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LONG-TERM RESULTS OF PATIENTS WITH DEFORMATION OF THE ANTERIOR ABDOMINAL WALL AFTER ABDOMINOPLASTY

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Abstract.

Abdominoplasty remains one of the urgent problems in modern abdominosurgery. The relevance is associated with an increase in the number of patients with obesity, ptosis in women after childbirth and in patients with recurrent ventral hernias. We have studied 413 patients, of which 204 are control, 209 are the main group. The developed method of abdominoplasty provides less trauma, preservation of anatomical structures, and short rehabilitation periods. The development and application of a therapeutic and diagnostic algorithm for surgical correction of various types of deformity made it possible to avoid cases of recurrence of deformity, to increase the level of lung capacity elimination of complications in the immediate postoperative period with a decrease in the frequency of their development by 2.4% and increase the number of good results with the achievement of an aesthetic and functional effect by 21.7%.

Key words: abdominosurgery, abdominoplasty, surgical correction

INTRODUCTION

Abdominoplasty remains one of the most common surgical interventions in plastic surgery, which is associated with an increase in the requirements for the quality of life, an increased desire to be not only healthy, but also beautiful [9;10;12;16].

Abdominoplasty not only saves people from insecurity and complexes, which get the opportunity to dress without worrying about the need to mask a bulging or hanging belly, but also relieves a number of related functional disorders [3;5;19].

Abdominoplasty in aesthetic surgery has become a widespread type of surgical intervention. However, at present, many questions remain insufficiently developed [2;20].

H. Kelly in 1899 first proposed the term "abdominal lipectomy" and removed the fatty tissue of the anterior abdominal wall in a patient operated on for gynecological diseases [4]. Historically, surgeons measured the quantity of life rather than its quality, and the effectiveness of surgical methods was determined by mortality rates, the presence of postoperative complications, the main attention was focused on improving surgical techniques, which was certainly important [13]. The number and quality of simultaneous operations and abdominoplasty in ventral hernias directly depend on the level of the surgeon's professional training [6;8;11;15]. According to Abalmasov K.G. et al. (2006) for the prevention of prolonged lymphorrhea followed by the formation of seromas suggested leaving 0.6-0.8 cm of adipose

tissue on the aponeurosis of the muscles of the anterior abdominal wall during the removal of the skin fat apron [1].

The proposed numerous modifications of abdominoplasty can be reduced to the main types of surgical interventions: classical, vertical, combined and miniabdominoplasty [14;16;17]. Surgical correction of a sagging abdomen is also accompanied by an improvement in lipid profile indicators: a decrease in the concentration of triglycerides, lowdensity lipoproteins, and total cholesterol in the blood serum; contributes to the successful compensation of carbohydrate metabolism by reducing insulin resistance and hyperinsulinemia [7;18]. In addition, lipectomy of the anterior abdominal wall, in contrast to the conservative treatment of obesity, is accompanied by a more favorable course of hypertension, coronary artery disease.

The purpose of the study: to improve the results of surgical treatment in patients with deformity of the anterior abdominal wall.

MATERIAL AND METHODS

The method consists in excision of excess subcutaneous adipose tissue, strengthening of the muscular aponeurotic frame, fixation of the navel in a new place, after its isolation, layer-by-layer stitching of the wound defect using cosmetic sutures. The method is carried out as follows: After incision of the skin and subcutaneous fat along the lower border of the markup, with careful hemostasis, the skin-fat flap is mobilized to the level of the costal arches and

anterior axillary lines along the flanks with the umbilical ring on the pedicle exposed. In patients with pronounced subcutaneous adipose tissue, techniques are used to separate tissues of adipose tissue using coagulation tweezers.

A prospective - retrospective analysis over 7 years of 413 patients with various types of deformation of the anterior abdominal wall operated in our clinic was carried out. Of these, 126 (12.2%) men, whose average age was 48.4 ± 7.2 years, 287 (87.8%) women, their average age was 44.5 ± 9.3 years.

All patients were divided into 2 groups: control and main. The control group consisted of 204 (48.8%) patients who underwent one of the three types of surgery in the form of classical, lateral or miniabdominoplasty, depending on the degree of ptosis of the anterior abdominal wall based on the use of generally accepted methods for its assessment. The mean age was 44.6 ± 5.8 years.

The main group consisted of 209 (51.2%) patients who underwent surgical correction of the anterior abdominal wall by tunneling in combination with liposuction. The criteria for tactical methods of the treatment and diagnostic algorithm in the main group of patients were based on the data of a computer simulation program developed by us, which determines the degree of deformation of the anterior abdominal wall. The mean age was 43.7 ± 8.2 years.

The separation of the control and main groups means that the use of tunnel abdominoplasty in combination with liposuction based on determining the degree of deformation of the anterior abdominal wall is the main subject of comparative research.

RESULTS & DISCUSSION

Early activation of patients, reduction of material costs, postoperative complications are significantly reduced: pulmonary vascular, thromboembolic, fewer hematomas, ligature abscesses. The criteria for a good result were: the absence of complications in the immediate, early and late postoperative periods; achievement of functional and aesthetic effect after abdominoplasty; no recurrence of the deformity. The criteria for a satisfactory result were: the occurrence of postoperative complications (seroma, hematoma, suppuration of the postoperative wound) with their subsequent elimination as soon as possible. The functional and aesthetic effect is achieved, and there is no recurrence of the deformity. The criteria for an

unsatisfactory result were: the presence of complications in the immediate, early postoperative period (divergence of sutures and necrosis of the skin-fat flap) provoking the development of local complications in the late postoperative period (deformations of the postoperative scar and umbilical ring). In case of failure to achieve a functional and aesthetic effect of the operation and the development of a relapse of the disease.

CONCLUSIONS

When evaluating the late results of aesthetic operations for various types of deformation of the anterior abdominal wall, we used a cohort analysis method. The results were rated as good, satisfactory and not satisfactory.

Low invasiveness, preservation of the integrity of muscle fibers, intercostal nerves and blood vessels, earlier terms of rehabilitation, cosmetic effect, the possibility of using conventional instruments, a smaller number of immediate and long-term complications, allows us to recommend the use of this method in abdominoplasty surgery for deformation of the anterior abdominal wall.

The development and application of a therapeutic and diagnostic algorithm for surgical correction of various types of AJ deformity made it possible to avoid cases of recurrence of deformity, to increase the level of lung capacity elimination of complications in the immediate postoperative period with a decrease in the frequency of their development by 2.4% and increase the number of good results with the achievement of an aesthetic and functional effect by 21.7%.

CONFLICT OF INTEREST, FINANCING & COMPLIANCE WITH PATIENT RIGHTS AND PRINCIPLES OF BIOETHICS

The author declares no conflict of interest. The study was performed without external funding. All patients gave written informed consent to participate in the study.

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