Abdominoplasty (tummy tuck)

Summary

- An abdominoplasty or ‘tummy tuck’ is a type of surgery performed to tighten loose muscles, and to remove fat and excess loose skin from the abdomen.
- Many surgeons recommend that abdominoplasty should be considered only after dieting and exercise have achieved the right body shape underneath.
- Having an abdominoplasty will not stop you gaining weight in the future.
- Talk with your surgeon about the risks and benefits of abdominoplasty, and what results you can expect.

Abdominoplasty or a ‘tummy tuck’ is cosmetic or reconstructive surgery to tighten muscles that become loose or split following pregnancy, or to remove fat and extra loose skin from the abdomen after massive weight loss. In most cases, it will restore weakened or separated muscles, help alleviate pain, improve bladder function, reduce itching and skin infections caused by excess skin, and change the shape and tone of the abdomen to create a firmer and smoother profile.

Abdominoplasty is not a substitute for weight loss or exercise. It may be possible to achieve a flatter stomach without surgery, through healthy eating and exercise, but not always. Many surgeons recommend that abdominoplasty be considered only after dieting and exercise have achieved the right body shape underneath.

If you are concerned about the way you look or are thinking about cosmetic treatments to boost your confidence, there are alternatives. These may include lifestyle changes or learning to accept yourself the way you are.

Before choosing abdominoplasty

Before you opt for abdominoplasty, there are some important issues to keep in mind, including:

- The results of an abdominoplasty are considered permanent. However, any major changes in your weight after surgery could change how you look. If you are planning substantial weight loss or considering future pregnancies, postpone the operation.
- Abdominoplasty is not considered a treatment for stretch marks, although any stretch marks in the treated area will be removed along with excess skin.
- Think about the financial cost. Medicare and private health insurance may cover some of the costs, but you must be prepared for some out-of-pocket expenses. Ask your surgeon for further details.
- Smokers are at increased risk of complications from any surgery. If you are serious about undergoing surgery, you should try to quit smoking.

Finding an abdominoplasty surgeon

You may want to ask your doctor for advice about finding a suitable specialist surgeon or hospital where abdominoplasty is performed. At your first consultation, ask the surgeon about their training and experience. It is preferable to have this procedure done by a surgeon who is specially trained to perform abdominoplasty and who has a lot of experience in carrying out this type of surgery.

Medical issues related to abdominoplasty

Before the operation, there is a range of medical issues to discuss with your doctor or surgeon. They will talk to you about your:

- physical health – an examination will help your doctor or surgeon to decide if the treatment is appropriate
medical history – some pre-existing medical conditions and surgery you’ve had in the past (for example, a hernia of the abdominal wall) may influence decisions about this operation, including the type of anaesthetic that is used

risks and complications – it is important that you understand the potential risks and complications so that you can weigh up whether abdominoplasty is right for you

medication – tell the surgeon about any medication that you take regularly or have recently taken, including over-the-counter preparations like fish oils and vitamin supplements

past reactions to drugs – tell the surgeon if you have ever had a bad reaction or a side effect from any drugs, including anaesthesia

preparation for surgery – your surgeon will give you detailed instructions on what you should do at home to prepare for surgery. For example, you may be advised to take a particular medication or alter the dose of an existing medication. Follow all instructions carefully.

**Abdominoplasty operation**

There are two types of abdominoplasty, including:

- full abdominoplasty – which removes excess skin and tightens underlying muscles across the whole abdominal area, including around the navel
- partial abdominoplasty – which removes excess skin below the navel and tightens the lower abdominal muscles only.

The operation is usually performed under general anaesthetic. The length of the operation will depend on the extent of the surgery, but it could take up to three hours.

Generally speaking, a full abdominoplasty involves:

- The surgeon makes a horizontal, curved incision (cut) near the pubic hairline, which runs from one hip to the other.
- The skin and fatty tissue are lifted from the underlying tissue.
- The surgeon will stitch and tighten slack or separated abdominal muscles.
- Excess fat is removed.
- Excess skin is trimmed.
- The navel is repositioned.
- The wounds are closed with stitches, tape or clips.

**Immediately after abdominoplasty**

After the operation, you can expect:

- a drainage tube (or tubes) in the wound to help prevent fluid build-up
- bruising and swelling
- probable numbness in the skin between the navel and the wound
- pain and discomfort
- inability to stand up straight, to begin with
- a ‘tugging’ sensation at your abdomen
- dressings or bandages on your abdomen
- a compression garment to help keep the swelling down.

**Complications of abdominoplasty**

All surgery carries some degree of risk. Some of the possible complications of abdominoplasty include:

- risks of anaesthesia – including allergic reaction, which may (rarely) be fatal
- surgical risks such as bleeding or infection
- blood clots that may cause potentially fatal cardiovascular complications such as heart attack, deep vein thrombosis or stroke
• collapsed lung
• fluid build-up beneath the wound
• tissue death along the wound, or skin loss
• sensory nerve damage, which may cause prolonged or permanent numbness
• numbness into the thighs – this is usually temporary
• prolonged swelling
• asymmetry (unevenness) of the skin or navel
• death of the navel
• unsightly, inflamed or itchy scarring
• further surgery to treat complications.

This is not a complete list. Your medical history or lifestyle may put you at increased risk of other complications. For example, people who are obese and who have abdominoplasty are more likely to suffer a chest infection. Speak to your surgeon for more information.

Self-care at home after abdominoplasty

Be guided by your surgeon, but general self-care suggestions include:

• Rest as much as possible.
• Follow all instructions on looking after your wound.
• You may need to wear compressive stockings on your legs for seven to ten days after the operation.
• Avoid strenuous exercise or heavy lifting for at least one month.
• You may need to wear your compression garment for several weeks.
• Report any bleeding, severe pain or unusual symptoms to your surgeon.

Long-term outlook following abdominoplasty

Issues include:

• Having an abdominoplasty will not stop you gaining weight in the future.
• Scarring will be permanent, but should fade in time. Be patient – it may take around a year or so.
• Some puckering on the outside edge of the scar might remain.

Alternatives to abdominoplasty

Other options include:

• eating a healthy, low-fat diet
• getting regular exercise
• wearing foundation garments to flatten the tummy area
• accepting yourself – talking to a counsellor or psychologist may help you overcome your concerns about your appearance and you may decide that you like yourself the way you are.

Where to get help

• Your doctor
• Australian Society of Plastic Surgeons Tel. (02) 9437 9200
• Australasian Foundation for Plastic Surgery - Information Hotline Tel. 1300 367 446
• Royal Australasian College of Surgeons Tel. (03) 9249 1200
• Australian Health Practitioner Regulation Agency Tel. 1300 419 495