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Abdominoplasty

General Information

Abdominoplasty, known more commonly as a "tummy tuck," is a major surgical procedure to remove excess skin and fat from the middle and lower abdomen and to tighten the muscles of the abdominal wall. The procedure can dramatically reduce the appearance of a protruding abdomen. But bear in mind, it does produce a permanent scar, which, depending on the extent of the original problem and the surgery required to correct it, can extend from hip to hip.

The best candidate for abdominoplasty

The best candidates for abdominoplasty are men or women who are in relatively good shape but are bothered by a large fat deposit or loose abdominal skin that won't respond to diet or exercise. The surgery is particularly helpful to women who, through multiple pregnancies, have stretched their abdominal muscles and skin beyond the point where they can return to normal. Loss of skin elasticity in older patients, which frequently occurs with slight obesity, can also be improved.

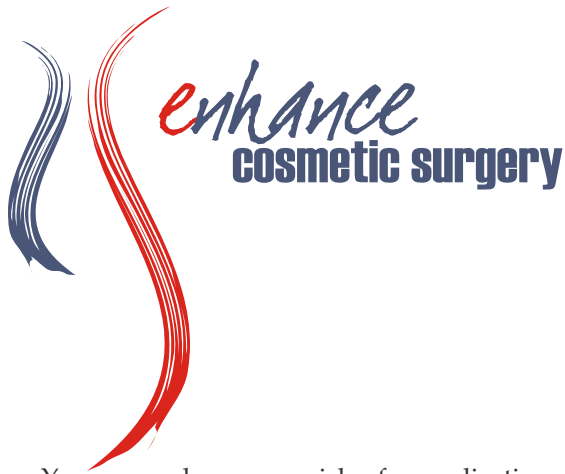
Patients who intend to lose a lot of weight should postpone the surgery. Also, women who plan future pregnancies should wait, as vertical muscles in the abdomen that are tightened during surgery can separate again during pregnancy. If you have scarring from previous abdominal surgery, your doctor may recommend against abdominoplasty or may caution you that scars could be unusually prominent.

Abdominoplasty can enhance your appearance and your self-confidence, but it won't necessarily change your looks to match your ideal, or cause other people to treat you differently. Before you decide to have surgery, think carefully about your expectations and discuss them with your surgeon.

All surgery carries some uncertainty and risk

There are always risks associated with surgery and specific complications associated with this procedure. Mr Yelland will discuss these in detail with you pre-operatively.

Smokers should be advised to cut down and ideally stop, as smoking may increase the risk of complications and delay healing.



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You can reduce your risk of complications by closely following instructions before and after the surgery, especially with regard to when and how you should resume physical activity.

Planning your surgery

In your initial consultation, Mr Yelland will evaluate your health, determine the extent of fat deposits in your abdominal region, and carefully assess your skin tone. Be sure to tell your surgeon if you smoke, and if you're taking any medications, vitamins, or other drugs.

If, for example, your fat deposits are limited to the area below the navel, you may require a less complex procedure called a mini-abdominoplasty, also known as a mini-tuck. You may, on the other hand, benefit more from mini or full abdominoplasty done in conjunction with liposuction. Your surgeon should work with you to recommend the procedure that is right for you and will come closest to producing the desired body contour.

Preparing for surgery

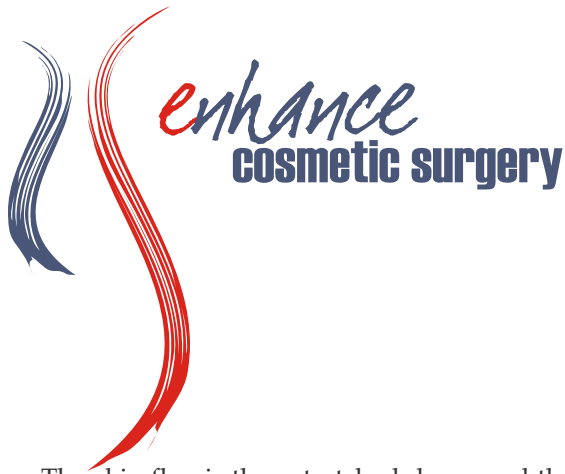
Your surgeon will give you specific instructions on how to prepare for surgery.

The surgery

Full abdominoplasty usually takes two to five hours, depending on the extent of work required. Mini-abdominoplasty may take an hour or two.

Most commonly, the surgeon will make a long incision from hipbone to hipbone, just above the pubic area. A second incision is made to free the navel from surrounding tissue. With partial abdominoplasty, the incision is shorter and the navel may not be moved, although it may be pulled into an unnatural shape as the skin is tightened and stitched.

Next, the surgeon separates the skin from the abdominal wall all the way up to your ribs and lifts a large skin flap to reveal the vertical muscles in your abdomen. These muscles are tightened by pulling them close together and stitching them into their new position. This provides a firmer abdominal wall and narrows the waistline.



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The skin flap is then stretched down and the extra skin is removed. A new hole is cut for your navel, which is then stitched in place. Finally, the incisions will be stitched, dressings will be applied, and a temporary tube may be inserted to drain excess fluid from the surgical site.

In partial abdominoplasty, the skin is separated only between the incision line and the navel. This skin flap is stretched down, the excess is removed, and the flap is stitched back into place.

After your surgery

For the first few days, your abdomen will probably be swollen and you're likely to feel some pain and discomfort which can be controlled by medication. Depending on the extent of the surgery, you may be released within a few hours or you may have to remain hospitalised for two to three days.

Your doctor will give you instructions for showering and changing your dressings, and though you may not be able to stand straight at first, you should start walking as soon as possible.

Surface stitches will be removed in five to seven days, and deeper sutures, with ends that protrude through the skin, will come out in two to three weeks. The dressing on your incision may be replaced by a support garment.

Getting back to normal

It may take you weeks or months to feel like your old self again. If you start out in top physical condition with strong abdominal muscles, recovery from abdominoplasty will be much faster. Some people return to work after two weeks, while others take three or four weeks to rest and recuperate.

Exercise will help you heal better. Even people who have never exercised before should begin an exercise program to reduce swelling, lower the chance of blood clots, and tone muscles. Vigorous exercise, however, should be avoided until you can do it comfortably.

Your scars may actually appear to worsen during the first three to six months as they heal, but this is normal. Expect it to take nine months to a year before your scars flatten out and lighten in colour. While they will never disappear completely, abdominal scars will not show under most clothing, even under bathing suits.