

**CONFERENCE ARTICLE****CLINICAL FEATURES OF LIPOFILING FOR VARIOUS DEFORMATIONS OF THE FACIAL REGION****Shukhrat Boymuradov<sup>1</sup>, Iftikhor Nigmatov<sup>2</sup>, Shokhrukh Yusupov<sup>3</sup>**<sup>1,2,3</sup>Tashkent Medical Academy, Uzbekistan**ABSTRACT**

Autotransplantation of adipose tissue (lipofilling) is a technique for improving facial aesthetics and in recent years has been actively used in addition to reconstructive operations in cranio-maxillofacial surgery.

For the first time, autologous adipose tissue transplantation was performed by Neuber G.A. open access. Later, Hollander E., Neuhoof H. and Joseph continued to deal with the use of lipofilling in maxillofacial surgery. This technique has been actively used to treat congenital anomalies, concomitant injuries, as well as after tumor resections and ablative surgery. Illouz Y.G. and Fournier P.F. presented closed liposuction and the vacuum pump technique, and the autotransplantation itself was called "lipofilling".

**Keywords:** Post-traumatic, Autotransplantation, adipose tissue (lipofilling), "Different" and "similar".

**INTRODUCTION**

The study involved 36 patients (of whom 14 men – 38,8%, 22 women – 61,1%) aged 20 to 50 years (average age - 31.6) with various congenital and acquired defects and deformities of the maxillofacial region, who reconstructive operations were performed in combination with lipofilling (one-stage or separate stage). Among the patients: 18 people (50%) with congenital anomalies of the maxillofacial region and 18 people (50%) with acquired (post-traumatic - 25% and postoperative - 25%) defects and deformities of the maxillofacial region. Inclusion criteria were facial asymmetry due to surgical treatment, trauma, and the presence of a lack of soft tissues after trauma and retracted scars.

Results. Adipose tissue autotransplantation was performed using the Coleman technique. The donor sites were the abdomen (93%) and thighs (16%). We processed the collected lipoaspirate by centrifugation for 3 minutes at a speed of 3000 rpm in a sterile environment. The purified adipose tissue was injected into the recipient area in layers, while the graft areas were separated from each other by the recipient tissues.

Clinical examination, analysis of photographs and radiation diagnostics showed an adequate balance and symmetry of the face, an increase in the volume of soft tissues and, as a consequence, an improvement in the aesthetic results of the treatment.

According to the data of an objective examination, an assessment of VIL and a comparative analysis, 13 patients were identified: 2 person (14%) as different, 4 (33.8%) - similar, 4 (34.5%) - similar, 3 (29%) - identical. "Different" and "similar" faces were noted in people with significant soft tissue deficits who underwent one or two lipofilling procedures. These patients showed significant resorption of the fatty autograft, and additional correction is required to achieve an optimal result. Lipofilling is considered a fairly safe procedure. However, in addition to standard postoperative complications such as bruising and edema, aesthetic dysproportions, infection, vascular and nerve damage, and intravascular embolization can occur with a fairly wide range of severity. With strict adherence to the protocol of the operation and the maximum use of only blunt cannulas, the risk of these complications is minimized.

Auto transplantation of adipose tissue can be considered a fairly effective technique for correcting congenital and acquired defects and deformities of the maxillofacial region. In addition, this technique provides stable long-term results and helps avoid other more traumatic reconstructive procedures, which reduces the risk of serious complications.

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