

Plastic Surgery Unit

Abdominal reduction- information for patients undergoing abdominoplasty

An abdominal reduction aims to improve the overall shape of your abdomen by removing any excess skin and fat overhang from your tummy (lower abdomen). The procedure is also called an abdominoplasty or tummy tuck.

Please read this leaflet carefully and make you understand the procedure you are going to have.

Intended benefits

The aim of an abdominoplasty operation is to flatten the profile of the abdomen. It is not intended to be a way of losing weight. Typically, patients have already lost weight but are left with loose folds of skin in their abdomen that need corrective surgery.

Risks

Abdominoplasty is a commonly performed and a generally safe operation. However, all operations carry some risk.

General anaesthetic is a sedative usually given as a gas or an injection. It makes you become unconscious so that surgery may be performed without causing you any pain or distress.

Anaesthetics are extremely safe. However, every surgical operation carries a slight risk. Before the operation you will be advised not to eat or drink for



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several hours. This is to ensure you don't vomit or choke while you are unconscious.

The surgery will last a minimum of two hours.

The following are possible risks associated with abdominoplasty: -

Scars

All abdominoplasties result in some scarring. The scars tend to be quite red and raised in the first six weeks. This changes over the next six months and then fades to white. Occasionally and unpredictably some patients will get red lumpy scars that do not improve. The scars that follow an abdominoplasty are covered by 'normal' clothing.

Changes in appearance

Your belly button will be a different shape after your operation. Your pubic hairline is often slightly higher after your operation.

Numbness

The abdominal skin will feel numb, but this usually improves after six months or so. Very rarely, there can be numbness on the outer side of the thighs. Sometimes, this is permanent.

Seroma and haematoma

In rare cases, despite the use of drains, body fluid (seroma) or blood clots (haematoma) can build up under the skin. Often, we will need to treat this, sometimes using just a needle and syringe to drain the fluid, or by a second small operation.

Wound breakdown

Sometimes the wound can become infected or break down. Signs of infection include:

- redness
- swelling

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- hot or tender to the touch
- a strong odour from the wound

Please contact the Department if you show these symptoms or are concerned. Rarely this can result in skin loss which may require skin grafts.

Deep vein thrombosis (DVT)

There is a risk of DVT, which is a blood clot forming in a vein, usually the leg. If this blood clot breaks loose, it can travel in your bloodstream and get stuck in your lungs. If this occurs, it can be serious.

This complication is less likely if you are up and walking as early as possible after your operation. You will be provided with special support stockings to wear during the operation and in the early stages after surgery, while you are confined to bed. If a blood clot occurs, treatment with blood thinning medicines will be needed for several months.

Following your operation

Whilst in bed, it is important to keep your knees flexed with pillows to reduce any tension on your abdomen.

The length of your stay in hospital will vary according to the exact procedure carried out and the amount of fluid in your drains (plastic tubes attached to suction bottles). The drains will usually be removed before you go home, between three to five days following your operation.

Bathing

Keep your dressings clean and dry. These will be removed approximately ten days after your operation, in the Outpatients Department. You will then be advised on whether you can bathe.

Avoid lifting and strenuous exercise

A light panty-girdle or Lycra support should be worn to reduce tension and increase comfort. The surgeon and their team will encourage you to get

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moving from day one. Walk as much as you are able to without straightening your back too much, as this will put tension on your stitches. This will become easier as your recovery progresses and you will be more able to straighten your back. By six weeks you should be back to normal.

Work and driving

Patients are advised to take a minimum of four weeks off work immediately after the operation.

It is advisable not to drive for six weeks following your surgery because of your ability to react in an emergency. You will need to check with your car insurance company. When you do start, begin with short distances and build up slowly.

Contacts

Plastic Dressing Clinic: Tel 024 7696 6474

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