sensory change such as pins and needles or numbness. This is usually transient and resolves in a few weeks to a few months.

Contour irregularities can occur and include bulges, dimples, furrows, steps, etc. Excess fat or too little fat may be removed. The skin may not re-drape tightly enough to the new shape. Cellulite is not improved by liposuction.

Pigmentary problems can occur especially if you go in the sun while still bruised. Sun exposure can fix the pigment in the skin and is to be avoided.

Most patients form inconspicuous scars. Red, raised, hypertrophic or keloid scars can occur, but rarely.

In general complications are rare, especially the major complications. Liposuction is one of the safest procedures performed on a daily basis by plastic surgeons.

1. **Anaesthetic related problems:** All surgery and anaesthesia carry a risk. That risk is probably equivalent to the risk of flying
2. **Bleeding:** The risk of bleeding is low. Bleeding needs to be differentiated from leakiness – the infiltrated 3l or so of wetting fluid which becomes blood stained and leaks out.
3. **Infection**
4. **Wound healing problems:** With lipo, because the cuts are so small, this is usually just some redness around or of the cut, which gets better but may take a little longer.
5. **Sensory changes:** Usually numbness or increased sensitivity which can take months to recover.
6. **Scars:** How well you scar is largely a function of your skin type. Some people just form bad scars. In the early part of the healing process, the scars may be red and raised, but after a few weeks this will settle down. To minimise the scarring response in the wound you should tape the wound with micropore tape. The tape should be applied and then left in position along the scar until it starts to peel off – usually after a week or ten days. The tape should then be removed and re-applied. For optimal scars you should continue this until the scar is no longer red or raised – usually a period of 6-12 months.
7. **Damage to underlying structures:** Rare, but possible complication.
8. **Cosmetic problems:**
 - a. **Not enough off** is perhaps the commonest complaint, but if you are living a healthy lifestyle (in terms of what you eat and how much exercise you do) then you should be satisfied with the lipo. Also, you need to have realistic expectations as to what the lipo can achieve and if your expectations are achieved by surgery, then you are likely to be happy.
 - b. **Contour irregularities:** Lumps, bumps, dents, etc. A lump is easier to fix than a dent because a lump can be reduced by a lipo revision, while a dent may need fat grafting to fill it.

- c. **Asymmetries:** These can occur and if you have an underlying asymmetry that is not detected or treated then this can become worse if equal amounts are removed from each side.

Liposuction requires a degree of artistry and while I have a relatively good artistic eye and ability, I am only human.

- 9. **Emotional changes:** Prior to surgery you are healthy, but surgery induces the sick state – you will be sore, bruised, swollen and tender. You will need downtime and not be able to do the usual things you do for a few days. These changes can affect some patient's moods and you may find that you become tearful or depressed for a few days post-operatively.

For all surgery

Please note the following points:

The practice of medicine and surgery is not an exact science. You should therefore understand that no guarantee or assurance can be given as to the results that may be obtained. Even reputable practitioners cannot guarantee results.

The two sides of the human body are not the same and can never be made the same.

Complications are rare and complications requiring revision surgery even more rare. If complications occur, then this is usually soon after surgery. Complications will be dealt with as appropriate and generally aggressively managed, but most complications will end up healing and improving as time goes by.

Will the new shape last?

Liposuction is a highly effective technique for giving you a new body contour with very little scarring. The fat which has been removed from your body at the time of liposuction is permanently removed. If you maintain a healthy lifestyle following the surgery and your weight remains constant, your shape should remain the same, the bulges should not reappear and you should be satisfied with the procedure. Up to 10-15% of patients elect to have a second procedure to remove more fat or to have some further shaping done.

Most patients are satisfied with the results of their liposuction – they feel more at ease with their bodies and more comfortable in a wide variety of clothes. As long as your expectations are realistic, you should be happy with your new shape. Liposuction is one of the safest and best cosmetic procedures. The effects are long lasting, the scars minimal and the complications rare.