

■ Body

Liposuction

is already one of the most popular cosmetic procedures for women and men alike. New techniques mean it can now be used to remove extra fat from almost any area of the body.

Marina del Rey plastic surgeon

Dr. David Stoker talks to

Sophie Gordon about

performing precise liposuction.

Precise

1



Before: Excess fat and skin of the jowls and neck



After: Liposculpture of the jowls and neck followed by a neck lift by Dr. Stoker

2



Before: Patient with sagging jowls and neck



After: Liposculpture of the jowls and neck followed by a neck lift by Dr. Stoker

“It’s unusual for someone not to carry a little extra fat in certain places”

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any people find they can diet and exercise around the clock, but still carry extra fat in trouble spots. Even slim people have bulges that bother them and only liposuction will effectively trim these pesky areas.

“Everyone has their own concerns about their body,” admits Marina del Rey plastic surgeon Dr. David Stoker. “It’s unusual for someone not to carry a little extra fat in certain places.”

The most common parts of the body targeted by liposuction in women are the abdomen, inner and outer thighs and the hips. For men, it’s the abdomen and the flanks (love handles).

Recent advances in liposuction mean surgeons are now able to target areas that were seldom treatable in the past, such as the upper arms, the front of the armpits (the bulge above a woman's bra cup), the breasts, back of the neck, ankles, knees and face (jowls). These new techniques can also help achieve more definition of the abdomen.

"Performing liposuction in these areas requires finer cannulas [instruments used to extract fat], a more refined technique and better equipment," explains Dr. Stoker. "I use power-assisted liposuction so the fat is removed more efficiently, with less trauma to surrounding tissue."

In traditional liposuction, a narrow tube or cannula, inserted through a tiny incision, vacuums the fat lying beneath the skin and above the muscle. The cannula is thrust back

millimeter in diameter for extreme precision, and increasing up to five millimeters in diameter for larger areas. This range allows the surgeon to target smaller, less accessible areas. Incisions can be as minute as pin pricks.

"I generally like to hide incisions in creases or in shadowed areas where they are unlikely to be noticed," explains Dr. Stoker. When performing liposuction on the jowls, for instance, incisions can be made next to the earlobe, under the chin or even inside the nostril. "In many cases the incisions are undetectable even to the patient the day after surgery," notes Dr. Stoker.

Finer cannulas also allow surgeons to sculpt areas like the abdomen, rather than performing a generalized "de-bulking". "'Liposculpture' of the abdomen is less common, but is growing in popularity," says

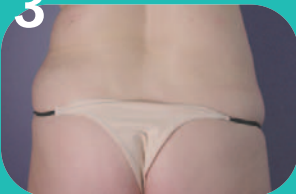
most from liposuction. With people who are profusely overweight, it is not recommended. For this group, I would recommend diet and exercise."

Those potential patients who have relatively elastic skin are good liposuction candidates as well, since the surrounding skin will more easily contract after the fat is removed. Of course, every case needs to be assessed individually. "You have to weigh the risks and the benefits," advises Dr. Stoker. "If a person has a significant bulge, it's likely that the advantages of having liposuction will be great. However, if that person is already close to her or his optimum shape, it may not be worth it."

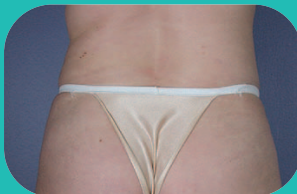
As with any elective invasive procedure, patients should be in a general state of good health prior to surgery. Specifically, those with bleeding disorders are not good candidates

Liposuction

3



Before: 30 year old unhappy with waistline



After: Power-assisted liposuction to the abdomen, hips and back by Dr. Stoker

4



Before: 30 year old patient wanted flatter stomach and slimmer waist



After: Power-Assisted liposuction to the abdomen, flanks, hips and back by Dr. Stoker

and forth through the fat layer, breaking up the fat cells and suctioning them out. Either a vacuum pump or a large syringe provides the suction. Power-assisted liposuction, in contrast, uses a vibrating cannula that shakes the fat loose. This vibration helps glide the tube through fibrous fatty tissue easily.

"Instead of using a forceful thrusting motion, power-assisted liposuction is like waving a wand," says Dr. Stoker. "Fat cells are grouped together in clusters. A traditional cannula tears the fat cells loose, whereas a vibrating cannula shakes them loose—much like shaking fruit from a tree."

There are dozens of different shapes and sizes of cannulas, starting at just over one

Dr. Stoker. "You're basically trying to sculpt a more ideal form, leaving bits here and there."

Performing liposuction in more unusual areas like the knees, ankles and face brings its own set of rules and risks. "The surgeon must have a solid understanding of the surrounding anatomy when performing liposuction near such critical areas. These parts of the body are close to crucial nerves and vascular structures," cautions Dr. Stoker.

Dr. Stoker says the best candidates for liposuction are people who have reached a steady, healthy weight but are struggling with localized areas of fat. "Slimmer patients who have patches of diet-resistant fat will benefit

for liposuction. The operation is usually performed in an outpatient facility, with most procedures taking less than two hours. "We use local anesthesia in combination with light general anesthetic," says Dr. Stoker. "Patients can return to work shortly thereafter, depending on the extent of treatment."

After the procedure, patients wear discreet compression garments on most areas to help with the swelling. "Mild to moderate swelling is resolved in the first few weeks, but complete resolution takes several months," explains Dr. Stoker. "But the patient looks good after surgery and results get progressively better with time." **AA&CSM**