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ABDOMINOPLASTY (Tummy Tuck)

Abdominoplasty is a surgical procedure for removing excess abdominal skin and tightening or repairing the anterior abdominal wall. The procedure leaves a lower abdominal scar, and usually a scar around the umbilicus (Belly Button).

Fat distribution is determined by hereditary factors and diet. Heredity determines the location and number of individual fat cells, which are fixed and unchanging after puberty. Diet can increase or decrease the amount of fat in each cell, but will not affect the total number of cells or their distribution. If you have inherited large numbers of fat cells on your abdomen, you will always have more fat on your abdomen. Strenuous attempts at weight loss will not decrease the fat in this area.

Likewise, pregnancy can expand the abdominal skin to a point beyond tensile strength of its elastic properties, thus stretching and tearing the deeper layers of the skin (stretch marks). This type of skin is usually loose and flaccid.

These two problems can be addressed by abdominoplasty. The skin between the umbilicus and the pubis will be removed. The resultant scar will be at the pubis and extends along the so called 'bikini line'. The upper abdominal skin is stretched downward to the incision. The umbilicus is brought out from underneath the stretched skin, onto its normal position, still attached to your abdominal wall. Sometimes liposuction is used concurrently with an abdominoplasty to further sculpt the abdomen. You will be advised if it will enhance your final result.

Support garments are usually worn for up to six weeks after surgery to control potential swelling and promote healing, to provide comfort and support. Please ensure you have purchased your garment before your surgery date, ensuring you bring this to hospital with you, as this will be placed on you whilst in theatre.

Your appearance after abdominoplasty will be influenced by your general health, the condition of your skin, age, weight and other factors. Each patient is unique and during your consultation your surgeon will discuss with you how these general factors apply to you. Abdominoplasty is not a substitute for a healthy diet nor is it useful for weight reduction. Some patients may expect localised fat removal to affect a dramatic weight loss. This is not possible.

Scars

All attempts to minimise your scars will be made. In most patients the scars will be red or pigmented for around 6 months and will gradually fade by 12-18 months after surgery. The scars are rarely troublesome. Nevertheless, you should know that all scars are permanent and their height, width and final colour are not predictable. Any previous scar hypertrophy (widening or thickening) that you have may reflect on your final scar.

Anaesthesia

General anaesthesia is always employed. You should not require a blood transfusion.

Duration of operation

The operation may last approximately 2 to 2.5 hours depending on the individual and techniques used.

Drains

Drains are usually used and remain in place until you are discharged from hospital.



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Hospital Stay

Two to four nights in hospital is usually required.

After Surgery

You will have dressings placed immediately after surgery. Usually skin tapes are used over internal "dissolving" sutures. If you do have external sutures, these are usually removed 10-14 days after your surgery.

You should not shower or get the wounds wet until instructed to do so by your surgeon or the nurses.

Pain medication will be prescribed. There is usually moderate discomfort after surgery, which is controlled by your medication. You will be seen after surgery, and then in one to two weeks and then 6-8 weeks after your surgery, although you may return earlier. Vigorous sports are not advised for at least 6 weeks.

For the first few weeks following surgery, the operative areas will be numb, swollen, bruised and possibly appear distorted. Resolution of swelling will continue for the first few weeks, but your final outcome may not be apparent until as long as 3-6 months after surgery.

Photographs

Pre-operative photographs may usually be taken. These do not show your face. They are important aids in planning and performing surgery and become a permanent part of your patient record. Intra-operative photographs may be taken during your surgery if we are required to do so by Medicare. Post-operative photographs may also be taken.

Complications and untoward results

Serious complications can occur but are uncommon with this kind of surgery. As with any surgery, bleeding, infection and anaesthetic complications are possible. Clots in your legs, which may travel to the lungs or other cardiac and pulmonary complications, can occur but are rare.

You may have bruising, which lasts 2 to 3 weeks, although it can occasionally be longer. Rarely, abdominal skin loss can occur due to unexpected bleeding, fluid collection or swelling. Conservative treatment with dressing changes will promote full healing. However, sometimes further surgery is required. The abdomen will be numb for four to six months. Sensation will slowly return. Loss of the umbilicus can also occur, but is very rare.

Should you not understand any of the foregoing, or should you want further information, please ask. Occasionally questions will arise after you have left your consultation. Feel free to call for additional information. If necessary, additional consultation visits can be scheduled. Find out all you need to know. It is our desire that all patients are fully informed.

This information included in this sheet is general information only. Please contact the surgery on (08) 9380 0333 or alternative phone numbers as shown on your appointment card if you have any concerns regarding your post-operative recovery.