

### 2<sup>nd</sup> World Congress on

## Otolaryngology and Wound Care

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# Liposuction only breast reduction and lift: Excellent results with low wound complication rates

The best way to treat a wound is to prevent its occurring. Each year in the United States more than 250,000 women undergo breast lift or reduction surgery, most commonly using excisional techniques, which studies have shown are associated with up to fifty percent minor complication rates (wound dehiscence or superficial infection) and as much as five percent major complication rates (major skin loss, areolar loss, nipple loss). Treating these complications can require intensive wound care, skin grafts, or even reconstructive surgery involving multiple procedures and the transfer of tissues from remote areas.

This presentation illustrates the safety and efficacy of liposuction-only breast reduction and mastopexy. Although these procedures were reported over twenty years ago, they still comprise a small minority of breast reduction and breast lift procedures, possibly due to insurance compensation requirements in the United States.

A meta-analysis of the available literature, including our original data regarding laser-assisted liposuction used for mastopexy, indicates that liposuction alone for breast reduction and lift is in many ways superior to the traditional and more common excisional procedures. Liposuction provides consistently lower complication rates, faster recovery, fewer postoperative visits, no skin loss, no nipple loss, and allows these procedures to be performed on smokers, diabetics, and patients who may not be able to tolerate the longer and more complicated traditional procedures. Surgeons who are not trained in plastic surgery can learn these techniques in a short time and thereby can offer their patients relief from the neurological and orthopedic sequelae of hypermastia.

#### **Biography**

Ingram is double board certified in cosmetic surgery and facial cosmetic surgery. He is a graduate of Yale University, where he received a degree in mathematics and philosophy, summa cum laude, while completing a premedical curriculum. At Yale, he was a member of Phi Beta Kappa, was a National Merit Scholar, and was a William Randolph Hearst Foundation Scholar. Ingram began his medical career at the University of Texas Southwestern Medical Center in Dallas, where he was a Southwestern Medical Foundation Scholar throughout medical school. On graduation from medical school, he was one of three students in the country who "matched" straight into plastic surgery directly out of medical school that yea. He completed his plastic surgery residency at UT Southwestern, currently the number one ranked program in the United States, in 1995. He continued his studies at the clinic of Ivo Pitanguy, the father of modern cosmetic surgery and inventor of the Brazilian Butt Lift, in Rio de Janeiro prior to studying craniofacial surgery at the University of Paris, Creteil, France, where he worked under Laurent Lantieri, the first surgeon to perform a complete facial transplant.

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