

● **Leading in water-jet technology**

An innovator and leader in water-jet surgery, HUMAN MED<sup>®</sup> is the world's first and foremost manufacturer of water-jet assisted aesthetic devices. Building on a long history of success in the fields of general surgery, urology and neurosurgery, where gentle water-jet tissue dissection is essential, in 2004 HUMAN MED<sup>®</sup> turned its vision to the aesthetics field.

**Most effective complete system for collection, filtration and concentration of fat tissue**



**EFFECTIVE**  
Removal of drugs  
(e.g. local anesthetics, adrenaline)

**HIGH PRICE/BENEFIT RATIO**  
Time saving – no further  
processing (e.g. no centrifugation)

**QUALITY**  
Highest possible fat quality in  
combination with the water-jet  
assisted technology

Made in Germany

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## ● Most effective complete disposable system

### ALL IN ONE

- Collection: up to 1,000 ml fat tissue in a sterile, closed system
- Automatic removal of drugs (e.g. local anesthetics, adrenaline)
- Filtration: removal of fibrous tissue
- Due to the new mesh filter and the drain the residual liquid in the lipoaspirate is reduced to 15 %

### COST EFFECTIVE AND EASY HANDLING

- Time saving – no further processing (e.g. no centrifugation)
- Sterile fat extraction for immediate fat transfer

### PREDICTABLE RESULTS

- Optimum fluid content of 15 %
- Highest possible fat viability of 90 % harvested with body-jet® technology
- Optimum fat cell cluster size of approx. 0.9 mm for highest survival rates <sup>1</sup>

## ● The device

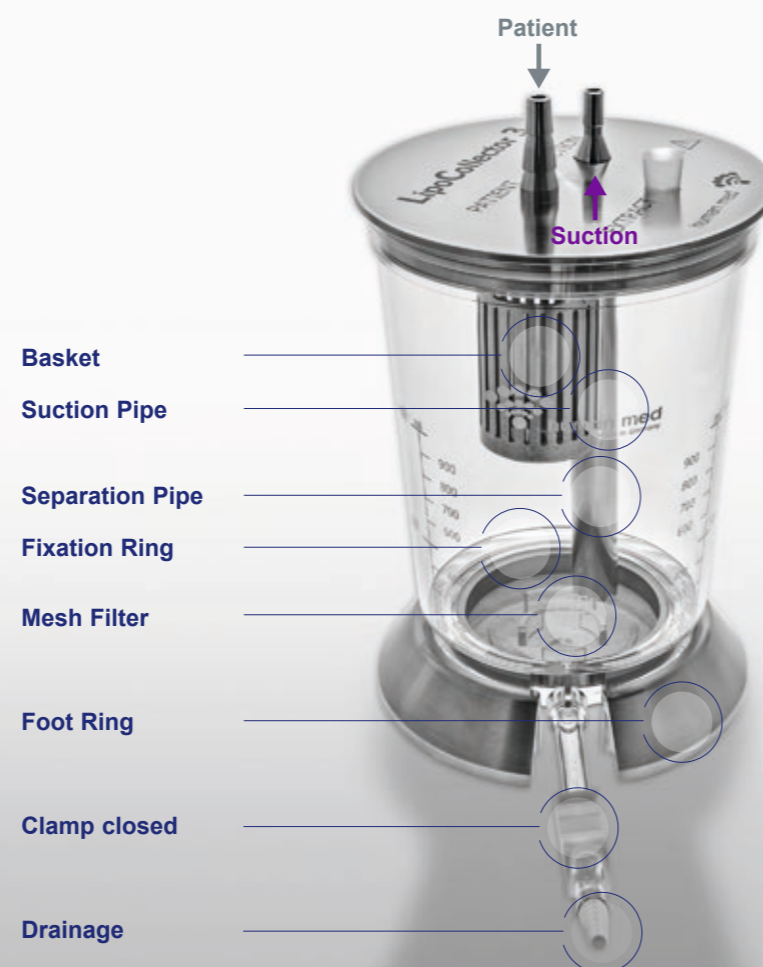
The LipoCollector® 3 is designed for easy, fast and effective fat collection up to 1,000 ml. The aspirated fat tissue is continuously, separated and concentrated during the liposuction procedure. Centrifugation or any other time consuming processing steps before fat transfer are not required. <sup>2,3,4</sup>

<sup>1</sup> Kotaro Yoshimura M.D. et al: The Fate of Adipocytes after Nonvascularized Fat Grafting: Evidence of Early Death and Replacement of Adipocytes. Plastic and Reconstructive Surgery. May 2012; 108:1-1092

<sup>2</sup> H. Peltoniemi, A. Salmi, S. Mäittinen et al.: Stem cell enrichment does not warrant a higher graft survival in lipofilling of the breast: A prospective comparative study. Journal of Plastic, Reconstructive & Aesthetic Surgery (2013) 66, 1494 – 1503

<sup>3</sup> M. Stabile, K. Ueberreiter, H. E. Schakker, D.I. Hoppe: Jet assisted fat transfer to the female breast: preliminary experiences. European Journal of Plastic Surgery March 2014

<sup>4</sup> Sasaki GH.: Water-assisted liposuction for body contouring and lipoharvesting: safety and efficacy in 41 consecutive patients. Aesthet Surg J. 2011 Jan 1;31(1):76-88



## ● Highest possible fat quality in combination with the water-jet assisted technology



### Phase 1 Preparation

- Larger tissue strands of the aspirate are caught in the basket
- Fat is floating on the fluid
- The separation pipe end is below the fat layer



### Phase 2 Suction

- The aspiration of the fluid starts automatically when the maximum filling level is reached
- At the same time the fluid volume decreases and the fat volume increases



### Phase 3 Removal of excess fluid

- The maximum fat volume is reached
- Open the clamp of the drain and remove the residual fluid
- In this way, the residual fluid in the lipoaspirate is reduced from 30 % to 15 %



### Phase 4 Extraction

- Close the clamp
- After aspiration of the residual fluid the injectable fat suspension is extracted through the opening EXTRACT with an Extraction Cannula