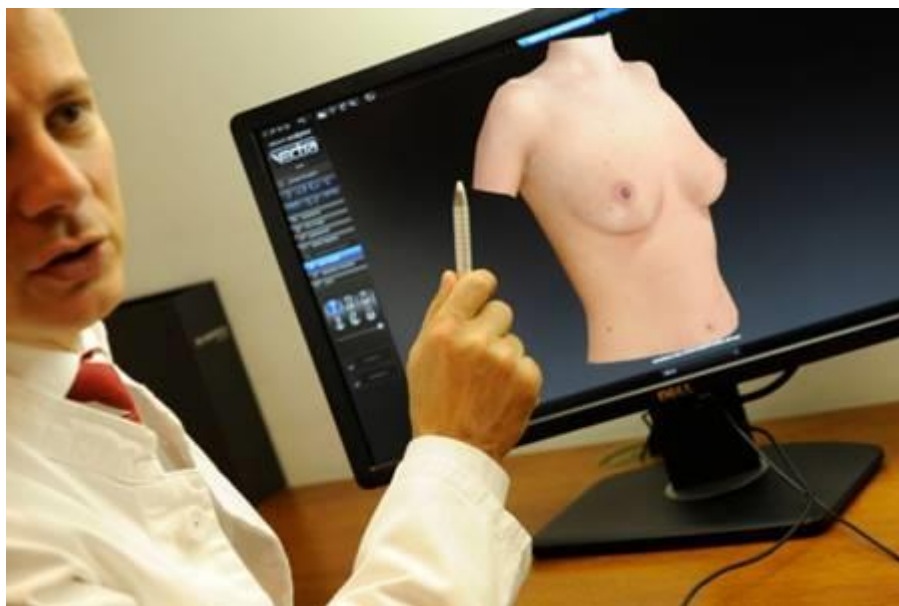


# 3D planning of aesthetic interventions with Canfield's Vectra XT camera system in the Klinik am Rhein

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To have the desired result of the planned aesthetic-plastic surgery in sight is certainly the dream of every patient. Does modern technology enable us to look closely into the future? The advantages, the most frequent application and the course of 3D planning with the Vectra XT camera system brings us Dr. Holger Hofheinz from Düsseldorf.



Dr. Hofheinz, you offer the so-called 3D planning of aesthetic interventions with the Canfield Vectra XT camera system in your clinic on the Rhine. What benefits does the patient have thanks to this 3D planning?

Three essential components of the treatment have been revolutionized with the 3D camera system and have been catapulted to an exorbitantly higher level: consulting, planning and documentation. These are:

1. Better consulting quality: the possibility to present a realistic simulation of the surgical results to the patient is completely new and gives the patient a much higher degree of certainty regarding his decision.
2. Better planning quality: the assessability of the anatomical initial situation is much easier for the patient and doctor. For example, unseen asymmetries can be seen. This allows a much more precise planning of the treatment.
3. Better documentation quality: the crystal-clear documentation of the before-and-after situation offers a much more objective assessment of the success of the treatment

In which areas of plastic surgery has 3D-planning proved the best?

The 3D planning is used mainly in procedures such as breast enlargement, nose and chin corrections and, in recent times, also the breast tightening. Another useful area of application are laser treatments and wrinkle injections.



What can the patient expect and how does 3D planning work?

Before the consultation, the 3D image is taken in a separate photo space. The device contains a total of six cameras, which simultaneously record the patient from a very different perspective. Only one recording takes place. The subsequent calculation of the 3D model takes about 2 minutes. During the subsequent consultation with the doctor, the analysis and simulation are then carried out together on the monitor.

How far is 3D simulation consistent with the result of the operation?

We have been using the system for over 2 years now, and after 3 months, we check the conformity of the simulation with the real result in all patients. We were able to determine that the deviations are minimal and that the majority of the results of operations are nearly identical to the simulation. The system is really mature and also still produces goose bumps, because it is so impressive.

How is your personal experience with 3D planning?

We cannot do without this system. It offers not only a learning effect for the patient, but also for us doctors in particular. We have a much better success control for us and this influences our own technical development decisively. I even claim that the system has enabled us to achieve an unquestionable quality boost, which we have achieved with nothing else, and which enables us to achieve the best possible result for the patient.