

# Lipomodelling/fat grafting/fat transfer/ Colman fat transfer

Breast Surgery Unit



Patient information leaflet

## Introduction

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The aim of this leaflet is to provide information to anyone considering undergoing lipomodelling within the breast surgery department at Royal Surrey County Hospital. It will cover what the procedure is, how it is done, side effects and complications and what to expect after the operation in terms of recovery.

Lipomodelling (fat grafting) is a procedure used to improve the contour of the breast after breast surgery (lumpectomy or reconstruction).

This may be done to:

- Improve defects in the breast contour
- Improve symmetry of the breasts
- Improve the soft tissue coverage following implant reconstruction
- Improve the quality of the skin that has previously had radiotherapy to it
- Camouflage implant rippling/implant capsular contracture

Lipomodelling involves taking fat from elsewhere in the body (called the donor site) and injecting it into the required areas in the breast. The result can give a softer, more natural appearance and feel, and is minimally invasive. However, there are other alternatives to improving the contour of the breasts and this can be discussed with your breast surgeon, for example a more complex reconstructive procedure or wearing a bra with padding or a padded insert to try and smooth out the contour.

## How is it done?

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Fat is taken from your own body, often the abdomen, thighs, buttocks or hips, in a procedure called liposuction. It is done through small incisions into the skin. The removed fat is then injected into the area within the breast requiring the treatment. This procedure is performed under a general anaesthetic (you are put to sleep) in one or more sessions depending on the amount of fat graft needed. Each session takes between one and two hours.

## Is this procedure right for you?

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Your doctor will discuss this with you during your consultation. Consideration must be taken into account as to whether this is the right procedure for you if:

- You currently smoke cigarettes
- You have a medical condition or take any medicines which causes increased bleeding risks
- You do not have adequate fat in your donor sites
- You have any serious medical conditions which may make undergoing a general anaesthetic very high risk (for example a recent heart attack)
- If you have diabetes

## Are there any side-effects or complications?

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- **Swelling at the donor site.** This can take a while to settle and this is why a compression garment is advisable such as support pants or cycling shorts.
- **Bruising and skin discoloration** can occur in the breast or donor site, but this is usually temporary and resolves within a few weeks. The bruising can be quite severe, but please do not worry as this is usual. If you are concerned please call the breast care nurses who can advise you if any further action is required (please see phone numbers at the end of this leaflet).
- **Numbness at the treated areas** (breast or donor site). These areas can remain numb for several weeks.
- **There is a small risk of infection in the breast or donor site.** If any of the areas become red/swollen/ or there is discharge from the incision please get in touch with the breast team (please see phone number at the end of the leaflet).
- **Over emptying the donor site area.** If too much fat is taken from the donor site it can leave the area with small contour irregularities.
- **Some of the fat grafted will disappear** (the body reabsorbs it) over time and the procedure may need to be repeated.
- **Scarring.** The wounds at the donor or injection site may be rather prominent, called hypertrophic scarring.
- **Recurrence of the breast cancer.** To date there is no definite evidence that having lipomodelling increases the risk of developing cancer in the treated breast. However, the technique of lipomodelling is relatively new and therefore there is limited long term data.

- **It may not be possible to completely correct the contour defect** in the breast and therefore it is important to discuss your expectations from the procedure with your consultant beforehand.
- There is some evidence that the transferred fat may **interfere with screening mammograms**. This, however, is also true of scarring from any breast surgery and the risk is deemed to be very small. Please make sure you tell your mammographer that you have had breast surgery if you go for a mammogram.
- **Fat necrosis** can occasionally occur. This is an uncommon, benign (non-cancerous) condition where the fat cells injected into the breast do not survive. It is usually painless and the body repairs the tissue over a period of weeks. Occasionally, the fatty tissue swells and may become painful resulting in a lump or an oily fluid collection (oil cyst). If you think that this has occurred please contact the breast team and we can review this for you.
- **Deep vein thrombosis and pulmonary embolism**. Any patient undergoing an operation is at risk of a blood clot developing in the leg and travelling to the lungs. This is a very serious complication, but is very rare in people undergoing lipomodelling.
- **Damage to underlying structures**. Very rarely during the process of liposuction of the donor site or injection of the fat into the breast area, underlying structures may be damaged. This is very rare but can include damage to any underlying breast implants, lung tissue or abdominal organs.
- **Fat embolization**. This is another very rare complication where some of the injected fat enters the blood stream and lodges in a distant organ. If this is the lungs it can be extremely serious.

## Post-operative recovery

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- The surgery is done in theatre usually as a day-case or an overnight stay.
- You should rest for 24 hours and then increase your activity.
- Normal, non-strenuous activity can be resumed after 2-3 days.
- Strenuous activity can be slowly restarted after two weeks.
- You will have dissolvable glue and/or waterproof dressings placed on the incision to keep them clean and dry. They are splash proof so it is ok to have a light shower but do not have a bath until the incisions have healed.
- We recommend that you wear a supportive bra (e.g. a sports bra or support bra with wide adjustable straps) and supportive pants (e.g. tight pants made of stretchy material that comes up to the waist line or cycling shorts) over the donor area for 3 weeks 24 hours a day. These may be removed for an hour or so off and on if needed. Many of our patients have told us that these bra's and pants can be purchased from department stores such as Marks and Spencers, Debenhams etc. We would recommend trying a few on before the operation so you can see which shape/style/underwire or not would suit you best. The bra will help with the swelling and bruising and also with the contouring of the donor area. Please start wearing these as soon as possible after the procedure.
- You may be uncomfortable after the procedure. We will provide you with pain killers on discharge. Please take these regularly for the first 24-48 hours and then begin to reduce them as the pain reduces. Try to avoid non-steroidal anti-inflammatory pain killers (neurofen, ibuprofen, naproxen, diclofenac) if possible as these medicines can make bruising worse.





## Contact details

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If you have any queries please contact the Royal Surrey County Hospital Breast Unit on:

### Breast surgery unit secretaries:

**Telephone:** 01483 402743  
01483 408368  
01483 408367

### Breast care nurses

**Telephone:** 01483 406624  
**Email:** rsc-tr.BreastCareNurses@nhs.net

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## PALS and Advocacy contact details

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Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

**Telephone:** 01483 402757

**Email:** rsc-tr.pals@nhs.net

**Opening hours:** 9.00am–3.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

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