

AUTOLOGOUS FAT TRANSPLANTATION IN AESTHETIC BREAST RECONTOURING

¹G. MABEL GAMBOA & ²SUN TSOHEISH

¹Professor at Georgia Health Sciences University, Augusta, Georgia, USA, 1467 Harper Street HB 5040, Augusta, GA 30912, USA

²Georgia Health Sciences University, Augusta, Georgia, USA, 1467 Harper Street HB 5040, Augusta, GA 30912, USA

ABSTRACT

Reconstructive techniques using flaps, implants have led to vast improvements in the result of reconstructive surgery. To further improve the cosmetic outcome we have applied the technique of autologous fat transfer, which has proven to be a very successful treatment for reconstructive breast surgery.

Objective: The authors report their experience with large volume free fat transfers for breast reconstruction.

Methods and Techniques: From June 2004 to October 2011, 36 sessions of autologous fat transfers were undertaken in 18 patients with 10 receiving fat grafts in both breast. To improve the cosmetic outcome and to repair the contour deformities, 36 fat transfers were done at the superior and medial perimeter, 9 at the area of the wrinkling around the implant.

Technique: Tumescence technique was used to harvest the lipo-aspirate for immediate transplantation after decantation. The cannula used to aspirate and to transfer the fat was 3-4 mm through two small incisions which was performed in the chest outside of the area of fat transfer. The fat donor area was the abdomen, the mean value of the fat transfer was 259cc (range 95-530cc)

Results: Eighteen patients underwent 36 fat transfer procedures that mean follow-up procedures were 15 months ranging from 4 months to 54 months. The average age was 55 years (range 47-70 years) 10 patients (55%) underwent bilateral fat transfer, 4 patients underwent a second fat transfer procedure, one for asymmetry correction, and the other for previous under corrected contour deformity. The average interval between repeat fat transfers was 22 months (range 6-38 months).

The indications for fat transfer were superior and medial perimeter defect in all the patients (100%), Implant Wrinkling in 9 patients, to increase the soft tissue thickness in 8 patients. There were no reports of the postoperative cellulites or fat necrosis, one patient had persistent asymmetry, 2 patients improved the post radiation pigmentations.

Conclusions: Autologous fat transfer is a safe, simple, reproducible method for correcting tissue deformities following post mastectomy reconstruction. All patients were satisfied with the soft natural appearing.

KEYWORDS: Fat Transfer- Breast Reconstruction Was Presented at the South Eastern Plastic and Reconstructive Surgery Meeting