

# ADVANCES IN THIGH LIFT & REDUCTION PROCEDURES

After Weight Loss

by **Siamak Agha, MD, PhD, FACS**

## Ideal Thigh Aesthetics

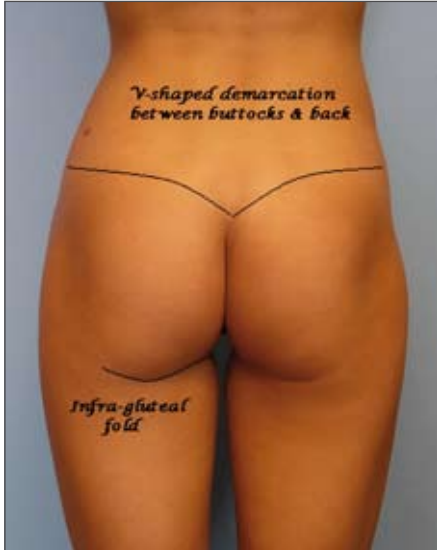
The ideal thighs present certain features that define an aesthetically beautiful and healthy figure. These include thighs that are proportionate to the buttocks, abdomen, and legs. There is a gentle and smooth convexity of the thigh front which conforms to the large muscle mass as opposed to the flattened thigh back. The inner thigh is firm and flat. The trunk and outer thigh follow an hour-glass silhouette with pleasing concavity of the waist, rising to a smooth convexity of the outer thighs.

From the front, the thighs are separated from the abdominal region and groin area by the groin crease that extends towards the back as the V-shaped demarcation of buttock and lower back tissue. Furthermore, from the back, the upper thigh is distinguished from the lower buttock by a well-defined crease known as the infragluteal fold.

Both men and women who have loose thigh skin and tissue will benefit from a thigh lift. The skin is usually saggy, flabby, and/or dimpled and will not respond sufficiently to liposuction.



## Nature of Thigh Distortion after Weight Loss



After significant weight loss, there is a variable degree of thigh tissue distortion that is dependent on the individual's genetic predisposition, gender, extent of weight loss and the remaining weight. For those patients who have lost most of their excess weight, there is a characteristic presentation. Generally speaking, deflation of the thighs results in tissue laxity in both a vertical and horizontal (circumferential)

direction. Almost all weight loss patients will have vertical thigh laxity. This is seen as stretched out thigh tissue at the waist area, an inner thigh roll and an outer thigh bulge (commonly referred to as saddlebags). With significant weight gain and loss, some patients will also experience circumferential thigh laxity as well as vertical laxity. In these patients, in addition to the changes noted above, the excess thigh tissue forms cascading rolls on the inner surface that progressively diminish toward the knees. I have noticed that less than half of my post-bariatric patients have significant widening of their thighs circumferentially. As women have less muscular mass and more fatty tissue, the changes are typically more profound than in men.

Compounding these thigh changes, the weight loss patient often experiences unique distortion of the lower back and buttock regions. I believe that it is important to look at these changes in combination with the thighs, and treat these areas surgically in union.

### Thighplasty Procedures

One of the most challenging procedures in Post-bariatric plastic surgery is the thigh lift or thighplasty surgery. This is because the thigh deformity is variable; the thigh contour is heavily influenced by the adjacent regions such as the abdomen, waist and buttocks; the tissues are heavy and subject to considerable movement; and the location of the thigh incisions next to the groin make them more prone to contamination. Thighplasty refers to a number of thigh surgeries that involve removal of excess thigh skin and fat. The aim of a successful thighplasty procedure

should be reduction of the thigh excess and correction of thigh descent. The new contour should follow the aesthetic features of the thigh, the scars should be inconspicuous, and the creases reconstructed meticulously. I prefer to use the term "thigh lift" to denote elevation of the thigh in a vertical direction and reserves the term "thighplasty" for circumferential (horizontal) reduction of the thigh.

### The current thighplasty techniques include:

- 1) Upper-inner thigh lift for correction of the loose skin of the inner thigh. This is the current thigh lift procedure that is used for non-bariatric patients. The procedure however does not elevate the back or the front of the thigh.
- 2) Lower body lift to correct the outer thigh.
- 3) Vertical thighplasty to correct for the excess circumferential laxity

Many plastic surgeons prefer to use predominantly the vertical thighplasty to reduce thigh laxity in weight loss patients. This is understandable given the limitations of the current inner thigh lift in correcting the vertical thigh laxity of the weight loss patient. In recent years I, together with Dr. Dennis Hurwitz, have pioneered a new technique of thigh lift. Termed the Spiral Thigh Lift™, the new thigh lift procedure corrects for the vertical laxity of the back, inner surface and front of the thigh. When performed together with a lower body lift, the Spiral Thigh Lift produces circumferential thigh lift that is needed by almost all weight loss patients.

### Spiral Thigh Lift

Spiral Thigh Lift™ is the signature thigh lift procedure that we developed for those who have vertical laxity of the thighs. As the name implies, the Spiral Thigh Lift™ improves the laxity of thigh front, back, and the inner



This picture shows the loss of the infra-gluteal crease in a weight loss patient. The buttock area is deflated, sagging and loose. The lower buttock flows into the upper thigh adversely affecting the contour and boundaries of both structures.

surface. In many weight loss patients, the infra-gluteal crease becomes loose. This results in loss of demarcation between the lower buttock and upper thigh regions. Consequently, the buttock flows into the thigh obscuring both the buttock and thigh shapes.

The procedure starts on the back with an incision below the buttock fold (infra-gluteal crease). Through this incision, the excess tissue of the upper thigh back is excised. The thigh is then elevated to a higher position and secured to the underlying tissue. The infra-gluteal crease is then meticulously reconstructed. This will enhance the shape of both the buttock region as well as the thigh. The remaining laxity of the front and inner thigh are then corrected by continuing the 2 incisions over the groin crease and on upper thigh parallel to it. A wedge of excess skin with fat is then removed, and the inner thigh is lifted and secured at a higher position. The groin crease is then reconstructed so that the scar is undetectable under clothing. This provides a tighter and smoother thigh contour and enhanced skin flow.

In essence, the Spiral Thigh Lift combines the incisions of the thigh lift with that of a lower body lift to improve the thigh contour circumferentially. For many patients, the Spiral Thigh Lift™ can provide adequate improvement in thigh laxity, without the more disfiguring

scar of the thighplasty. However, this depends on each person's expectations and desires.

### Vertical Thighplasty

A vertical thighplasty is recommended for the treatment of loose thigh skin in a circumferential (horizontal) dimension. The procedure involves removal of a large ellipse of skin and tissue of the inner thigh through a vertical incision that starts at the groin crease and extends to the inner knee. It is a thigh reduction procedure, not a lift. Also, vertical thighplasty is the procedure that is often performed by many plastic surgeons, instead of a thigh lift. In my practice, the procedure is recommended for a select number of patients who have lost significant weight and present with significant thigh laxity. About one third of the weight loss patients typically require a vertical thighplasty. For these patients, I combine the vertical thighplasty and the Spiral Thigh Lift™ to obtain circumferential thigh reduction and thigh lift. Whereas the scars after the Spiral Thigh Lift™ are covered by most underpants, the vertical thighplasty scar will be seen when the inner thighs are exposed.



These pictures show the pre-operative markings of the Spiral Thigh Lift™ on one side and the post-operative results of the same patient after two weeks. The patient also had buttock augmentation with her lower back tissue as well as a lower body lift (with circumferential tummy tuck and buttock lift). As can be seen, many of the incisions are still fresh and healing. Note the careful re-creation of the groin crease in front and the crease under the buttocks.



**Dr. Agha** operates primarily out of Newport Beach, California. ([www.plasticsurgerybodycontouring.com](http://www.plasticsurgerybodycontouring.com)) The Spiral Thigh Lift™ technique is to appear in the new Plastic Surgery Textbook "Encyclopedia of Body Contouring after Weight Loss". (2010)



These pictures show the pre-operative pictures of a weight loss patient who has significant thigh laxity in both a vertical and circumferential direction. The patient would have benefited from both a Spiral Thigh Lift™ and a vertical thighplasty. (However, the patient only wanted a vertical thighplasty. Her pre-operative pictures and markings are shown on the top row. The lower row shows her corresponding post-operative pictures at six months after her surgery.)