



## Sydney Coleman about LipoStructure & Fat Grafting

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Q&A with SYDNEY R. COLEMAN M.D. in Prague, Czech Republic

**Where can a fat transfer help you? Is this method absolutely safe? What is the largest amount of fat that can be transferred? What about skinny people? How long does it take to see how much fat remained?... These and other questions answered by famous plastic surgeon Dr. Sydney Coleman especially for Estheticon.com.**

### In what way is your technique specific? What do you do with suctioned fat after liposuction?

Through tiny puncture sites (no incisions), I harvest the fat by hand in a very gentle fashion using 10 milliliter syringes and a special Coleman cannula that I invented. Next, I centrifuge the freshly obtained fat at a specific gravitational force which separates the harvested (suctioned) fat into different densities or thicknesses. The oil floats to the top and is poured off. The liquid, watery part of the fat is next drained off. This leaves fat in different levels of thickness (densities), which contains different amounts of stem cells and growth factors. I then separate the different fatty thicknesses into "levels" depending on whether the fat was at the bottom (heaviest or densest) or nearer to the top (lightest, or least dense).

The most important step in the Coleman technique is the method of placement in tiny amounts with the Coleman cannula system. This emphasizes the placement so that the fat is close to a blood supply and is stable after placement. Also of great importance, the fat must be placed in such a fashion that the desired form is created during placement, rather than by molding or manipulating afterwards.

### Do you enrich the fat cells with the stem cells?

The "heaviest" or densest portion of the centrifuged fat contains twice as many stem cells and significantly more growth factors than the less dense layers. By selectively using the denser portions of centrifuged fat I can increase the number of stem cells that I use. Therefore, where I want "enriched" fat I use the denser, more concentrated fat. I use the most concentrated fat in areas where I want more repair, i.e. in scars, stretch marks, dark areas, and skin damaged from the sun or aging.



Sydney R. Coleman, M. D., plastic surgeon; New York City lecturing in Prague, Czech Republic

<http://www.estheticon.com/news/lipostructure-interview-with-sydney-r-coleman>

### **Is this method absolutely safe?**

No procedure or injection is “absolutely safe”. Nevertheless; compared to traditional plastic surgeries, it is a much safer procedure.

### **What are the contraindications (side effects) of the method? (If there are any)**

The patient must be healthy enough to undergo elective surgery and he or she must have enough excess fat for the purposes intended. There are no noted side effects if those two basic conditions are fulfilled. Nevertheless, right after the surgery, a swelling in the donor, or harvesting sites can occur. The biggest side effect is then placing too little fat or too much fat. To minimize such complications, it is important that you find a qualified surgeon with extensive experience in fat grafting.

### **What is the largest amount of fat you can transfer?**

It differs from person to person. The largest amount of fat that can be transferred depends on two factors: the volume of harvestable fat available in a particular patient, and the “space” to put it into. That “space” must have adequate tissue and blood supply so that the transplanted fat can become integrated into the tissue and develop a blood supply.



*Sydney R. Coleman, M. D., plastic surgeon; New York City lecturing in Prague, Czech Republic*

### **What can you do with too skinny people? Is it possible to use only one's own fat?**

Many of our patients have low BMI's, but are able to have breast shaping and augmentation with fat grafts. Most women have localized collections of fat in their lovehandles, flanks, abdomen or thighs. For patients with a normal or low BMI, we may remove fat from multiple areas to obtain enough volume and to avoid problems with liposuction.

At the present time, we can use only autologous (one's own) fat. In the near future, we will probably have two more options: to culture or grow fatty tissue or to use fat from other humans. But neither will be available for years.

### **Adult has a certain number of fat cells that grow bigger or smaller. What about injected fat cells?**

Grafted fat is still fat and has the potential to grow. Transplanted fat acts like a hybrid of the donor and recipient areas. Grafted fat retains some of the memory from where it was harvested; but it also receives its instructions from local clues such as hormones. Usually it blends into the recipient site, and grows with the surrounding native fat around it.

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*Sydney R. Coleman, M. D. and Asc. Prof. Lubos Drazan M.D. PhD.*

**Is it true that you have been researching and perfecting the procedure for over a decade before making it available to the public?**

I have been performing fat grafting on my patients since 1987. Over the years, my technique has been refined and advanced dramatically. I started grafting fat to correct deformities created by bad liposuction of the body. As soon as I saw that it worked well there, I started using grafted fat to change the proportion of the face (enlarge lips, hollow cheeks, jawlines) and body (buttocks, calves, arms, et cetera). I noted that the effects of the fat are amazingly rejuvenating, so I began treating aging faces and hands. In 1995, I began grafting fat to the breast when no one else was, and waited ten years before I began speaking about the natural, amazing results I was able to safely obtain in both cosmetic breast surgery as well as reconstructive. Initially, fat grafting was a small part of my practice. Nowadays, it is the only type of surgery I perform.

**How long does it takes to see how much fat survived?**

A certain amount of fat absorbs in the first few months after the surgery, but at around 3-4 months after the surgery, "what you see is what you get". After that point, the transplanted fat survives for very long periods of time or even permanently; unless of course a patient loses a significant amount of weight.

*Please refer to [www.LipoStructure.com](http://www.LipoStructure.com) for a more extensive explanation.*

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