

The Use of Phosphatidylcholine for Correction of Localized Fat Deposits

Patrícia Guedes Rittes, M.D.

São Paulo, Brazil

Abstract. Subjects with localized fat deposits commonly receive suction lipectomy as a cosmetic procedure. A new office procedure for correction of those superficial fat deposits was applied in 50 patients by injection of phosphatidylcholine. The method itself consists of using a 30G1/2 insulin needle to inject about 5 ml (250 mg/5 ml) of phosphatidylcholine into the fat, distributing it evenly in an 80-cm² area. Pre- and posttreatment photographs were taken for technical planning and analysis of the results over the long term. A clear improvement occurred in all, with a marked reduction of the fat deposits without recurrence over a 2-year follow-up period and no weight gain. The injection of phosphatidylcholine into the fat deposits is a simple office procedure that can sometimes postpone or even replace surgery and liposuction.

Key words: Lipostabil—Phosphatidylcholine—Fat deposits

Introduction

A new and simple technique for treating fat deposits is described in this article. Liposuction is one of the most commonly performed cosmetic procedures [1] for the treatment of minimal to moderate localized fat deposits. The safety of the procedure has been addressed regarding patient selection, complications, and results.

I have been using this technique since 1995, achieving very good results. At first, only fat pads [2] were the focus of this procedure, which was introduced to the scientific community at the Dermatologic Brazilian Congress in 1999 and published by

Dermatologic Surgery in April 2001. Three years later, localized fat is the goal to be achieved, and due to the excellent results, with no complications or adverse effects, this procedure has proved to be extremely efficient in contouring and remodeling superficial fat areas, such as arms, abdomen, thigh, and neck. Treating these deformities by surgical resection as well as liposuction presents some adverse effects and surgical risks.

Pre- and postprocedure photographs of the cases studied document the new method described. Patient satisfaction and absence of recurrence were the best evaluators of the results. The intervals are discussed further under Materials and Methods. The procedure is simple and can be done in the office.

Various studies have reported the use of phosphatidylcholine (Lipostabil) for reduction of systemic levels of cholesterol and triglycerides [3,4]. However, a study by Bobkova et al. [5] verified that upon increasing phosphatidylcholine, the cell membranes improved their receptor properties, augmented their sensitivity to insulin, and accelerated lipolysis. Hence there is a marked reduction in atheromatous plaques and the level of aortic cholesterol, without a reduction in plasma cholesterol. In other studies Lipostabil was employed intravenously in patients with cardiac ischemia [6].

Phosphatidylcholine is a bile component and is responsible for lipid emulsification from diet [7].

Materials and Methods

Preoperative Analysis

Preoperatively, it is essential to discuss the patient's real expectations. Evaluation of the size and location of the fat deposits is necessary.

The method itself consists of using a 30G1/2 insulin needle to inject about 5 ml (250 mg/5 ml) of phosphatidylcholine into the fat, distributing it

Correspondence to Patrícia Guedes Rittes, M.D., Rua Afonso Brás 864, cj. 72, Vila Nova Conceição, São Paulo, SP, Brazil CEP 04511-011; email: prittes@terra.com.br