



Regarding the procedure itself, a full abdominoplasty is the most common version of this procedure. It is carried out under general anaesthesia, usually with a one-night hospital stay. An incision is made from hip to hip crossing through the pubic hair area – this is approximately where the final scar will sit. The skin is lifted up almost as far as the rib cage and the underlying muscles are normally tightened. The skin is then pulled down and the excess skin is removed. Ideally all the skin between the umbilicus or belly button and the pubic hair line is removed but sometimes a small vertical scar where the original position of the umbilicus was, is necessary if there is not enough loose skin to remove this safely. The belly button is repositioned through the new skin that is pulled down so there is a scar around this too. The scars are placed so that the main scar is hidden in underwear or swimwear and the umbilical scar generally heals well. This procedure will remove excess skin, tighten muscle and flatten the abdomen but it may not pull the waist in tightly. If this is a big concern, particularly in those who have lost a lot of weight, a vertical scar may be added on occasion. This is known as a Fleur de Lys abdominoplasty and is done to remove more skin and pull the waist in more. If more extensive lower body contouring is required, then often a body lift is a more suitable procedure.

A mini abdominoplasty removes loose skin at the lower end of the abdomen via a scar similar to a full abdominoplasty, but avoids a scar around the belly button. However, a mini-abdominoplasty does not allow muscle tightening. It is therefore only suitable in select cases.

Liposuction is added to the procedure in some cases and this can be done to thin out the thickness of the upper abdominal skin that is moved down or to reduce the fat at the sides of the hip and flank area which would not be removed as part of an abdominoplasty procedure and to shape the waist more. I recommend the wearing of a support garment for four to six weeks particularly if you have liposuction. This helps reduce swelling and supports the newly operated area.

In general you should have two weeks off work but more may be required if your job is physically active. You will need to stoop over for the first couple of weeks to take tension off the abdominal wound as your skin will be pulled quite tight. This will resolve during the recovery period. There is a six to eight week recovery for most patients during which time no heavy lifting should take place. Between two and six weeks you can gradually get back to normal mobility and activity but you should avoid anything too strenuous until the recovery period is over. Abdominoplasty surgery is not a weight loss procedure. It is a body contouring procedure used to eliminate loose skin and tighten stretched muscles. It is best done when your family is complete as although it is not harmful to get pregnant after surgery, the pregnancy will stretch out your tissue again and undo some of the results.

As with any surgical procedure there are some potential risks and complications, these are listed below together with those more associated with abdominoplasty:

- Infection. You will receive antibiotics at the same time of surgery but not afterwards unless an infection develops.
- Haematoma. Occasionally there can be a collection of blood under the skin which may necessitate a return to theatre to remove the haematoma and stop the bleeding.
- Seroma. Occasionally a collection of serous fluid can accumulate in the abdomen which may need to be drained. This can be done as an outpatient and may need to be repeated.
- Increased risk of clots in the leg or chest following a general anaesthetic and a period of reduced mobility. Some people also suffer from nausea or chest pain after an anaesthetic.
- Asymmetry or unevenness in contour.



- Red or lumpy scar formation which can be slower to settle or wider than usual. This can be treated but may not resolve completely.
- Weight gain or loss and pregnancy can affect the abdomen in the same way as before surgery.
- Delayed wound healing that may require dressings, or even a return to the operating theatre.
- Skin necrosis. Loss of an area of skin due to problems with the blood supply or infection. This may result in increased scarring and a longer healing time. Sometimes further procedures are necessary to heal the area or treat the scar.
- Loss of the belly button or umbilicus due to problems with the blood supply. Usually this results in an area which is slower to heal and sometimes further procedures are needed to correct the problem.
- Damage to the underlying abdominal contents such as the bowel or bladder. This is very rare but is a serious complication when it happens and may require review or treatment by a general surgeon or urologist. It is a higher risk if a hernia is present.
- Numbness or oversensitivity of the abdominal skin. This is due to bruising or damage to the sensory nerves to the skin that are disturbed by the surgery. It usually resolves over time but occasionally persists.
- I would not perform abdominoplasty surgery if you smoke. The risks of problems with wound healing and skin blood supply are too high. It is necessary to stop smoking in advance of abdominoplasty surgery.

Liposuction in conjunction with an abdominoplasty is usually carried out through the abdominoplasty site itself and so does not usually leave any additional scars. It causes some additional swelling and bruising when compared to an abdominoplasty alone but the overall recovery period is very similar. The skin may feel numb and a little hard in the early stages but this softens out over time.

For further information, would you please watch the following videos and read the information on the following links:

1. Please watch ALL the videos at the bottom of the webpage <https://www.marcpacifico.co.uk/treatments/body/abdominoplasty/>
2. Please read this PDF from start to finish: <http://www.puritybridge.co.uk/wp-content/uploads/2016/04/Abdominoplasty-Nov-16.pdf>

Please also visit my Instagram page: @marcpacifico for further information