

Complications in Plastic Surgery

Complications occur at a predictable frequency in any kind of surgery. Infection and bleeding problems occur in 1% to 3% of cases. These problems are usually nuisances not catastrophic. They are treated with antibiotics and drainage and the final outcome is usually the same.

The real catastrophic problems are actually “non-surgical”. They are allergic reaction, anesthetic complications, heart attacks and clots that form in the legs and may go to the lungs called “pulmonary embolisms”. These events are extremely rare and often treatable. We try to minimize the changes of these occurring with a good history of your medical condition, good management of any existing medical problems an efficient and precise operation with minimal blood loss and excellent post operative care with early ambulation after the surgery. When patients tell me that they are most afraid of the anesthesia and “not waking up”, I assure them these are not the things I would worry about if I were them. I have had anesthesia a number of times and I have never felt any fear about it as long as it is done in a certified surgery center setting or hospital with experienced anesthesia personnel. Many of the horror stories one may hear or read about are related to the following mistakes:

1. Performing too many procedures at once
2. Doing surgery that takes too long
3. Administering general anesthesia or deep sedation in an office setting
4. Removing too much fat out at once in liposuction
5. Elective surgery on patients who are poor candidates due to medical problems

Obviously these mistakes are avoidable with good judgment as well as an experienced surgeon.

Latest New “Hot Topic” — ArteFill®

ArteFill® is a filler, described as a non-resorbable aesthetic injectable implant, that has been approved by the FDA for cosmetic purposes. The exciting thing about ArteFill® is that it's effects are permanent. Because it is composed of purified cow collagen mixed with tiny microspheres, allergy testing prior to treatment is required. It is not ideal for placement under fine wrinkles since any bumps that may develop will be permanent. I personally prefer Juvederm and Restylane for the more superficial locations.

Twenty years from now you will be more disappointed by the things you didn't do than by the ones you did do. So throw off the bowlines. Sail away from the safe harbor. Catch the trade winds in your sails. Explore. Dream. Discover.

-Mark Twain

Recovery Time & Getting Back To Work

For many people seeking cosmetic procedures time out of work is a big factor in their decision. Here is my philosophy in a nutshell!

You can go back to work as soon as you feel like it provided you don't lift any heavy weights or objects, strain or do violent motions which might cause late bleeding problems. The risk of late bleeding problems is mostly over in two weeks. If you are still taking narcotics for pain you shouldn't be driving or performing functions which require precision. Due to the narcotics, you probably won't be performing at work to your potential. If you are taking Tylenol or Advil it is fine to return to work.

After facial surgery, you will be swollen and bruised. This is worse on the second day after surgery and then declines and is usually gone in two to three weeks. Some people don't care and return to work even with stitches still in place and that's fine. Don't worry about the work environment “hurting” the surgery.

Some average ranges of time my patients take off, depending on their circumstances, motivation and needs are as follows:

- Tummy Tuck 5 days to 1 month
- Breast Augmentation 2 days to 2 weeks
- Liposuction, 1 body area 1 to 4 days
- Liposuction, 2-3 body areas 7 to 14 days
- Liposuction, neck 3 to 7 days
- Facelift without eyelids 1 to 7 days
- Facelift with eyelids 2 to 4 weeks
- Eyelids, upper only 1 to 7 days
- Eyelids, lower 5 to 14 days

Do I Need a Breast Lift or Breast Implants?

After pregnancy the breasts enlarge, then deflate, sometimes resulting in sagging, miss-shapen breasts with stretch marks and distorted areolas.

If the patient is generally satisfied with the overall size of their breasts, then reducing the excess stretched skin and raising the nipples to their proper position may be all that is needed – a mastopexy or breast lift. A mastopexy is a quite predictable operation and the recovery is very quick.

If the breasts are deflated, small, with a normal nipple position (above the breast fold) breast implants will be needed. If a patient wants a lot of fullness/roundness in the upper part of the breast above the nipple, an implant is needed. A breast lift does not create this roundness.

Frequently, both a breast lift and an implant must be done to achieve the desired result. This is a tricky operation in that the skin stretches unpredictably. One does not want to put too much tension on the skin envelope over the implant, the blood supply to the nipple can be easily jeopardized, and the scarring can be significant.

Manufacturer Promotes “Laser Lipo—Smart Lipo”

These are hot topics today! This technique uses a specialized laser to dissolve small areas of fat (the size of the palm of your hand), which is then extracted via small cannulas. Proponents argue the heat generated by the laser promotes increased contraction and tightening of the overlying skin not obtained by traditional methods. Currently Ultrasound, Titan, Affirm, Thermage are techniques used exclusively on the skin following standard liposuction and produce great results. Few plastic surgeons offer “Laser Lipo” because:

- 1) It was tried fifteen to twenty years ago and offered no clear advantage
- 2) Conventional liposuction, on the same areas, utilizing very small cannulas gives excellent results with decreased associated risk
- 3) Skin contraction after standard liposuction occurs in everyone but to a variable extent. Enhanced skin retraction and tightening has not been proven to occur with “Smart Laser Lipo”
- 4) The danger of burning during laser liposuction is not encountered in standard treatments
- 5) The machine is very expensive and has a singular function

Laser Lipo is more expensive, complicated and dangerous than the standard technique. Much more scientific data needs to be collected. We’ll have to evaluate the results during the next few years to determine if the proposed advantages to “laser lipo” outweigh the risks associated with this technique.

I’m sorry, but for me the jury is still out on this one!

Will My Insurance Pay for My Surgery?

Your insurance company will not pay for surgeries that they believe are for “cosmetic reasons only”. However, if there is a medically necessary reason for the procedure they may approve the surgery even though it may have a cosmetic benefit. Here are the most common examples:

1. Removal of moles or skin lesions. If the lesion is suspicious, changing in color/shape, itching or bleeding it needs to be removed to determine if you are at risk for it being or becoming cancerous
2. Removal of extra skin from the upper eyelids (blepharoplasty). Some people have so much skin of the upper eyelids it obstructs and blocks their vision. If this is significant your health insurance will pay for its removal
3. Large pendulous breasts. If they cause back and neck pain a breast reduction may be a covered procedure
4. Extra skin of the abdomen. If one gets rashes beneath the skin that stops over the pubic area, the insurance company will occasionally pay for a “...dectomy” or removal of excess skin. This is not the same procedure as an Abdominoplasty which involves contouring the upper abdomen and the removal of much more skin.

Next Issue—Information about our Cosmetology Suite!

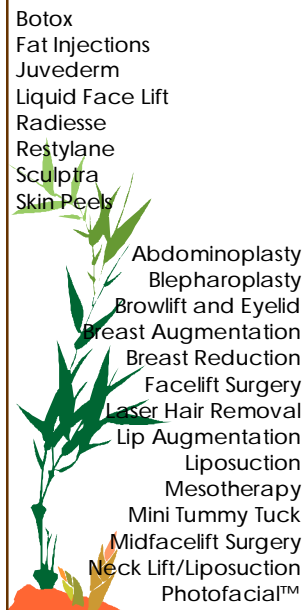


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By now most of you have heard about mesotherapy for reducing pockets of fat. This technique involves injecting the fatty deposits with a chemical called “phosphatidyl choline”, a substance found naturally in our bodies. It dissolves the fat.

This technique has been practiced in Europe and South America for more than thirty years, but only recently has gained acceptance in the United States. It is still somewhat controversial since there have not been a large number of scientific studies performed. The procedure takes approximately 5-10 minutes and is minimally uncomfortable. For 1-3 days the treated area is a little red, swollen and sore. One usually needs to repeat the treatment 3 to 4 times spaced 3-4 week intervals.

After using the technique for the past three years, I have come to the following conclusions:

- 1) It is best used in small areas of excess fat
- 2) It is not a realistic substitute for liposuction in larger areas of excess fat (like larger than a can of coke) because you go through several treatments, several recoveries and often still do not have the dramatic result achievable with 45 minutes of liposuction
- 3) It is a relatively safe technique
- 4) While the recovery is not very uncomfortable, the amount of swelling can be significant
- 5) The number of treatments and the degree of success are unpredictable – varying significantly from patient to patient

That being said, it can be the perfect treatment for certain patients. Call the office and schedule an appointment to discuss your individual options.