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## ABDOMINOPLASTY (TUMMY TUCK SURGERY)

Abdominoplasty, or “tummy tuck” is an operation to deal with slack abdominal skin and weakness of its muscles. Women who have had children are the usual candidates for this operation; however, women and men alike who have lost a lot of weight may also be candidates. Previous abdominal surgery, especially with scars below the tummy button may also be an indication. The presence of a thick layer of abdominal fat on its own, without skin excess, may be helped by [liposuction](#) alone. Very often skin laxity and fat excess co-exist, and in these cases abdominoplasty is combined with liposuction to obtain the best result. The use of liposuction combined with abdominoplasty has improved overall results.

Abdominoplasty is major surgery and patients scheduled for this operation have to be fit and well. In particular they should not be anaemic and have no previous history of deep vein thrombosis or embolism. Because of advances in operative techniques it not usual for patients to require transfusion after surgery and, therefore, blood cross-matching is not done as a routine.

The operation is carried out under general anaesthesia and will take approximately two hours. The surgeon injects quantities of fluid under the abdominal skin to reduce bleeding and, if indicated, will carry out liposuction to thin the layer of fat. Then he makes an incision in the lower abdominal skin crease, just above the pubic hair, extending from hip to hip. The skin is then lifted off the muscle as far as the rib cage, and the tummy button left attached to the abdominal muscles. Where abdominal muscles are weak, or if there is a true hernia, a repair is carried out to produce a stronger and flatter abdomen. The skin is pulled down and excess removed. The upper part of skin is then sutured to the bottom incision. Drains are usually left inside the wound to drain any excess blood and fluid and are removed 24 to 48 hours later. Bed rest is required for the first two days and then the patient is gradually mobilised. Sutures are removed 7 to 10 days after surgery. Return to full activity will take between four to six weeks. Swelling will last for between weeks and months to settle. Scars take up to one year to mature and fade.

In some cases, if the tummy button is placed very high and only the skin below it is lax, it may be possible to use a less extensive procedure called mini abdominoplasty. Apart from being less extensive it has the advantage of producing a shorter scar. It may be more suitable in younger women.

## Abdominoplasty: Possible Complications

**Abdominoplasty is subject to complications like any other surgery and these will be discussed by the surgeon:**

- 1. Bleeding:** this usually occurs shortly after surgery and is one of the reasons why patients are kept in hospital for a minimum of 24 hours. It may necessitate removal of blood collection from under the skin.
- 2. Infection:** although very uncommon, this complication may need treatment with antibiotics and drainage if there is a collection of pus.
- 3. Fluid collection:** in some cases fluid can accumulate under the abdominal skin, and will need to be drained on one or several occasions until no further fluid forms. This problem is usually of a self limiting nature.
- 4. Poor wound healing:** blood supply to the skin may sometimes be compromised because of tightness of wound closure, or because of persistent smoking. This may lead to prolonged healing and an unfavourable scar which may, at a later stage, have to be revised.
- 5. Scar:** some patients may have a tendency to form thick or even keloid scars and these will require treatment with steroid injections, and may even have to be revised at a later stage.
- 6. Numbness:** It is not uncommon to lose some sensation above the scar. Some of it will return in time but some numbness will remain.

**It is important to consult with a surgeon if you are contemplating abdominoplasty. Only he or she can advise you whether this operation is going to achieve the result you expect from it, and will discuss the pros and cons of surgery. Only then you are in a position to decide whether you want to go ahead with the surgery.**