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SOFT TISSUE AUGMENTATION WITH POLYMETHYMETHACRYLATE (PMMA) FOR CORRECTION OF LIPODYSTROPHY RELATED BODY FAT ATROPHY

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AIM: We have been successfully treating facial atrophy with PMMA for the last 6 years, but in the last few years patients have started to complain about body shape changes. Particularly in women, exacerbation of the appearance of superficial veins in arms and legs, and losing the shape of the hips have become problems, leading to a need to change the way they dress. For both genders, the loss of fat in the buttocks can lead to pain if they are seated for a long time and can sometimes expose the anus, leading to problems with clothes again. Fat transplant is an excellent option for treating these areas, but not all patients have a donor area. In these cases we have started to perform PMMA implants for treatment of body fat loss-related lipodystrophy.

METHODS: Body atrophic areas were treated with a PMMA solution containing methylcellulose and lidocaine. Treatment consisted of parallel and net-crossed retro-injections in the subcutaneous area of the PMMA solution in three different concentrations: 30% for buttocks, upper legs and around the knees; 30 or 20% for lower legs; and 10% for arms and hands. A 5-day course of antibiotics and anti-inflammatory medications was prescribed for each session, starting on day 1, right after the procedure. Patients were photographed and followed-up every 45 days. Sessions were performed with a minimum interval of 10–12 weeks for each treated area.

RESULTS: Twenty-two patients were included in this study, 10 men and 12 women. Twenty-seven areas were treated: 14 buttock areas, nine legs, three arms and one pubis and perineum area.

Buttocks were treated with 40 ml of PMMA solution on each session, upper and lower legs with around 20–30 ml, and arms and hands with 10 ml.

Patients needed, in median, two to three sessions to achieve good cosmetic results. Some patients reported excellent results in hiding the appearance of arm and leg veins. Good improvement of the overall appearance of arms and legs after filling the depressions between the muscles was observed, and improvement of the exposition of the anus. All patients who had implantation on the buttocks felt more comfortable when being seated for a long time. Side effects were oedema and redness of the treated area, and light to moderate pain that last for 2–3 days, which improved with paracetamol. No infections or inflammatory granulloma were observed. Patients were satisfied with the results of the treatment and reported feeling more self confident. Women were satisfied by the fact that they could wear trousers with shorter blouses again and were able to wear shorter skirts, reporting improvement in quality of life issues.

CONCLUSION: Use of PMMA solution for treatment of body contours in lipodystrophy is shown to be safe and effective with good cosmetic results, helping patients to become more self confident and improving their quality of life.

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49