

Information Snapshot – Dr Kallyani Ponniah

Autologous Fat Transfer to Breast

Overview of Topic

Autologous fat transfer to the breast is also termed as lipofilling, fat grafting or liposculpturing. All refer to injecting fat harvested from another site in the body to the breast either to improve breast symmetry or increase volume.

While this is not a new technique, it has seen a resurgence in the recent years especially in managing breast defects post breast conserving surgery and as an adjunct in breast reconstruction.

Procedure Details

The procedure starts with liposuction whereby a cannula attached to suction is introduced into a donor site; commonly the thighs, flanks or abdomen. The harvested fat is processed in various ways aiming for the highest chance of viability prior to grafting. This fat is then injected via small stab incisions to the areas in the breast needing the volume. About 50% of this fat maybe reabsorbed by the body over time and thus several procedures are usually required to achieve the desired effect.

Clinical Advantages/Benefits to Patient

Encouraging results are seen with significant improvement in volume defects and nipple areola complex lateralisation commonly noted after breast conserving surgery and radiation treatment. With the advent of pre-pectoral reconstruction where the prosthesis is placed just under the skin, fat grafting allows a slightly smaller implant to be used with the natural overlying shape and volume being complemented by the grafted fat. The term hybrid reconstruction has been used in this context. Success with smoothing rippling on the skin post breast augmentation and reconstruction are well documented. Evidence also suggests that fat grafting can make the breast feel softer and help with radiation induced changes.

Information For Gp Referrers

Surgeons will consider and always discuss some short falls to this procedure namely fat necrosis and oil cysts that affect clinical examination and mimic cancers on imaging down the line. Improved technique and experienced radiologist have largely reduced this concern. Whilst short term studies report good outcomes, large multicentre studies and long term follow-up are definitely required; especially on the stem cell re-growth pattern. Fat grafting is an exciting new technique with great potential. Improved skills and adherence to best practice with good surveillance makes this procedure an option for some.

About Specialist

Dr Ponniah is a General and Breast Oncoplastic Surgeon. She is currently the Head of Department of the Breast Centre at Sir Charles Gairdner Hospital, Perth and has recently opened her private practice at Hollywood Private Hospital. Dr Ponniah specialises in breast disease and cancer and takes care of those at high risk. She has been operating in this field for over 15 years. Click here to read more about Dr Ponniah and her work at Hollywood Private Hospital.



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