



Lowe Plastic Surgery (LPS)

Dr. Lowe's Facts about Fat Grafting and Transfer

How do I get started?

It is important prior to surgery for patients to spend some time educating themselves about the pros and cons of fat grafting or transfer. Although patients who undergo fat transfer are typically happy, this elective operation is not for everybody. The big risks of surgery are pain, bleeding, contour irregularity, swelling, and under-correction of fat. Read the educational materials provided and on our website including consent forms prior to your surgery. Make sure that your surgeon is Board Certified by the American Board of Plastic Surgery, a member of the American Society of Plastic Surgeons (ASPS) and American Society for Aesthetic Plastic Surgery (ASAPS). Please check out websites and links at: www.drjlowe.com

Should I have fat Grafting or transfer?

Patients with localized soft tissue defects, minimal weight changes, little tissue redundancy, or areas of deflation or contour irregularities are usually the best candidates for fat transfer. However, fat transfer can be an excellent addition to any contouring procedures. Patients considering fat transfer need to decide if the risks are worth it or not? Fat grafting requires 2-3 treatments for reliable results in most cases. In fact fat grafting is best suited a secondary procedure for patients undergoing other operations. Typical areas fat is injected is in the face, cheeks, lips, trunk, and buttock. The fat is usually harvested from areas like the neck, abdomen, flank, and thighs. Once the fat has been transferred about 50% stays and about 50% is absorbed. It is best for patients to avoid weight change the first several months after the procedures. Garments are required to control swelling and re-drape the skin and soft tissue in the harvest areas after the procedure. Dr. Lowe combines fat grafting or transfer with a number of cosmetic and reconstructive procedures to ensure the best results. A frank discussion with a board certified plastic surgeon will help patients make the right decision about this procedure.

If fat grafting covered by health insurance?

Fat grafting is by definition is a cosmetic surgery procedure. It is not covered by insurance as a stand-alone procedure. Some patients have contour irregularities following reconstruction that may be treated with fat transfer but this is included in revision medical coding. Dr. Lowe will often use fat grafting during breast reconstruction, scar revisions, or flap reconstruction and it is not considered cosmetic in these situations. Many patients undergoing medically covered procedures choose to pay for fat grafting to enhance the cosmetic outcome. Patients are encouraged to look at photos of fat grafting and transfer online or in our office before surgery. Dr. Lowe will discuss these issues during the course of the consultation and consent process.

What is the difference between fat grafting under local or general anesthesia?

There are a number of different ways to perform fat grafting or transfer. Most plastic surgeons performing significant fat grafting prefer patients to be under anesthesia to ensure patient comfort and safety. Isolated areas of fat transfer may be performed under local anesthetic. Local procedures require preparation and local injection that can be well managed in certain areas. In our practice fat grafting procedures are priced based on time and complexity. Patients requiring less work and time are rewarded by a smaller fee. Patients rarely complain of significant pain following fat grafting regardless of the technique. A consultation with a board certified plastic surgeon, allows patients to determine the technique best suited for them.

What is the best technique for fat grafting or transfer?

There are a variety of techniques used to remove, graft, and transfer fat. Most techniques are about surgeon comfort and ease than about outcomes. Legitimate fat transfer techniques include: harvest, washing, concentration, and re-injection. All approaches have failed to be completely effective or predictable to date. Every year a technology or marketing tool is introduced and every year many approaches are disproven. The problem with certain techniques is they sound good but are very expensive, and patients often fail to see better results. If it sounds too good to be true, it is too good to be true. We have been performing fat transfer procedures for over 15 years and have found our technique to be quite predictable in most cases. There are many technologies and fillers that hold promise now and in the future. It is hard enough to get consistent, lasting, and satisfactory results even with scientifically proven techniques. The best technique depends on the patient's anatomy, preference, and willingness to compromise. Many patients combine fat grafting with other procedures such as facelifts, tummy tucks, breast enhancement, or liposuction. A consultation with a board certified plastic surgeon can help patients choose the best option.

Is there a way to know to predict the results of fat grafting or transfer?

Temporary fillers (i.e. Juvederm or Restylane) are a good way for patients to determine if permanent filler like fat might be right for them. If a patient has undergone application of a temporary filler and they would like a more permanent result fat grafting is the best long term option in most cases. In many cases, fat grafting can address defects that are too large for a temporary filler to handle. Patients should talk to a board certified plastic surgeon to help determine what to expect before and after fat transfer.

Will other people know I had fat grafting or transfer?

The results of fat grafting are usually subtle with the first several applications. Patients do tend to look overdone if the treatments are repeated too many times. Dr. Lowe always tries to achieve a subtle improvement of youth. All fat grafting procedures require access through small incisions in the skin for harvesting fat and injection. The injection sites are very small, placed in natural skin creases, and are the size of a needle stick. Dr. Lowe will review scar treatment once the incisions heal. Scars typically look the worse at 2 months and then improve by 6 months. It is better to over treat an area with fat transfer than to under treat it. Contour irregularities can be seen due to surgeon error, complications, fat necrosis, or patient genetics (some patients just scar more). The best way to avoid evidence of fat grafting is to follow post-operative instructions on message, diet, and wound care. Patients require multiple treatments in most cases to see ideal results. On occasion one application of fat is enough, but most patients prefer 2-3 applications when given the opportunity. Patients should understand that simply transferring more fat will not result in better results or decrease the need for future applications. Only a limited amount of fat can be grafted to any one area at a time. Patients should have a frank discussion with their plastic surgeon to help them make the right decision about their treatment regimen.

Does the effect of fat grafting or transfer last forever?

The results of fat grafting do last forever. Adult patients have a set number of fat cells, and when those cells are removed from one area they are gone forever. Unfortunately, the other fat cells can enlarge to fill the space. Large weight gain following fat harvest can result in contour irregularities in unusual areas. Patients are encouraged to lose weight before surgery and avoid weight gain after surgery. Patients who loose even a small amount of weight after liposuction are proven to be significantly more satisfied. It is noteworthy that there are isolated fat deposits, in the flank, abdomen, or thighs that may have a higher transfer rate. In most cases, patients can expect 40-50% of the fat transferred will last forever.

Does future fat grafting surgery cost a lot?

The cost for future applications of fat is based on time and complexity. Patients are always encouraged to combine fat grafting or transfer with another operation. By combining surgical procedures there is a decrease in cost. It is important to note that the processing and preparation of fat for transfer is time consuming. Your plastic surgeon could perform another indicated procedure while the fat is being processed and prepared for injection. Great results require multiple treatments. Many patients will space fat grafting out over time to fit into their schedule and budget. Future treatments are less time consuming in most cases and can be performed under local anesthetic with sedation in some cases.

Does revision surgery cost a lot?

Fees are limited for patients who experience minor complications following fat grafting when returning to the original surgeon. Most revisions can be address with a simple in-office procedure performed under local anesthetic. Patients should follow post-operative instructions closely and wear garments religiously to limit revision rates. Patients should wait for 4-6 months to fully judge clinical results. Dr. Lowe performs a number of revisions on patients who are unhappy with a previous surgeon. Most of these patients had fat grafting at a spa or with a poorly trained "cosmetic surgeon." Dr. Lowe recommends patients first return to their board certified plastic surgeon to discuss common concerns and minor complications. Patients should talk to their surgeon about the risks and potential complications of elective fat grafting or transfer.

Where and when should I have fat grafting surgery?

One of the most important decisions for patients considering fat grafting is where and when. Significant fat transfer procedures are performed at a surgical facility with home care. There is very little benefit of an overnight stay at a hospital unless other procedures are performed that require overnight pain management and care. Patients in a surgical facility will be given a period of recovery and then go home the same day. In general, isolated fat grafting procedures of are best performed in outpatient setting. Most patients require very little assistance at home the day after the procedure, feel better at one week, and recovery fully

by one month. Although Dr. Lowe performs most fat grafting in his office based surgical center, each patient should make their own decision of when and where they should have surgery.

What are the restrictions after surgery?

The recovery from fat grafting is usually predictable. Patients are asked to limit activity for 2-3 weeks after surgery. Patients wear a support garment or girdle for 2 weeks day and night and for two weeks at night thereafter. Some patients require drains to help decrease fluid collection and control swelling. Most drains used in this situation stay for 1-2 days, but bigger surgery may require drains for longer. Sutures usually stay in place for 2-3 weeks and fall out on their own. Patients will not be able to see the full results of fat grafting for several months. Patients report swelling, numbness, contour irregularities, and minor pain for up to 6 months after fat transfer.

What about patient safety?

There are a variety of safety concerns related to fat grafting or transfer. Many of the concerns are related to post-operative swelling and have been reviewed. However, in most cases the safety of fat grafting or transfer is most dependent on the surgeon and facility. Fat grafting is an elective operation reserved in for patients in good health in an outpatient setting. Dr. Lowe is a real plastic surgeon, who performs real surgery, in a real surgical center. As a member of the American Society of Plastic Surgeons (ASPS) he is required to follow guidelines designed to ensure the best patient safety and outcomes. Dr. Lowe proudly performs cosmetic surgery in accredited hospitals and surgical facilities. Most of his cosmetic patients undergo surgery at his certified in-office operating suite, Associates Surgery Center of Oklahoma (ASCO). ASCO is fully certified by the American Association for the Accreditation of Ambulatory Surgery Facilities (AAAASF). For further information about safety and credentials go to: www.AAAASF.org or www.drjlowe.com

Should I wait and think about my options?

Fat grafting or transfer is an important lifestyle decision. Although the procedure carries limited risks, the visible benefits can be subtle. Patients require a period of recovery, diet, massage, and compression. Patient should choose a board certified plastic surgeon that they trust, takes time, reviews risks, and puts safety first. One of the most important aspects of the procedures is patient care and follow-up. Although surgeons cannot pay all the cost of revision it is usually best to stick with the surgeon you choose to ensure the best outcome at the best price. When possible, patients should talk about their plans with physicians, family members, and significant others. Patients should have realistic expectations regarding the surgery, recovery, and results. Fat grafting or transfer is often the right thing for the right person

What are Dr. Lowe's take home points?

1. Review your plastic surgeon's results (look at pre & post-op photos).
2. Fat grafting results are evident by 2-3 weeks, but the final result takes 2-4 months.
3. Understand risks (contour irregularities, stiffness, asymmetry, and swelling).
4. Control weight before and after fat grafting (do not gain weight after surgery).
5. Fat grafting requires 2-3 treatments for best results. It is difficult to over-correct.
6. Patients who like temporary fillers (i.e. Juvederm or Restylane), usually like fat grafting.
7. Most fat grafting or transfer is associated with 2-3 weeks of swelling and limited pain.
8. Fat grafting is best performed with another procedure (i.e. liposuction or breast enhancement)
9. Surgeon and facility certification and safety matters.
10. Pick and stick with your surgeon when possible.