

FAT TRANSFER TO THE FACE

Fat transfer to the face is a plastic surgery technique where fat is harvested from usually the abdomen and/or inner thigh and reinjected into the face – usually the cheeks around the eyes, temples or along the jawline. Sometimes the lips can be augmented with fat as well. Very small instruments are used and small amounts of fat are transferred in several layers to increase the amount of “take.” This can be done alone, or it can be done in conjunction with upper and lower eyelid surgery and/or facelifts. First the fat is aspirated with a 10 mm syringe and a small harvesting cannula. The syringes are left upside down so that any blood or bodily fluids are separated so the fat is purer. Then a very small cannula, larger than the needle used for Restylane® or Juvederm® but still very small, is used to inject the fat with multiple passes. Bruising is extremely common after this as is swelling. Several treatments may be needed to get the desired results since there is always a chance that some of the fat will be resorbed. Prior to any surgery, patients should be non-smoking and in good health, able to tolerate some level of anesthesia and be free from any infection going on in the face. It is also preferable that the procedure be done several months before or after any kind of dental procedures or laser treatments where there is going to be some inflammation and stretching of the face.

Risks, Complications and Drawbacks of Fat Transfer to the Face

Any patient undergoing this surgery has to accept the following possibilities:

- **Resorption:** Some of the fat will resorb. The more active the patient, the more he/she exercises, the higher the chances of resorption because there is a lot of blood flow to the face. It is advisable to refrain from heavy-duty exercise for at least six weeks to allow the fat to anchor itself into its new position and get a viable blood supply.
- **Limited results:** Only as much fat that the face can handle can be transferred. For a certain look, multiple treatments may need to be done.
- **Scars:** These are very rare. The cannulas are very small and the scars on the face result in scars that are smaller than any kind of blemish. They are usually red and after some time, they do fade.
- **Skin irregularities:** These can sometimes occur from the donor site harvest. They are rare because the cannulas are so small, and they may require additional treatments if they are aesthetically unacceptable.
- **Infection:** This is possible with any surgery, and it may require warm compresses or antibiotics.
- **Bleeding:** Bleeding in large collections is very unusual, however, bruising is extremely common and to be expected. It is usually temporary.
- **Anesthesia complications:** This can occur with any surgery and that is why patients should be in good health prior to undergoing this procedure.
- **Puncture of body organs:** The small cannulas are usually in a very superficial plane. They are usually no longer than 6” long so puncture of body organs is extremely rare with this type of procedure. Should this extremely unusual complication occur, hospitalization may be necessary.
- **Loss or gain of transferred fat:** If a patient loses weight, the fat may be lost as well. If a patient gains weight, it is very unusual, but it has been seen that the fat in the face may grow.
- **Fat embolism:** When a small particle of fat gets into a blood vessel, there can be some complications. Usually these are short-lived, however if a large fat embolism gets into a vessel on the face, there may be more symptoms, supportive care, or possible stroke. Dr. Pautler takes all precautions to make sure the cannulas used to transfer the fat are kept in very safe areas and respects certain anatomic zones where fat should not be transferred.
- **Numbness:** This is usually not an issue; it is usually very short term.

- Surgical wetting solution: There is a possibility that large volumes of fluid containing dilute local anesthetic and epinephrine that are injected into the fatty deposits for harvesting may contribute to fluid overload. Fat transfer to the face usually requires such small volumes that this is a very unusual complication. Additional treatment may be needed if this does become an issue.