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## Percutaneous x transcutaneous electrolipolysis: A comparative study in physically active women

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**Introduction:** Electrolipolysis is a micro-current that acts directly on reducing localized fat, generating a lipolytic action at the level of adipocytes and accumulated lipids. The micro-current application can happen through percutaneous or transcutaneous way. Previous studies showed that the isolated electrolipolise is effective to trigger lipolysis, but the results are more effective if applied to physically active people.

**Objective:** To compare effects between the two methods of electrolipolysis application in abdominal region in two patients physically active.

**Methods:** Comparative study of the case involved two women volunteers physically active. The women underwent an abdominal measurement evaluation and photo documentation before and after the intervention, one using percutaneous method and one using transcutaneous method. The intervention lasted five weeks, totaling 10 sessions 2 times weekly, lasting 50 minutes.

**Results:** Abdominal measurements values found in each participant were recorded in simple tables. The photographic records were used for comparison of before and after. Reduction of abdominal measures was observed in both participants, but the reduction was more significant on the patient that used the percutaneous electrolipolysis.

**Conclusion:** In this study it was observed that electrolipolysis is effective in reducing localized abdominal fat, but the transcutaneous method showed greater reduction on abdominal measures.

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## Primary tendon grafting of flexor tendons injuries in zone II

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**Background:** Obtaining good functional outcomes after flexor tendon repair in zone II has always become a challenge due to being crowded by the FDP and the two slips of the FDS within a tight fibroosseous tunnel, thus increasing the possibility of postoperative adhesions. Methods of primary flexor tendon repair are continuously being modified still today. For achieving better results, primary flexor tendon grafting was suggested as new approach for flexor tendon repair in zone II.

**Methods:** This study was conducted on 24 patients (30 digits) with primary tendon grafting which was done using palmaris tendon. Tendon graft interposition was done for FDP and FPL tendons distally, in zone I and proximally, in zone III and zone V for (respectively) bypassing zone II. FDS cut ends was done in situ in zone II. Modified Kleinert technique was chosen for rehabilitation and adjusted Strickland system for evaluation of TAM. Follow up of the ROM was extended up to six months postoperatively.

**Results:** Results described recovery of motion in 93.3% of cases. Excellent to good results account for 66.6% at 12 weeks postoperatively and 70% at 6 months postoperatively. Complications incidence was 19.2 % in the form of tendon rupture (6.7%) and superficial wound infection (12.5 %).

**Conclusions:** Results of this study revealed that primary flexor tendon grafting could be a competitive approach for flexor tendon injuries in zone II.

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