bosis rate in a retrospective series of patients who underwent large-volume liposuction and received chemoprophylaxis with low-molecular-weight heparin.¹⁹ In 2011 the ASPS Venous Thromboembolism Task Force recommended risk stratification based on the 2005 Caprini scale for patients undergoing liposuction and the need for low molecular weight prophylaxis.²⁰ These guidelines should be incorporated by all plastic surgeons in their practice.

Although indirectly related to liposuction, the topic of fat transfer is among the most current and still debated topics in plastic surgery, despite initial investigations going back more than 25 years. Fat transfer may be performed as a primary procedure (e.g., breast or buttock augmentation), as an adjunct (e.g., face-lift surgery or breast reconstruction), or for the potential of "stem cell" therapy.²² Adipose stem cell pluripotentiality and unlimited capacity for self-renewal, represents a great promise for tant Plastic, Reconstructive and Aesthetic Surtissue engineering. Cell-assisted lipotransfer is a novel approach to autologous fat transplantation in which adipose-derived stem cells are attached to the aspirated fat.²⁴

The "holy grail" for body-sculpting technology is non-invasive technologies that minimise tissue morbidity, decrease downtime, and increase skin contraction/tightening, which lessens the need for skin excision by way of surgical intervention. This has led to a new industry: non-invasive body contouring.²¹ In this regard are non-invasive technologies as cryolipolysis (e.g Zerona[™], Coolsculpt[™]), high-intensity focused ultrasound – HIFU (e.g Liposonix[™]) and radiofrequency devices (e.g BodyFXTM) for fat cell disruption and lysis.

The proven benefit of liposuction as an adjunct in procedures such as abdominoplasty, breast

reduction, face-neck lifting and body lifts cannot be stressed enough. It is an essential tool for the three dimensional composite sculpting/ remodelling of body structures.

When liposuction was first introduced and popularised in the early 1980s, it indelibly altered the field of body contouring surgery and redefined plastic surgery for future generations of surgeons. Unless a "cure" for obesity is discovered, or a tectonic shift in human nature, lifestyle, or fashion trends occurs, it is likely than our concerns with lipodystrophy will persist unabated. Moreover, as more practitioners and manufacturers become involved in this area and research continues into the understanding of adipocyte physiology, the fields of liposuction, lipolysis, obesity, and fat cell metabolism will continue to gain more interest and realize more advancement.²²

Dr. Salil Bharadwaj is a board certified Consulgeon. He is a member of the International Society of Aesthetic Plastic Surgery, Association of Plastic Surgeons of India and European College of Aesthetic Medicine and Surgery. He has more than 10 years' experience in the field of Plastic Surgery. He has been actively involved in the training of plastic and general surgery postgraduates. After practising in several leading corporate hospitals in Bangalore, India, he now works at one of the Gulf's top hospitals, the Bahrain Specialist Hospital, Bahrain. He is a regular speaker in International conferences and has published several articles in reputed journals.



5. Haeck PC, Swanson JA, Gutowski KA, et al. Evidence-based patient versus traditional suction-assisted lipoplasty: comparative evaluation and safety advisory: Liposuction. *Plast Reconstr Surg*. 2009:124:288–448 analysis of output. Aesthetic Plast Surg 2005:29:49-52 6. Iverson RE, Lynch DJ; American Society of Plastic Surgeons 16. Rebelo A. Power-assisted liposuction. Clin Plast Surg 2006;33: Committee on Patient Safety. Practice advisory on liposuction. Plast 91e105 Reconstr Surg. 2004;113:1478–1490 17. Paul M, Mulholland RS. A new approach for adipose tissue treatment

7. Ostad A, Kageyama N, Moy RL. Tumescent anesthesia with a lidocaine dose of 55 mg/kg is safe for liposuction. Dermatol Surg. 1996;22:921-927

8. Matarasso A. Lidocaine in ultrasound-assisted lipoplasty. Clin Plast Surg. 1999;26:431-439, viii.

9. Hatef DA, Brown SA, Lipschitz AH, Kenkel JE. Efficacy of lidocaine for pain control in subcutaneous infiltration during liposuction. Aesthetic Surg J 2009;29:122-127

10. Perry AW, Petti C, Rankin M, Lidocaine is not necessary in liposuction. 20. Murphy RJ, Alderman A, Gutowski K, Kerrigan C, Schechter L, Plast Reconstr Surg 1999;104:1900-1902. Wilkins E. Evidence-Based Practices for Thromboembolism Prevention:

11. Hunstad JP, Aitken ME. Liposuction: techniques and guidelines. Clin A Report from the ASPS Venous Thromboembolism Task Force Approved Plast Surg 2006;33:13-25 by ASPS Executive Committee: July 2011. Arlington Heights, Ill: American Society of Plastic Surgeons; 2011 12. DiBernardo BE. Treatment of cellulite using a 1440-nm pulsed laser

with one-year follow-up. Aesthet Surg J. 2011;31:328-341 21. Shridharani SM, Broyles JM, Matarasso A. Liposuction devices: 13. Prado A, Andrades P, Danilla S, Leniz P, Castillo P, Gaete F. A technology update Medical Devices: Evidence and Research 2014:7 prospective, randomized, double-blind, controlled clinical trial comparing 241-251 laser-assisted lipoplasty with suction-assisted lipoplasty. Plast Reconstr 22. Matarasso A, Levine SM. Evidence-based medicine: liposuction Surg. 2006:118:1032-1045 Plast Reconstr Surg. 2013 Dec;132(6):1697-705

14. Scuderi N, Paolini G, Grippaudo FR, et al. Comparative evaluation of 23. Ahmad J, Eaves FF, Rohrich RJ, Kenkel JM. The American Society for traditional, ultrasonic and pneumatic-assisted lipoplasty: analysis of local Aesthetic Plastic Surgery (ASAPS) survey: current trends in liposuction. and systemic effects, efficacy and costs of these methods. Aesthetic Plast Aesthet Surg J. 2011; 31:214-224. 24. Steridomas A, De Faria J, Nicaretta B, Papadopoulos O, Papalambros E, Illouz YG. Cell-assisted lipotransfer. Aesthet Surg J 2010; 30: 78-81.

Surg 2000;24:395-400 15. Scuderi N, Tenna S, Spalvieri C, et al. Power-assisted lipoplasty



and body contouring using radiofrequency-assisted liposuction. Aesthetic Plast Surg 2009;33:687-94

18. Stephan PJ, Kenkel JM. Updates and advances in liposuction. Aesthet Surg J. 2010;30:83-97; quiz 98

19. Newall G, Ruiz-Razura A, Mentz HA, Patronella CK, Ibarra FR, Zarak A. A retrospective study on the use of a low-molecular-weight heparin for thromboembolism prophylaxis in large-volume liposuction and body contouring procedures. Aesthetic Plast Surg. 2006;30:86-95

MARCH 2016 49

^{1.} International Society of Aesthetic Plastic Surgery (ISAPS) Global statistics 2014

^{2.} American Society of Plastic Surgery (ASPS) 2015 Plastic Surgery Procedural Statistics.

^{3.} Lewis CM. Early history of lipoplasty in the United States. Aesthet Plast Surg. 1990;14:123-126.

^{4.} Rohrich RJ, Broughton G, Horton B, et al. The key to longterm success in liposuction: A guide for plastic surgeons and patients. Plast Reconstr Surg. 2004;114:1945-1952.