



Case Report

Severe Thigh Skin Necrosis after Liposuction

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Abstract

Liposuction is the most commonly used method of contour plastic surgery. The public considers liposuction a minor operation, but does not consider the serious complications that can occur, such as seroma, hematoma, infection, skin discoloration, skin necrosis, which lead to contour irregularities outcome and deformity.

Keywords: Liposuction; Skin necrosis; Complications

Introduction

Liposuction is the most commonly used method of contour plastic surgery [1]. The public considers liposuction a minor operation, but does not consider the serious complications that can occur, such as seroma, hematoma, infection, skin discoloration, skin necrosis, which lead to contour irregularities outcome and deformity.

Case Report/Case Presentation

we report a case of a 20-year-old female underwent tumescent bilateral thigh liposuction for aesthetic purposes in a different institution facility. Clinical history was negative for smoking, hypertension, obesity, cardiac and vascular disease. The surgery performed by the suction-assisted liposuction technique under general anesthesia, which involved the aspiration of a small amount of fat (500 ml) via four points of subcutaneous access in the trochanteric and knee regions. The patient did not experience any significant pain or uncomfortable. The seventh day, the dressing and elastic garment were removed, the patient showed signs of cutaneous fat necrosis especially the upper thigh region.

After two weeks the patient presented to our hospital with multiple full thickness necrosis over the bilateral thighs (Figure 1). The necrosis already demarcated in full thickness and the fascial deep tissues is visible. The patient's wounds did not present clinical infection or biological infection. After removal of residual necrotic fat, irrigation, change fresh dressing every day, the cutaneous fat necrosis wound was closed by secondary suturing (Figure 2). The skin necrosis was only conservatively treated with dressings and the wounds were healed completely by 60 days.



Figure 1: Wounds at 14 days. Our patient's other complications included contour irregularities, hyperpigmentation, asymmetry, scars, and chronic induration, which are the common complications of superficial liposuction.



Figure 2: Wounds at 45 days and 60 days. The wounds were healed completely by 60 days.

Discussion

As we know, not all liposuction performing surgeon have accepted formal surgical training, which is more common in China, we should raise doctors' awareness of this severe complication. The lack of surgical experience was a contributing factor that cannot be ignored [2].

Skin necrosis after liposuction is almost always the result of poor surgical technique. According to some authors, the most serious complications are mainly due to the surgeon's lack of expertise and experience, technical inadequacies, non-aseptic standards or tumescent anaesthesia, with or without intravenous sedation, which can be avoidable [3]. In our case, the patient accepted liposuction surgery as an outpatient service in a private facility. Analysis of the physicians' behaviour, the patient performed by an unqualified young physician who is not certified and have little experience? Particularly, very superficial suction techniques will regularly result in the destruction of the subcutaneous vascular system.

Preoperative management: patients should be encouraged to stop smoking at least 1 week before surgery and especially patients accepting lower extremities liposuction. Postoperative management: superficial liposuction involves the manipulation of the superficial fascial system, and improper postoperative compression leads to seroma, in return to local skin necrosis. Surface liposuction is potentially associated with a higher incidence of complications, but when done properly, it can produce very good postoperative results. The complication of skin necrosis after liposuction is avoidable and more prudent practice has led to a decrease in such complication rate [4].

Statement of Ethics

This research complies with all ethical guidelines for human studies and animal welfare regulations. Ethical approval was not required for this study, in accordance with local guidelines. Written informed consent was obtained from the patient for publication of the details of their medical case and any accompanying images.

Conflict of Interest Statement

The authors declared no potential conflicts of interest with respect to the research, authorship, and publications of this article.

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Author Contributions

Conceptualization, methodology, investigation and writing-original draft, Liuchang Tan and Yuangang Lu. All authors participated in the writing process and approved the final version of the manuscript.

Data Availability Statement

All available data used in the generation of this case report are included in the article and its online supplementary material files. Further inquiries can be directed to the corresponding author.

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