Graft Placement Using the Dull Needle Implanter (DNI) Technique

Mauro Speranzini, MD | São Paulo, Brazil | speranzini.mauro@gmail.com

INTRODUCTION
Graft implanters were described by Choi in 1992. The instrument was designed to be used with sharp needles (Figure 1), which allows simultaneous site making and placement of FUs, accelerating the implantation process.

Since only the surgeon was allowed to do these incisions, and thus delegation of placement was not possible, this instrument was not incorporated by most teams worldwide.

With the popularization of the follicular unit extraction (FUE) technique, in which the FUs are even more delicate, the advantage of implanters has become more appreciated for its atraumatic placing of the grafts. In the FUE technique, typically the surgeon has the responsibility and the job of harvesting all the FUs. But in combination with a one-step sharp implanter, this can lead to work overload and consequent fatigue for the surgeon. The dull needle implanter (DNI) technique allows a gentle placing of the grafts and permits delegation of placing to the technicians. The site creation is done by the surgeon and dull graft placing is less traumatic.

It is common for a team to have great resistance to change from a routine that’s been in place for years or even decades, such as is the case of using forceps for placement of grafts. It is up to the team leader to show the benefits of change, especially if we are talking about FUs harvested using the FUE technique. In order to make the transition a success for the technicians, it is essential that the physician understands all the advantages of the technique and how to teach the use of implanters.

THE DULL NEEDLE IMPLANTER
Although the use of implanters in premade sites was mentioned and eventually used by some colleagues, its advantages have never been described in detail. In 2016, I published an article in the Forum describing nine advantages of the DNI (dull needle implanter) technique. To these, Dr. Vance Elliot, who commented on the article, added two others. Dr. Robert True, in his Co-editor’s Message lead-in to the article, noted the technique “could very well become the preferred method for placing FUE grafts.”

The basic difference between the traditional sharp needle implanter and the dull needle implanter is that it is impossible for the latter to pierce the skin. This allows delegating the placement after the creation of premade recipient sites. Because there are currently no implanters sold with premade dull needles, it is necessary to modify them in an artisanal way.

Diagram of an implanter
Figure 2 shows the parts of an OKT implanter and, in red and blue, the different names used by other companies.