



Case Report

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A Non-Surgical Approach to Treat Gluteal Asymmetry Due to Large Hemangioma: A Case Report

Matheus Arantes^{1*}, Paula Faria¹, Matheus Kasai², Claudia Camargo¹ and Renata Viana²¹Matheus Arantes Institute, São Paulo, Brazil²Private Practice, São Paulo, Brazil**Submission:** May 29, 2024; **Published:** June 11, 2024***Corresponding author:** Matheus Arantes, Matheus Arantes Institute, São Paulo, Brazil, Email: drmatheusarantes@gmail.com**Abstract**

This case report details the successful non-surgical correction of gluteal asymmetry resulting from hemangioma using hyaluronic acid (HA) dermal fillers. The treatment plan involved injecting a reticulated multiphasic HA-based dermal filler, into the left buttock to achieve harmonization with the right side. A Total of 30 mL of the product was injected into the subcutaneous gluteal plane, resulting in excellent aesthetic outcomes with no complications. Aesthetic satisfaction was assessed using the Global Aesthetic Improvement Scale, with the patient reporting complete satisfaction and a "much improved" rating score. This report underscores the crucial role of comprehensive patient discussions regarding treatment options for body deformity correction. The increasing demand for minimally invasive procedures, such as HA dermal fillers, is noted, showing positive outcomes and high patient satisfaction. Thorough planning, precise skin marking, and appropriate product selection contribute to successful outcomes. Although studies indicate the effectiveness of HA fillers in gluteal augmentation, more research is needed to determine the long-term durability of results.

Keywords: Gluteal asymmetry; Hyaluronic acid fillers; Non-surgical body augmentation; Harmonization; Gluteal augmentation**Abbreviation:** HA: Hyaluronic Acid; GAIS: Global Aesthetic Improvement Scale; MRI: Magnetic Resonance Images; CT: Computed Tomography**Introduction**

Body asymmetry or defects can significantly impact an individual's self-esteem and self-image. Hemangiomas, although benign, can cause noticeable body defects, requiring various cosmetic treatment options ranging from surgical procedures such as silicone implants and flap surgery, to non-surgical treatment alternatives such as autologous fat injections, fat transfer, or alternatives allogeneous injections [1]. Hyaluronic acid (HA) fillers, known for their rheological and physicochemical properties, have been safely used for face lifts and facial rejuvenation and have now been applied for body harmonization and augmentation [2-4].

Case Report

The case involves a 42-year-old healthy female with Foto type 2 skin, presenting significant gluteal asymmetry and dissatisfaction with her buttocks. The patient provided informed consent for publication of this case report and accompanying images.

The patient reported experiencing pain and progressive enlargement of the right buttock since the age of 2. Upon clinical examination, visible buttock asymmetry, a palpable dense mass, and a scar located on the right buttock were observed. Previous radiological investigations, including ultrasound and computed tomography (CT) scan of the gluteal region, confirmed the presence of a benign soft tissue mass. The mass exhibited heterogeneous enhancement after contrast administration in the right gluteal region. In Figure 1, magnetic resonance images (MRI) revealed an extensive lesion with high signal intensity on T2-weighted sequences, involving the sacral roots on the right, infiltrating the sciatic foramen, piriformis muscle, and gluteal musculature on the same side. The lesion measured up to 10 cm in its largest axial dimension.

At the age of 18, after undergoing several examinations and an open surgery with biopsy, which resulted in a substantial

scar, the patient was finally diagnosed with gluteal hemangioma. Following the diagnosis, the volume of the right buttock ceased to grow and stabilized, but the asymmetry persisted. This condition significantly impacted the patient's body image, body satisfaction, and self-esteem. Prior to the treatment, a satisfaction

questionnaire was administered, revealing the patient's complete dissatisfaction with her buttocks. The treatment plan involved injections on the left side of the buttock to achieve harmonization with the right side.

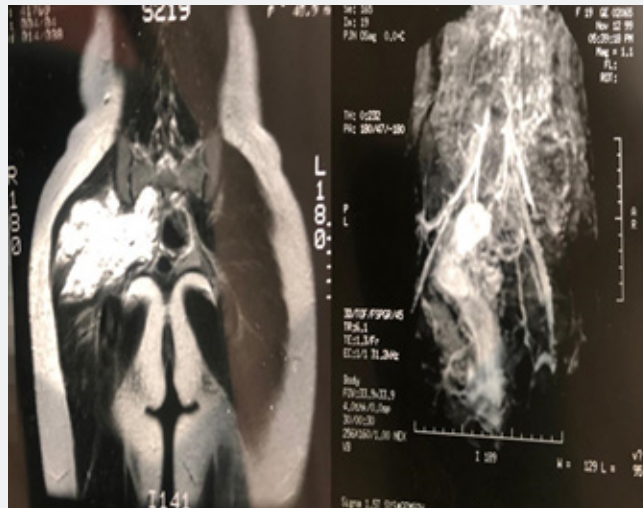


Figure 1: MRI image showing the hemangioma in gluteal area.

Due to its characteristics, the product of choice was a reticulated multiphase hyaluronic acid based dermal filler, containing 20mg/mL of hyaluronic acid, UP Max - Ilikia (CG Bio Co., Ltd, Seongnam-si, Gyeonggi-do, South Korea). This product presents large molecules ranging from 800-1200 micra and a high G'. The product was injected through a 22G-70 blunt cannula to the subcutaneous gluteal plane. A total of 30 mL of product was injected to the left buttock with excellent aesthetic result and

no complications. Skin markings was performed on standing position and the amount of the product was planned in advance and focused on the area of greater asymmetry on the outer upper quadrant of left buttock and illustrated in Figure 2. The skin marking procedure was conducted with careful consideration of the principles of light and shadow, which guided the areas that required attention for achieving improved form.

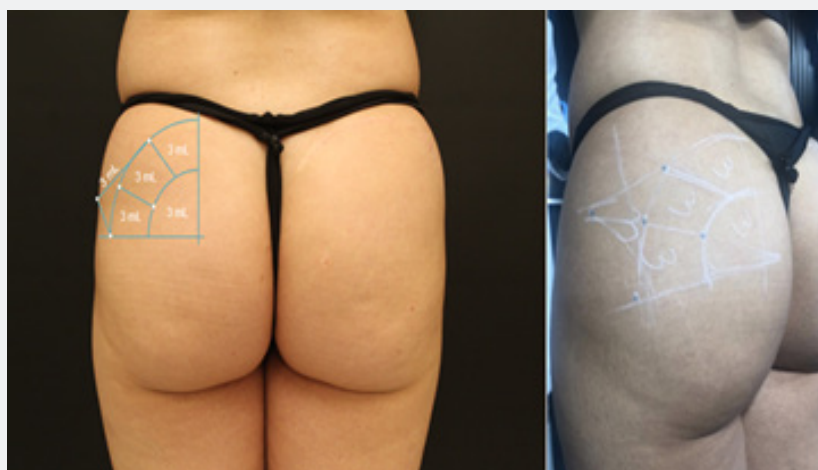


Figure 2: Skin Markings. Blue dots correspond to cannula entry points.

Results

The treatment approach aimed to achieve a filling effect that would result in a satisfactory, aesthetically pleasing, and harmonious outcome for the patient (Figure 3).

To evaluate the patient's aesthetic satisfaction, a Body Aesthetic Satisfaction questionnaire, and the Global Aesthetic Improvement Scale (GAIS) were administered after the procedure. The patient reported complete satisfaction and rated the GAIS as "much improved".

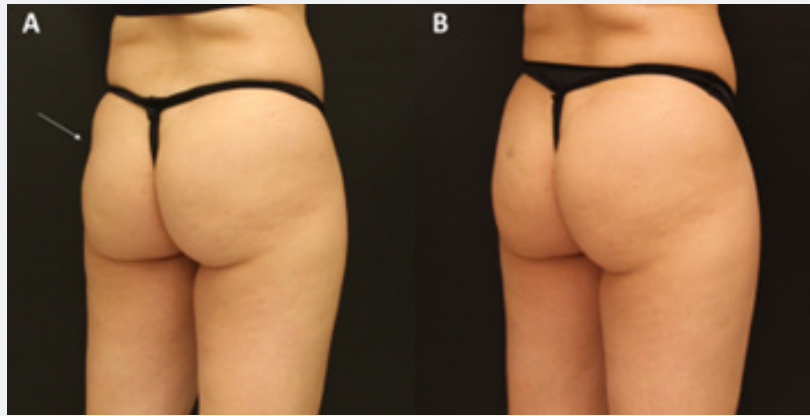


Figure 3: A. Patient's pre-procedure images showing a concave deformity on the left buttock (arrow). B. 30d follow-up outcome images.

Discussion

Engaging in comprehensive discussions with patients regarding the risks and benefits of different techniques, procedures, and products for body deformity treatment or aesthetic concerns is crucial. Some individuals may prefer minimally invasive procedures over more invasive surgical ones due to apprehension. The demand for body augmentation and harmonization using dermal fillers is increasing, showing positive outcomes and high patient satisfaction [4]. Thorough planning, precise skin marking, and the selection of appropriate products are essential for successful outcomes. Various hyaluronic acid (HA) dermal fillers are available, each with distinct technological, rheologic, and physicochemical properties that influence their performance and clinical outcomes. Injectable HA is effective for volume restoration, well tolerated, and minimally invasive, making it a suitable option for body deformity treatment. However, it is important to manage patient expectations as the treatment is not permanent. The long-term durability of dermal fillers in the gluteal area is uncertain. Studies have focused on the safety and efficiency of minimally invasive buttock augmentation using HA [5]. These studies indicated that gluteal augmentation with HA is effective in restoring volume and improving contour, with mild and expected adverse events. Patient satisfaction with the outcomes can persist for up to 24 months post-procedure [3]. However, more research is needed to fill the existing scientific gap in the literature.

In conclusion, this case report demonstrates the effectiveness of hyaluronic acid dermal fillers in correcting body surface deformities, particularly for gluteal augmentation and

harmonization. HA fillers provide immediate results with minimal downtime, making them a viable option for non-surgical body deformity treatment. Long-term studies are necessary to further investigate the durability of results in the gluteal region.

Conflict of Interest

i. Matheus Arantes, MD: The hyaluronic acid filler used in this case report was donated by the company Ilikia. The authors received only the necessary amount and used it in this case. Furthermore, the author Matheus Arantes has no conflict of interest to declare.

ii. Paula Faria, MD: The hyaluronic acid filler used in this case report was donated by the company Ilikia. The authors received only the necessary amount and used it in this case. Furthermore, the author Paula Faria has no conflict of interest to declare.

iii. Matheus Kasai, MD: The author Matheus Kasai declares that he is contracted by the company Ilikia for scientific consultancy and teaching a, specifically conducting lectures on behalf of the company during medical and scientific events. Ilikia is the company that sells the filler used in the case report. The hyaluronic acid filler used in this case report was donated by the company Ilikia.

iv. Claudia Camargo, MD: The hyaluronic acid filler used in this case report was donated by the company Ilikia. The authors received only the necessary amount and used it in this case. Furthermore, the author Claudia Camargo has no conflict of interest to declare.

Renata Viana, MD: The author Renata Viana declares that she is contracted for scientific consultancy by the company Ilikia, which sells the filler used in the case report. The hyaluronic acid filler used in this case report was donated by the company Ilikia.

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