

BROMHYDROSIS AXILLARY WITH LIPOSUCTION UNDER SURGICAL TUMESCENT ANESTHESIA TECHNIQUE

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BACKGROUND

Bromhidrosis axillary is a clinical disorder characterized by excessive or abnormal underarm odor due to the decomposition products of apocrine glands by normal flora bacteria. Invasive treatment include conventional surgery, combination of CO2 laser surgery and removal of subcutaneous tissue, tumescent liposuction and upper thoracic sympathectomy. Patients feel embarrassed with her excessive sweat and odor. Patients had been used deodorant and antiperspirant but there is no improvement.

CASE

A 30-year-old woman with axillary bromhidrosis given therapy with liposuction under surgical tumescent anesthesia technique on the right and left underarm.

PROCEDURE



A 30-year-old woman with axillary bromhidrosis



Operation design on the axilla sweat pattern



Aseptic and antiseptic procedure with Betadine®



Local anesthesia with Pehacain® at incision points

Incise incision line with blade #15 in lateral axilla for entering infiltrator cannula



Delivering tumescent anesthesia using infiltrator cannula 3 mm (Tulip Co) until skin bulged (35 cc solution each side)



After 20 minutes, surgery was performed



Using the blunt-ended "Cassio Villaca Current Cannula" we aggressively and repeatedly curetted the entire subcutis into a very superficial plane, until the axillary skin thinned



Tumescent fluid and amputated glands were expressed manually through the openings until nothing more was being extruded



The incision points were not closed, pressure with thick, absorbent gauze on the axillary's folds will suffice post-operatively, and will heal in 3 days



Before and after the thickness of apocrine glands

DISCUSSION

Liposuction under surgical tumescent anesthesia technique has been done on this patient and give an excellent result. Three day after postoperative there were decreased of sweat and odor on both under arm. Liposuction under surgical tumescent anesthesia technique is a method with a simple and safe procedure.

REFERENCE

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