Drains are Not Needed in Body Contouring Procedures

Karol A Gutowski, MD, FACS

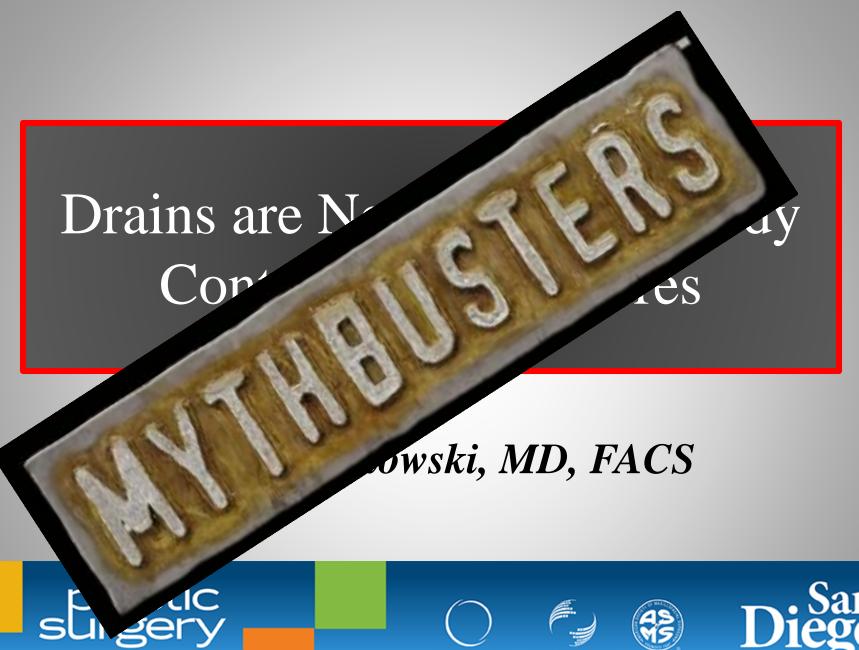




















Disclosures

The Doctors Company - Advisory Board Angiotech/Quill - Advisory Board Suneva Medical - Instructor Viora - Speaker

Will not discuss off-label uses



Objectives

Rethink the use of routine subcutaneous drains in body contouring procedures

Make a change in your practice

Improve your patient's experience



Common Drain Sites

- Breast
 - Reduction
 - Mastopexy
 - Augmentation
- Trunk
 - Abdominoplasty
 - Body lift
- Extremity
 - Arm lift
 - Thigh lift











Drains

- "Standard of care" but no supporting evidence
 - Do not prevent hematomas
 - No evidence in reducing seromas (non-lymphatic cases)
- Risks
 - Entry point for pathogens
 - Patient discomfort & anxiety at removal
 - More home care & less patient mobility
 - Additional scarring

RECONSTRUCTIVE

Evidence-Based Value of Subcutaneous Surgical Wound Drainage: The Largest Systematic Review and Meta-Analysis

Aaron M. Kosins, M.D., M.B.A. Thomas Scholz, M.D. Mine Cetinkaya, B.S. Gregory R. D. Evans, M.D.

Background: The purpose of this study was to determine the evidenced-based value of prophylactic drainage of subcutaneous wounds in surgery.

Methods: An electronic search was performed. Articles comparing subcutaneous prophylactic drainage with no drainage were identified and classified by level of evidence. If sufficient randomized controlled trials were included, a meta-analysis was performed using the random-effects model. Fifty-two randomized controlled trials were included in the meta-analysis. and

Drains in Breast Reduction



Evidence-based Clinical Practice Guideline: Reduction Mammaplasty

Drains. Although wound drains can minimize the amount of fluid at the surgical site, evidence indicates that the use of drains neither increases nor decreases postoperative complications, causes greater patient discomfort, and possibly increases the length of the hospital stay.²⁷⁻²⁹

Recommendation: In standard reduction mammaplasty procedures, evidence indicates that the use of drains is not beneficial.

However, if liposuction is used as an adjunctive technique, the decision to use drains should be left to the surgeon's discretion.

Level I, II Evidence: Grade A













Drains in Breast Augmentation

- No evidence to support drains in primary breast augmentation
- Drains may increase risk of capsular contracture 4x

 No guidelines for secondary cases with <u>capsulectomy</u> or with <u>biological products</u>



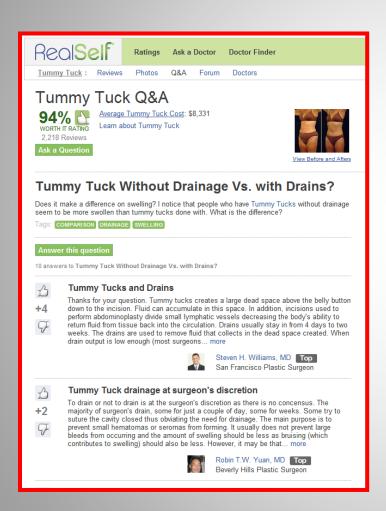


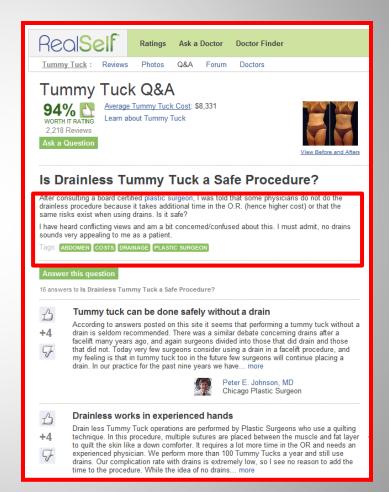






Patient's Perception of Drains











Patient's Perception of Drains













Drains in Abdominoplasty

Techniques in Cosmetic Surgery

Progressive Tension Sutures: A Technique to Reduce Local Complications in Abdominoplasty

Harlan Pollock, M.D., and Todd Pollock, M.D.

Dallas, Texas









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IDEAS AND INNOVATIONS

Use of Absorbable Running Barbed Suture and Progressive Tension Technique in Abdominoplasty: A Novel Approach

Allen D. Rosen, M.D.

Montclair, N.I.

PRS 2010

Body Contouring

Abdominoplasty With Progressive Tension Closure Using A Barbed Suture Technique

ASJ 2009

Jeremy P. Warner, MD; and Karol A. Gutowski, MD

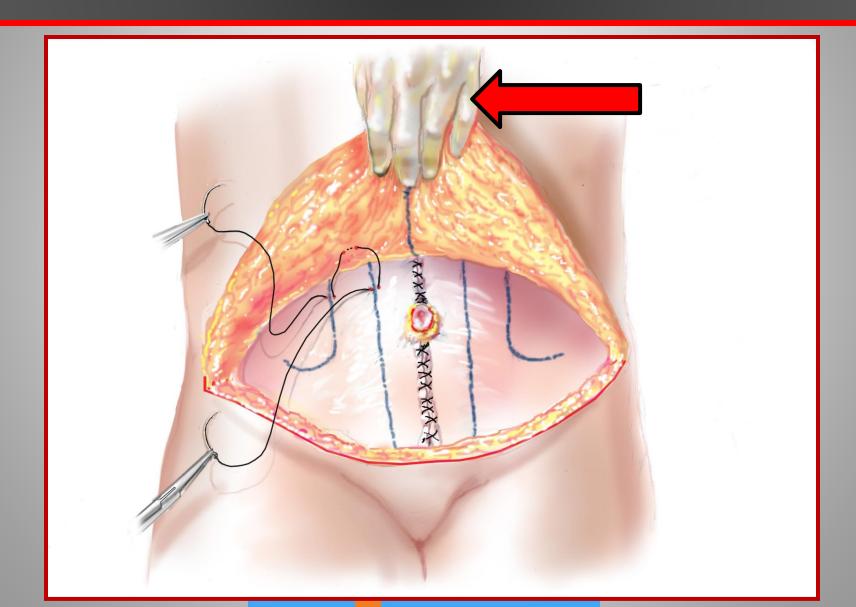




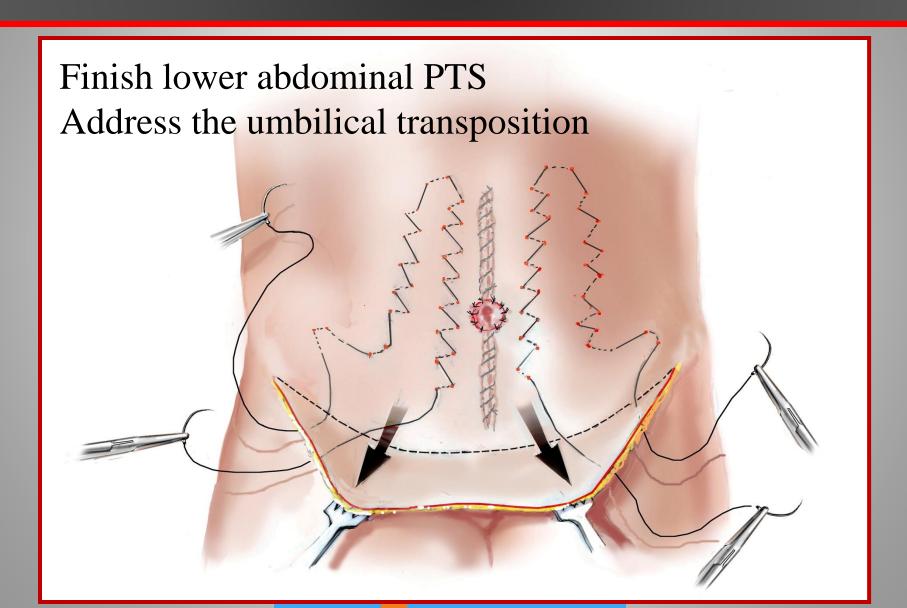




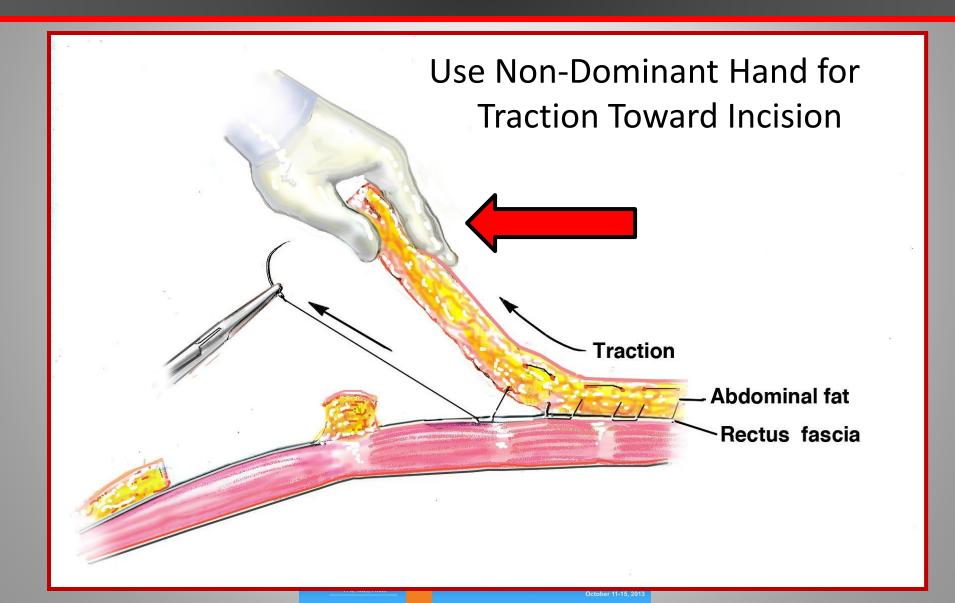
Barbed Progressive Tension Sutures



Barbed Progressive Tension Sutures



Barbed Progressive Tension Sutures



Body Lift

- Deep "3-point" interrupted sutures
 - Superficial fascia deep tissue superficial fascia
 or
- Running barbed suture in superficial fascia

- Either method closes the posterior dead space
- Abdominal binder or compression garment



Arm Lift

Medial or posterior incision

• "3-point" interrupted suture

or

Running barbed suture in superficial fascia

Moderate compression (ACE wrap or garment)



Thigh Lift

- Upper incision with or without medial incision
- Running barbed suture in superficial fascia
- Consider drain (remove next day if low output)
- Moderate compression (ACE wrap or garment)





Seroma Treatment

- Amount, location & timing
- Seroma treatment
 - Aspirate
 - Percutaneous drain (SeromaCath)
 - Sclerosing agent
 - Doxycycline 500 mg in 50 cc NS
 - Ethanol 95%
 - Seroma capsule excision







Breast Reduction (No Drains)

- Breast Reductions (481 patients, 910 breasts)
 - Tumescent infiltration (500 to 1000cc per breast)
 - 93% inferior pedicle with Wise pattern
 - 71% with lateral chest liposuction
- 4 hematomas (0.4%)
- 1 abscess (0.1%)
- 0 seroma





Abdominoplasty (No Drains)

- 177 Abdominoplasties + 34 Body lifts (211 patients)
 - Tumescent infiltration (1000 to 2000cc)
 - 78% with lateral truck liposuction
- Anterior barbed progressive tension sutures
- Posterior barbed running sutures
- Compression garments or binders
- Early ambulation





Abdominoplasty (No Drains)

Seroma		6	(3%)
Drained by single needle aspiration	4		
Drained by two needle aspirations	2		
Wound dehiscence (> 1 cm)		5	(2%)
Anterior & superficial (skin only)	2		
Posterior & superficial (skin only)	2		
Lateral & deep (Scarpa's fascia)	1		
Hematoma		0	(0%)





Arm & Thigh Lift (No Drains)

- Arm lift (51 patients, 102 arms)
 - Tumescent infiltration (100 to 300cc per arm)
 - 21% with posterior arm liposuction
 - 3 seromas (2 aspirated, 1 excised)
- Thigh lift (19 patients, 38 thighs)
 - Tumescent infiltration (400 to 800cc per thigh)
 - 44% with thigh liposuction
 - 7 no drain, 12 drain removed next day
 - 2 seromas (1 aspirated, 1 excised)





Arm lift

Mastopexy with lateral autoaugmentation

Body lift

Thigh lift



























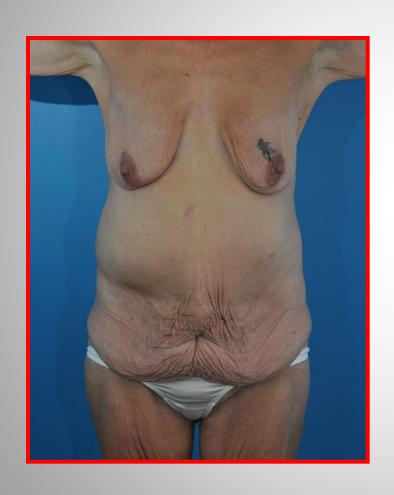








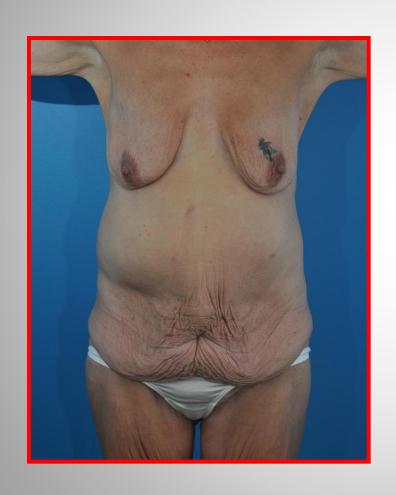


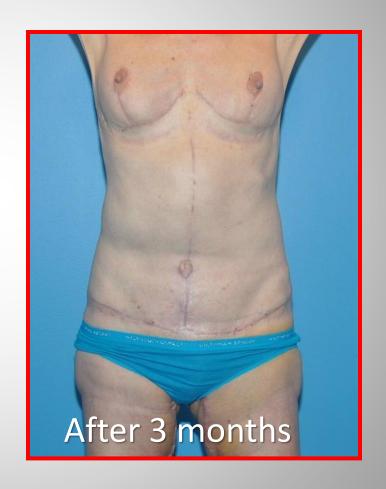




















Summary

- Little evidence for drains in body contouring
- Surgical technique can eliminate need for drains
- Low seroma incidence when drains not used

- Personal experience
 - No patient every asked for a drain to be used
 - All patients were happy that drains weren't used



Not Using Drains is an Uplifting Experience!









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Karol@DrGutowski.com

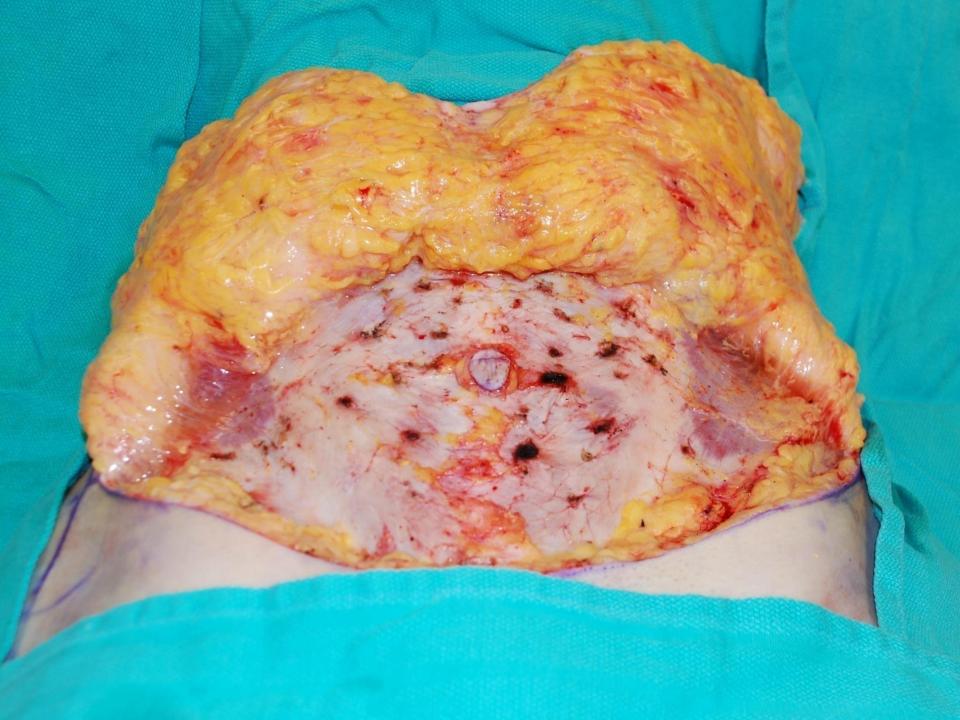


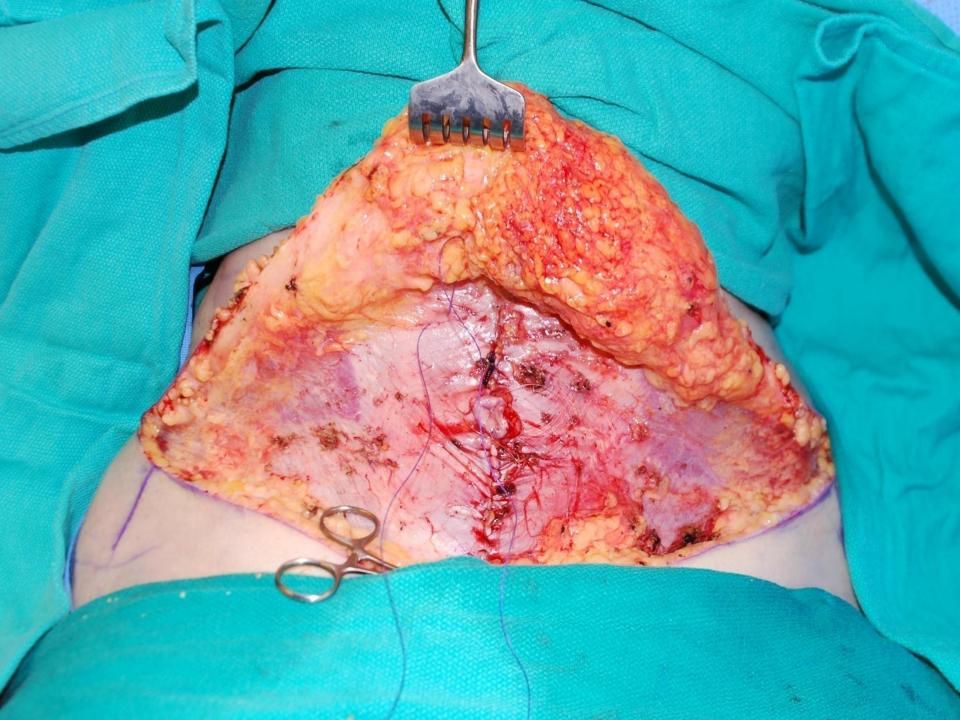


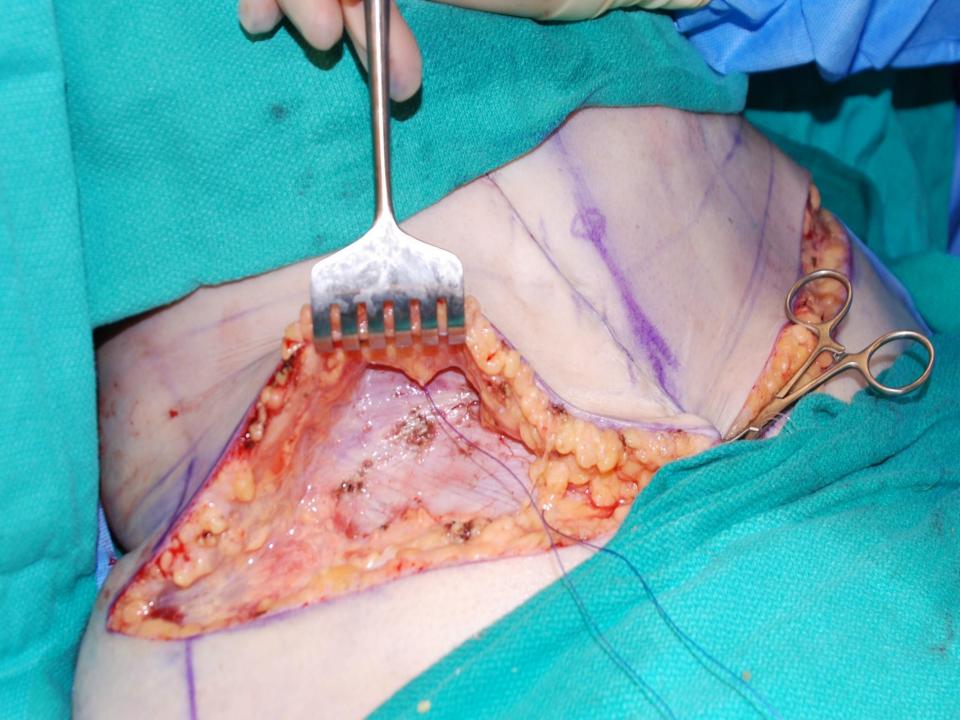
















BS-PTS Abdominoplasty (1 year)













BS-PTS Abdominoplasty (1 year)







BS-PTS Abdominoplasty (5 months)

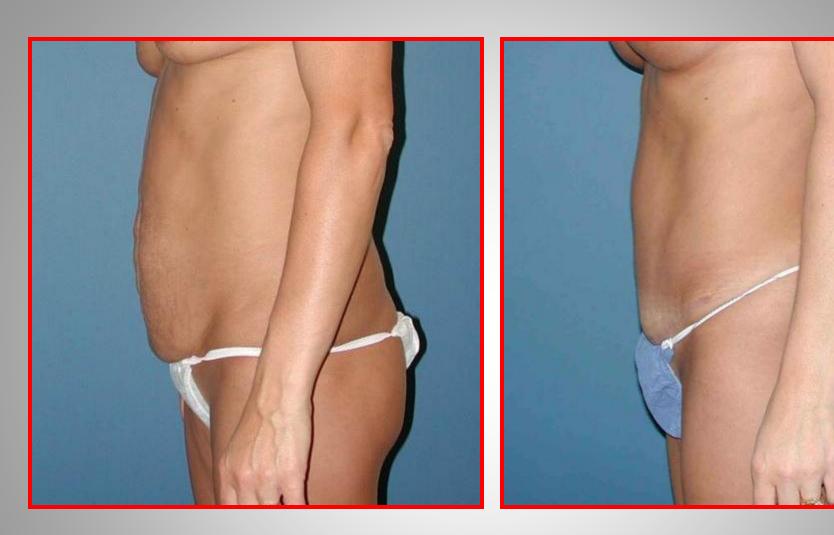






BS-PTS Abdominoplasty (5 months)





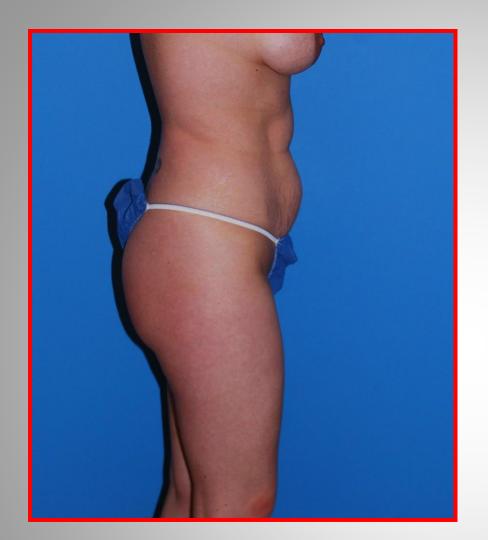
BS-PTS Abdominoplasty (5 months)





BS-PTS Abdominoplasty (7 weeks)







BS-PTS Abdominoplasty (7 weeks)







MWL BS-PTS Abdominoplasty & liposuction (4 months)







MWL BS-PTS Abdominoplasty & liposuction (4 months)







MWL BS-PTS Abdominoplasty & liposuction (4 months)







MWL BS-PTS Abdominoplasty & liposuction (4 months)



Video Presentation

