

New classification of fat grafting techniques proposed

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(HealthDay)—As the use of fat grafting in plastic surgery continues to evolve, a new way of classifying fat grafting techniques has been proposed that aims to match the technique to the specific clinical situation, according to research published in the September issue of *Plastic and Reconstructive Surgery*.

Daniel Del Vecchio, M.D., M.B.A., of Back Bay Plastic Surgery in Boston, and Rod J. Rohrich, M.D., of the University of Texas Southwestern Medical Center in Dallas, reported results from four patient cases involving different fat grafting techniques to compare

methods of harvesting, cell processing, transplantation, and management of the recipient site.

The researchers found that cases involving fat grafting included facial volume correction; treatment of a chronic wound of the lower extremity; primary core volume [breast augmentation](#) using the large-syringe technique; and core volume [breast reconstruction](#) in irradiated and nonirradiated [mastectomy](#) sites using pre- and postoperative expansion, large-syringe technique, and three-dimensional parenchymal release. Overall, the authors found that the key clinical factors included the volume demands of the recipient site and whether the recipient site was healthy or pathologic tissue. Additionally, small- versus large-volume and regenerative versus nonregenerative features also played a role.

"Thirty years after the inception of lipoaspirate injection, autologous fat transplantation has evolved from an underrated, oversimplified procedure to at least four different strategies that take into account harvesting technique, lobular size, processing of the graft, injection technique, and the specific requirements of the recipient site," the authors write.

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