

Brazilian Buttocks: Fat Grafting Technique Standardization.

Alvaro L. Cansanção, MD

Background: The buttocks is considered one of the main expressions of feminine beauty and sensuality, Aristotle said that the rounded shape of the buttocks was the most beautiful form of the human body.

The demand for aesthetic procedures in order to improve the appearance of this region is increasing more and more, this surely is a booming segment of plastic surgery.

Materials and Methods: The author presents a standardization methodology for gluteal fat grafting. Fat collection is done in a closed system using a PAL^{1,2} (Vibroliposuction). Fat grafting is also done assisted by the PAL device with an adapter specially developed, that permits to connect it to any cannula. Reinjection is done using a system developed by the author that permits the reinjection without fat manipulation. Reducing the risk of exogenous contamination.

The procedure is performed by dividing the gluteus in five subunits (upper, central, medial, lateral and bottom). Grafting is carried out homogeneously in a proportion of (2: 3: 1: 1: 1 cc, respectively). We end the procedure with the treatment of possible asymmetries or alterations, diagnosed preoperatively, which require overcorrection in any of these segments.

To analyze the effectiveness of this methodology we studied 85 consecutively patients submitted to fat grafting using this technique, evaluating its reproducibility, symmetric, safety, complications, volume maintenance and patient satisfaction compared to traditional fat grafting

Results: This Brazilian Butt lift methodology allows us to perform the procedure with more comfort, safety and confidence since the procedure is very homogeneous, and easily reproducible.

There were no cases of complications such as seroma, infection, lipo necrosis, skin necrosis, embolism or others.

The absorption of fat shows up less than 10% of the volume (measurements are done using ultrasound), but it still needing a longer follow up to confirm this result.

All patients are satisfied with the appearance of their buttocks, reporting improvement in the form, consistency, projection, angulation of the gluteus, small ptosis and in the quality of the skin. which has done the demand for this procedure increase by 300% in my private practice.

We also observed that this standardization has made teaching this procedure for residents, much easier, making them more confident to perform and permitting then to obtain good results even with little experience.

References:

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