# Complication rate of lipoabdominoplasty versus abdominoplasty: a one surgeon seven year retrospective review

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# BACKGROUND:

Lipoabdominoplasty is an excellent operation to improve body contouring, maintain a youthful body shape for aging people, and remove excess skin caused by massive weight loss and pregnancy. In addition lipodabdominoplasty does not require a drain. It is still somewhat controversial to combine abdominoplasty and liposuction because of the potential for vascular damage of the abdominal flap and perceived increased complications. Large study and literature reviews have suggested the safety of the procedure. The purpose of this article was to determine the complication rates of lipoabdominoplasty compared with traditional abdominoplasty for a single surgeon over 7 year period.

### METHODS:

Study results were analyzed utilizing a chi square model. Subgroup analyses were conducted based on complications.

### **RESULTS:**

Overall there was a total of 301 patients underwent lipoabdominoplasty and 179 patients underwent lipodabdominoplasty over seven year period. Of these patients 11 (3.7%) developed seroma; 5 (1.7%) experienced hematoma; 9 (2.9%) experienced wound infection, dehiscence, or fat necrosis. A chi square analysis revealed fewer complications in the lipoabdominoplasty group than in the traditional abdominoplasty group 10 vs 15(p=0.016). Subgroup analysis showed that the lipoabdominoplasty group had a lower incidence of seroma 3 vs 8(p=0.014) and hematoma 1 vs 4(p=0.047).

# CONCLUSIONS:

Lipoabdominoplasty is a powerful tool that does not require a drain with decreased complications rate.

Keywords: Abdominoplasty, lipoabdominoplasty, Avelar

#### **Reference:**

- 1 Heller JB, Teng E, Knoll BI, Persing, J. Outcome analysis of combined lipoabdominoplasty versus conventional abdominoplasty
- 2. Weiler J, Taggart P, Khoobehi K A case for safety and efficacy of lipoabdominoplasty: a single surgeons retrospective review of 173 consecutive case
- 3. Keywords: Abdominoplasty, lipoabdominoplasty, Avelar

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