Mr Lucian Ion FRCS(Plast) Consultant Plastic Aesthetic and Reconstructive Surgeon

Abdominoplasty (Tummy Tuck)

More commonly called "tummy tuck" surgery, abdominoplasty and the less extensive apronectomy (mini-tuck) flatten and trim the abdomen by removing excess fat and skin from the lower abdomen.

About abdominoplasty

Abdominoplasty and apronectomy are procedures with high patient satisfaction and are, in many cases, the only effective option for people with excess abdominal skin.

Chosen most often by women who dislike the effect childbearing has had on their appearance, abdominoplasty can correct stretched abdominal skin and tighten the underlying muscles, greatly reducing the appearance of a protruding abdomen. In addition, this procedure can reduce stretch marks and correct the scars of Caesarean operations.

The procedure is also performed to correct excess skin after substantial weight loss.

- Better results achieved when the patient is relatively close to their ideal weight, but this is not always feasible.
- Combining the abdominoplasty with liposuction to the waistline can enhance its effectiveness for some patients.
- In instances where substantial skin excess is present around the waistline, the best results would be obtained by a body lift.

Your consultation

During your consultation, your surgeon will ask you for a general medical history and the details of any previous abdominal surgery. Then he will show you how your scar will follow the "bikini line" from hip to hip in a way that will be discretely covered by normal pants.

- It may be possible to make slight variation in the placement of scars depending on the type of clothing you favor.
- Please remember, however, that the scar cannot follow fashions.

Your operation: what to expect

Abdominoplasty is a major operation carried out under general anaesthesia. It requires at least one, and sometimes two nights stay in hospital after surgery.

During abdominoplasty, a ellipse of skin and underlying fat is removed from hip to hip above the pubic hair and below the umbilicus (navel). The umbilicus is left attached on a stalk.

- A pocket is made beneath the skin and fat of the upper abdomen as far as the ribs. This skin is then stretched downward to join the lower incision.
- Often, particularly in women who have had children, it is also necessary to tighten the underlying muscles to improve the contour of the abdomen.

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- Once the skin has been sutured, a second incision is made at the new site of the umbilicus, which is then sewn into its new position.
- Drainage tubes are placed under the skin to collect any excess fluid that may accumulate. Dissolvable stitches used beneath the skin surface do not require removal.

Apronectomy is a somewhat less extensive version of this procedure in which the umbilicus is usually left in place.

After your surgery

Drainage tubes are usually removed after 24 to 48 hours and the dressings from the surgery are usually left in place until the first visit to the practice one week following your operation.

This dressing should be kept dry, but you can wash around with a wet towel during the first week. A special compression garment is also usually required and will be provided to you at the end of the surgery. This garment, which helps with healing, should be worn for three to four weeks.

As you recover, there are a number of things you should expect:

- Immediately after your surgery, the skin of your abdomen will feel very tight. It may, in fact, be difficult to stand up straight for the first few days.
- Moderate discomfort is common and can usually be controlled by taking pain killing tablets such as Paracetamol as required. Stronger painkillers are also prescribed and given on discharge, but they are often necessary only before you go to sleep at night. Aspirin must be avoided because it can promote bleeding.

- Numbness of the central part of the lower abdomen is common, however sensation in this area should gradually return to near normal over time. You will need to be patient, though, as this process may take months, even years, to complete.
- You should expect to light to moderate bruising. This is quite normal and usually begins to settle in two to three weeks. It should be completely gone in about six weeks. Taking Arnica for a week before your surgery and two weeks afterwards can lessen bruising. Additional products that will help you get rid of the bruises faster are Lasonil® and Hirudoid®. They are both ointments that you can purchase without prescription from your pharmacy.
- Occasionally, fluid will continue to collect under the skin (a process called seroma formation). If this occurs the fluid may need to be drained with a needle.
- During your recovery you will need to get adequate rest. You should plan on spending at least two weeks away from work, longer if you have a strenuous occupation.
- Like all surgeries, abdominoplasty and apronectomy carry some risk, however they are small and infrequent. To prevent blood clotting problems, you will wear anti-embolism (TED) stockings before, during and after your surgery and will be encouraged to get up and move about as soon as possible.
- Wound infection can occur but is readily treated with antibiotics. Patients who have Diabetes or who smoke are at greater risk for delayed healing and other wound problems. Special precautions for wound monitoring and aggressive treatment of infection are even more important in these cases. However, it cannot be stressed enough how important it is to stop smoking for about three weeks before surgery and three to four weeks after.

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Scars from abdominoplasty usually take many months, or even a year to settle. In the period immediately following your surgery, these scars may be firm, red, raised, lumpy and itchy due to a build-up of excess scar tissue. As you skin's strength returns and the scars mature, they will become softer, flatter and more natural in colour and texture. This process usually takes about 18 months and can be helped by daily massage with moisturizing cream.

Some distortion of the skin, particularly in the hip area, is common after abdominoplasty. Should this distortion persist once scarring has subsided, it may be necessary to perform a liposuction procedure to reduce it.

In general terms, the association between liposuction to the flanks and abdominoplasty confers a circumferential contouring of the waistline, with very powerful impact on restoring the changes that have resulted from pregnancy.

More information

Naturally, there will be many questions you will want to ask before making any decisions about undergoing surgery. Also you will wish to meet you Surgeon - having trust and confidence in one's Surgeon is very important.

Surgery is unique to every patient and a detailed discussion and assessment between you and your Consulting Surgeon is essential in enabling you to make a decision based on correct personal information and advice.

Arranging a medical consultation does not obligate you to anything other than attending the appointment.

There is no obligation to proceed with treatment. This is entirely a matter for your decision, after the surgeon has decided on the feasibility and accepted you as suitable.

If you would like to know more information we will be happy to answer any queries either by email, letter or telephone, so please do not hesitate to get in touch.