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Real Time Ultrasound Assisted Gluteal Fat Grafting: Increasing Safety in Gluteal Fat Augmentation

**Presenter: Alvaro Luiz Cansancao, MD**

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**BACKGROUND:** The number of gluteal fat augmentation procedures has increased recently and so as the number of complications. Because of the increased risk of morbidity and mortality when fat is injected intramuscularly, not knowing where fat is injected is concerning. We sought to identify the planes in which fat is injected during the procedure.

**METHODS:** We selected 15 consecutive females who desired gluteal fat augmentation. All patients had epidural anesthesia and the gluteal region was infiltrated with a vasoconstrictive solution. With the patient in prone position, an ultrasound probe placed on the buttocks was used to identify the fascial layers. While decanted fat was being injected with a blunt cannula, the images were projected wirelessly to a screen, so that the surgeon and assistant could follow the planes in which the cannula was being introduced and the fat injected.

**RESULTS:** The mean volume of harvested fat was 3533 ml and the mean volume of fat injected per gluteal region was 528 ml. The evaluation of the depth and location of the cannula was performed in real time with the ultrasound, accurately and reliably identifying the planes of fat injection. All injections were subcutaneous. The downsides of this technique were the purchase cost of the ultrasound device, increased surgical time, the need for an assistant to follow the cannula and the probe constantly and the learning curve.

**CONCLUSION:** Real time ultrasound assisted gluteal fat grafting is reliable and may avoid injuring the deep vessels, further decreasing the risks of major complications.

Gluteoplasty with FAT Transfer Experience with 200 Consecutive CASES

**Presenter: Foued Hamza, MD**

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**INTRODUCTION:** Buttocks, are considered a symbol of beauty, and fat transfer in this area is one of the technique that can improve it.

The augmentation gluteoplasty with liposuction and fat grafting depends not only on the projection and the volume in a specific area but also, on the correction of proportions in adjacent areas.

**METHODS:** The female waist-hip ratio of around 0,7 is reachable through liposuction and fat grafting.

A total of 200 female patients was included in this study between 2012 and 2016. Age ranged between 20 and 58 years old.

The volume grafted to the buttocks ranged between 360 and 1300 cc in each side.

**RESULTS:** Post operative results and complications were recorded, and satisfaction with buttock shape was estimated by a patient questionnaire and pre and post photographs.

**CONCLUSION:** This technique is simple with lower morbidity and excellent results.

A good result depends on the harmonious combination of fat elimination by liposuction and fat grafting to the buttocks with long lasting results.

Nanofat+Prp Vs Prp in Androgenic Alopecia. An Intra-Patient Case-Control Study
**Presenter: Michelangelo Vestita, MD**

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**PURPOSE:** The many proprieties of nanofat in regenerative and aesthetic surgery are just being discovered.1-3 The purpose of this study was to investigate the efficacy and safety of nanofat associated to platelet rich plasma (PRP) in androgenic alopecia when compared to PRP only.

**METHODS:** We enrolled 24 consecutive male patients affected with androgenic alopecia at our private practice. Patients were excluded if they were or had been under treatment with oral finasteride or laser or injectable treatment for hair regrowth in the previous 6 months. Patients under topical minoxidil (2% or 5%) were given a wash out period of 60 days. In each patient a case and a control area of comparable dimensions were randomly selected. Each patient was given a single injection session of nanofat+PRP, following the microbolus technique over the case area of the scalp. The control area was treated with PRP only. Nanofat was obtained from the liposuction aspirate using the Tulip Nano™ kit device. PRP was obtained using the Prosys™ PRP biokit.

Each patient underwent trichoscopy of the marked case and control areas and a thricogram examination (assessing hair density and thickness) at baseline, and then 1, 3, 6 and 12 months after treatment by a blinded physician. Patient satisfaction VAS scores for case and control areas were also recorded at the post-treatment visits. Adverse events were noted at each follow up.

**RESULTS:** Each treated area in every patient showed an increase in density and thickness of hairs at the trichoscopy examination, significantly superior to the control area, starting at the 3 months follow up, peaking at 6 months, and partially recurring at 12 months. The patient satisfaction VAS increased similarly, with max mean value at 6 months and decreasing at the 12 months follow up.

**DISCUSSION:** Many therapeutic solutions for androgenic alopecia fail or deliver temporary improvement.4 We recently demonstrated that nanofat is superior to no treatment in a case-control experience.5 Our new study indicates a significant and enduring response to treatment with a single session of nanofat+PRP in androgenic alopecia in male patients, significantly superior to PRP only. At 12 months the results partially persisted. Considering that these patients were treated with a single session of nanofat+PRP and were not under any other treatment for androgenic alopecia these results are notable. No adverse events were recorded during our observation. Further controlled studies will be needed in order to validate our preliminary results.

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**Modified Conchal Cartilage Sandwich Graft Method for Repair of Split Ear Lobe**

**Presenter: Rajiv Agarwal, MD**

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**AIM:** Split ear lobe repair is one of the commonest request in cosmetic facial surgery. Frequently, the ear lobe split is prone to recurrence following surgical repair. A new technique is described which strengthens the ear lobe tissues using locally available conchal cartilage to prevent recurrence.

**MATERIALS AND METHODS:** 48 women in age range from 18 to 62 years with varying grades of split earlobe