

Study proposes new standards for safely performing 'Brazilian butt lift'

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A new anatomic study highlights critical technical issues to ensure safe performance of the increasingly popular "Brazilian butt lift—a procedure using the patient's own fat to augment and improve the appearance of the buttocks. The study appears in the May issue of *Plastic and Reconstructive Surgery*, the official medical journal of the American Society of Plastic Surgeons (ASPS).

"The study confirms that gluteal fat grafting is safe, only if the injections remain in the subcutaneous tissue," according to Daniel Del Vecchio, MD, a Boston [plastic surgeon](#) who developed the protocol and is a leading global expert in this area. A video commentary by coauthor Rod J. Rohrich, MD, of Dallas Plastic Surgery Institute strongly emphasizes the need to avoid any fat injection into the gluteal muscle itself in order to prevent serious complications.

New Evidence on Safe Injection Technique for Gluteal Fat Grafting

Fat grafting has become a popular technique of [buttock enhancement](#) for patients who want a fuller, shapelier appearance, without the use of implants. In this procedure, fat obtained by liposuction from one part of the body (such as the abdomen) is processed and injected to enhance the gluteal area. [According to ASPS statistics](#), more than 24,000 buttock augmentation with fat grafting procedures were performed in 2018—an increase of 19 percent over the previous year.

However, there is growing concern about serious complications resulting from this procedure. A 2015 [paper in *Plastic and Reconstructive Surgery*](#) reported a series of 22 deaths in patients undergoing gluteal fat injection in Colombia and Mexico. The deaths were caused by pulmonary embolisms: collections of fat blocking the arteries in the lungs.

In 2018, the ASPS joined with other [plastic](#) surgery specialty societies in issuing an urgent warning regarding the "alarming" number of deaths related to gluteal fat augmentation. An advisory issued to plastic surgeons ([PDF link](#)) outlined steps to ensure that fat is injected only under the skin—never into the muscle.

To build the evidence base for this recommendation, Drs. Del Vecchio and Rohrich and colleagues performed a cadaver study to evaluate patterns of fat spread in the gluteal area after injection. Four approaches were evaluated, simulating injection techniques that might be used by plastic surgeons performing gluteal fat grafting.

In three of the four injection techniques, the spread of the simulated fat was mainly limited to the subcutaneous area, immediately beneath the skin. Even when small perforations were made in the fascia—the connective tissue layer separating the muscle from the subcutaneous space—there was little or no spread of the simulated fat into the muscle itself.

Even with multiple perforations and high injection pressures, the muscle fascia prevented the simulated fat from crossing into the muscle. The researchers discuss the process of "subcutaneous migration" that keeps injected fat from spreading into or under the gluteal muscle, if injected into the subcutaneous "safe zone."

The findings were different in the fourth scenario, where multiple punctures were made in the gluteal muscle. In this situation, large

amounts of proxy fat were found under the [muscle](#)—demonstrating that "deep intramuscular migration" had occurred. Once fat has migrated into the submuscular space, damage to the veins in that area could allow fat cells to enter the circulation, with a potential risk of pulmonary embolism.

The experimental study provides an important piece of evidence supporting previous recommendations to ensure the safety of the Brazilian butt lift. The researchers conclude: "These persuasive findings are profound enough to propose a new standard of care: no subfascial or intramuscular [injection](#) should be performed, and all injections should be done exclusively into the subcutaneous tissue."

In his video commentary, Dr. Rohrich adds: "If you are considering buttock augmentation procedures, please do so safely. Start today by finding a board-certified plastic surgeon and an accredited facility in your area; bring in a copy of the [safety advisory](#)...and discuss the safest way to achieve the results you want."

More information: Simeon Wall et al, Subcutaneous Migration, *Plastic and Reconstructive Surgery* (2019). [DOI: 10.1097/PRS.0000000000005521](#)

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