

Abdominoplasty

Abdominoplasty, also known as a "tummy tuck", is an operation that improves the contours of the abdomen by removing excess skin and fatty tissues and tightening the connective tissue layers of the abdomen. It is usually done to remove excess skin and fat of the abdomen that can't be removed by diet or exercise, and also to improve the laxity of the abdominal wall connective tissue that may result from pregnancies or other body changes.

Anatomy

The abdomen can be considered to have two compartments. The inner compartment, where the intestines and other organs are located, is surrounded by a layer of connective tissue and muscle. Outside of the connective tissue is a layer of subcutaneous fat, and outside of that is the skin. Abdominoplasty improves the appearance of the abdomen by removing some of the excess skin and fatty tissue, particularly in the lower abdomen, and also by tightening the underlying connective tissue layer. Unfortunately we can't do anything to improve the fat inside the abdomen around the intestines - that can only be improved by weight loss.

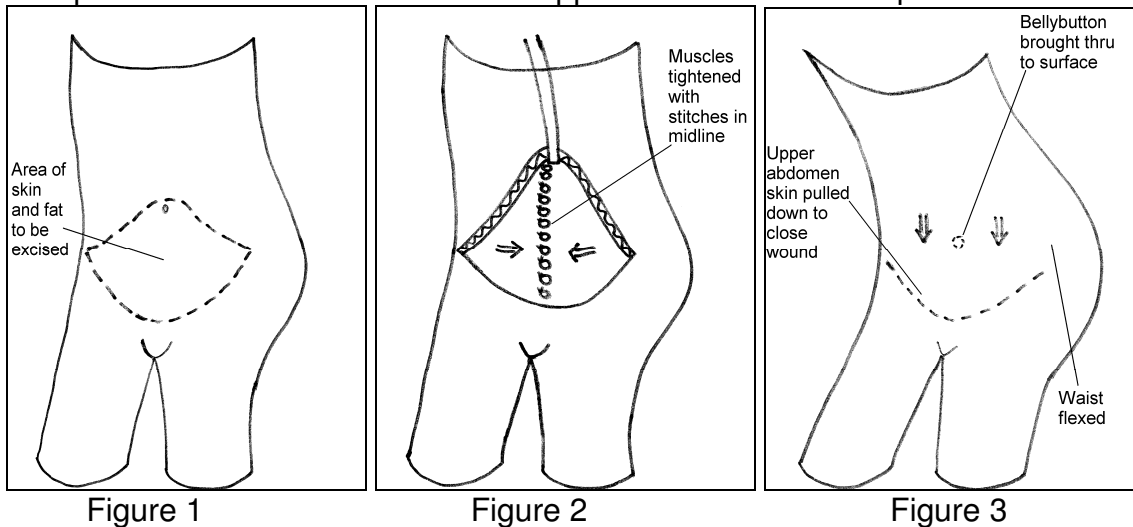
Alternative Treatments

Abdominoplasty is not for everybody. Some people may prefer to improve the appearance of the abdomen by just losing weight. Liposuction can also reduce the amount of fatty tissue in the abdomen, but if the skin has lost its elasticity, liposuction alone may leave excess hanging skin. Also, liposuction does not tighten the connective tissue layers of the abdomen.

How It's Done

A standard abdominoplasty is done under general anesthesia (in other words you go to sleep for the operation). An incision is made low down on the abdomen that usually goes from one hip to the other hip at the upper level of the top of the pubic hair (Figure 1). The skin and fatty tissues are then lifted up off of the underlying connective tissue layers of the abdomen all the way up to the rib cage. An incision is made around the bellybutton, which is left attached to the connective tissue. We then put stitches and the connective tissue from the top of the abdomen down to the pubis, thereby tightening the connective tissue (Figure 2). The operating room table is then flexed at the waist, the skin and fatty tissues are pulled down, and the excess skin and fat is removed. The remaining skin is

sutured to the pubic skin. An opening is made higher up and the bellybutton is brought out through that hole and sutured to the skin (Figure 3). Drain tubes are also placed. The abdomen is then wrapped with an elastic wrap.



There are variations on the standard abdominoplasty. A "modified abdominoplasty" is a "skin and fat only" tummy tuck. In other words, everything is done the same as a standard abdominoplasty, except the connective tissue is not tightened. This is usually done in situations where the connective tissue layers have not become stretched out.

A "mini abdominoplasty" involves making a shorter incision in the lower abdomen, and then the skin and fatty tissue is elevated off the connective tissue, but only up to about the level of the bellybutton. The skin is pulled down, the excess is removed, and the wound is sutured closed. This is done in situations where there is only a mild amount of excess skin, particularly in the lower abdomen.

Recovery after Abdominoplasty

After abdominoplasty the skin is quite tight, so you will not be able to stand up straight for about 7 to 10 days. You will walk in a hunched over position. Gradually the tissues will loosen up and you will be able to stand up straight. You should follow a light, liquid diet for a couple days after the operation. You will have drains after the operation which you will need to empty and record the drainage. (This sounds somewhat intimidating, but it's really quite easy. You will be instructed on how to care for those drains.) We usually remove the drains about seven to 10 days after the operation. That is very easily done here in the office and generally causes little if any pain. You will also have to wear the elastic wrap around the abdomen (an "abdominal binder") for six weeks after the operation. Also there can be no lifting of anything over 10 pounds, and no bouncy activities (such as aerobics and jogging) can be done for six weeks after the operation.

Risks of Abdominoplasty

Like all operations, there are some possible risks of having an abdominoplasty. Generally this operation goes quite well with relatively few complications, but occasionally complications may develop, and they are listed here. I cannot list all of the possible complications, but this is a list of the most common ones.

- An infection may develop. This may require treatment with antibiotics or possibly doing more surgery.
- Bleeding may occur which may even require going back to the operating room to control the bleeding.
- Blood supply to the tissues of the abdomen is interfered with by this operation, requiring that some of the tissues get their blood supply through a "detour". This may leave some of the tissues within adequate blood supply, and some of that tissue, particularly the skin, may die. This could require further surgery or dressing changes over a period of time to allow the tissues to heal.
- The nerves that supply sensation to the skin, particularly in the lower abdomen, are disrupted in the course of abdominoplasty. This will cause loss of sensation in some areas of the abdomen, and possibly also on the thighs. This sensation may improve somewhat over time, but will probably never quite return to normal.
- Of course the operation does leave scars. We try to make the scars as nice as possible, and also try to place the scars where they are hidden behind clothes. Even so, everybody scars differently, and so we cannot exactly predict how your scars will look.
- We try to make the cosmetic outcome as nice as possible, but there may be changes afterwards that are not exactly to your liking. That may require further surgery to try to improve the appearance.
- If the connective tissue layer the abdomen is tightened, it is possible that those stitches may break or pullout, causing recurrent laxity of the abdomen. The risk of this happening can be minimized by avoiding lifting anything over 10 pounds for six weeks after the operation.
- General anesthesia is used for the operation, so there may be some risk of problems such as pneumonia, heart attack, blood clots which could go to the lungs and make you sick, and other problems. Various precautions are taken minimize those risks.