

Medical Spas
Innovation

Dr. Sydney Coleman

is board certified in Plastic and Reconstructive Surgery. He is an assistant clinical professor at the **New York University** School of Medicine. He is a member of the American Society of Plastic Surgeons, American Society for **Aesthetic Plastic** Surgery, Northeastern Society of Plastic Surgery, International Society of Aesthetic Plastic Surgery and the International Consortium of Plastic Surgeons. He is a member of the **Technology Assessment** Committee for the Plastic Surgery **Educational Foundation** and a member of the **Emerging Trends and Innovative Procedures** Committee of the American Society for **Aesthetic Plastic** Surgery. His hospital affiliations include NYU Downtown Hospital, New York Eye & Ear Infirmary, and Manhattan Ear, Eye & Throat Hospital. For more information on Dr. Coleman or fat grafting, please refer to www.LipoStructure.com.



## **Using a Woman's Own Body Fat**

BY DR. SYDNEY COLEMAN

from their waist or thighs to their breast. Now it is possible! Sydney R. Coleman, MD has just presented his eleven-year experience in breast enlargement with a woman's own fat at the most prestigious plastic surgery meetings in Europe and the United States. Because of his dedication to patient safety and perfection he has researched and perfected the procedure for over a decade before making it available to the public. The lectures introduced the use of his trademarked technique of fat grafting, LipoStructure®, for augmentation and reshaping of the breast to create long-lasting and natural results.

Plastic surgeons have transplanted fat to the breast since 1885, but the results have been variable depending on the technique used, the surgeon, and the individual patients. In 1995, Dr. Coleman began

injecting fat into the breast using special instruments he developed for fat grafting\*. In his lectures, he shows patients that he transferred lower body fat to their breasts to create a completely natural augmentation that has every indication of being permanent. He uses fat grafting to the breasts as an alternative to implants for simple augmentation, to "fine-tune" breast reconstructions, and to disguise the edges or rippling of existing silicone gel and saline implants.

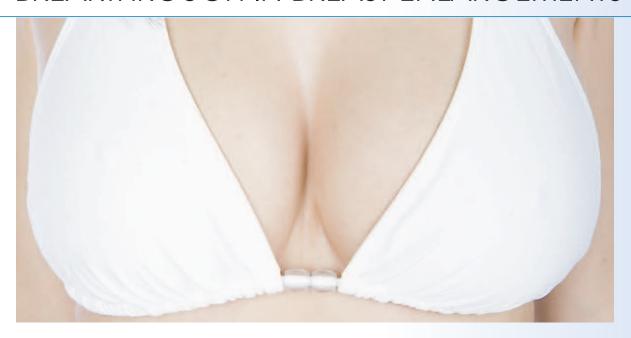
Fat grafting to the breast consists of two procedures performed on the same day: first harvesting of the fat and then placement into the breast. To begin, a substantial amount of fat is removed with a Coleman harvesting cannula<sup>TM</sup> connected to a small syringe. Then, the harvested fat is injected meticulously through four tiny 1/8 inch incisions using blunt Coleman infiltration cannulas<sup>TM</sup>.

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## BREAKTHROUGH IN BREAST ENLARGEMENTS



Fat grafting to breasts has many advantages over implants, but the major advantages are:

- Fat is a completely natural substance that comes from your own body.
- Harvesting of the fat can be used to enhance the body's shape. Women consider this an added benefit of the procedure.
- The breasts can be sculpted or shaped in addition to enlarging them.
- There are minimal incisions with this procedure, which reduces the possibility of skin scarring.
- After a few months, the grafted fat looks and feels completely natural.
- Fat grafting to the breasts can be used to disguise breast implants that do not look natural.

Breast enlargement by carefully harvesting large amounts of fat, and meticulously placing it into breasts takes much longer than placing silicone implants. Working with his associate, Dr. Alesia Saboeiro, Dr. Coleman typically takes five to eight hours for each fat grafting breast augmentation case. The fragile fatty tissue must be harvested slowly and gently

using Coleman's specific technique. The fat is then placed into the breast not only so that it will create an aesthetic, natural appearance, but also so that the newly transplanted fat has a chance to survive.

Dr. Coleman's overriding concern with injecting fat into the breast has been to avoid any problems with breast cancer detection. As with any breast procedure, calcifications and lumps can occur. Breast studies including physical examination and mammograms should be used to monitor every patient diligently. However, there is no current evidence that fat grafting to the breast is less safe than any breast surgery, and large studies have begun over the last few years to study fat grafting to the breast.

Obviously, surgeons with extensive experience in grafting larger volumes of fat to the body are most likely to obtain the best results. Dr. Coleman warns that fat grafting to the breast should only be performed by a board certified plastic surgeon experienced in not only fat grafting, but also the anatomy and the aesthetics of breast augmentation.

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