NANO-FAT AUTOLOGOUS TRANSPLANTATION: A REGENERATIVE BREAKTHROUGH IN THE MANAGEMENT OF ANOVAGINAL FISTULA

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Endoscopic autologous nano-fat grafting achieved 70% clinical improvement at 6 weeks in a 24-year-old woman with refractory ano-vaginal fistula secondary to ulcerative colitis who had failed infliximab and seton placement.

KEY POINTS

- A patient with a 10-year history of ulcerative colitis and 15-month history of ano-vaginal fistula unresponsive to eight doses of infliximab and seton placement was treated with endoscopic nano-fat grafting after declining surgery.
- Abdominal adipose tissue was harvested, centrifuged to isolate purified fat, mechanically emulsified approximately 30 times to create nano-fat, then injected around the fistula margins and tract using a 19-gauge EUS-FNB needle after argon plasma coagulation de-epithelialization.
- At 6-week follow-up, the patient demonstrated nearly 70% clinical improvement with marked reduction in fistula size on sigmoidoscopy and MRI pelvis.
- The patient subsequently underwent two additional nano-fat grafting sessions and remains symptomatically improved.
- The authors conclude that endoscopic autologous nano-fat grafting appears feasible, safe, and cost-effective for small to moderate benign ano-vaginal fistulas, particularly in patients unsuitable for or declining surgery.

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