

Abdominal Contouring

Contouring procedures for your tummy can involve liposuction, mini-tucks, and full abdominoplasties. Ideally, you should be near your ideal weight and exercise regularly. Sometimes your clothing will just not fit right because of your shape. You should not have any metabolic or eating disorders, or any problems with healing. Your specific goals will often determine which procedure is best for you.

Medical reasons for a panniculectomy (removal of excess skin only) include inability to ambulate normally, chronic pains or ulcerations under the overhanging pannus (tummy), and chronic rashes or yeast infections where there is skin to skin contact. Documentation is required from your primary physician to obtain authorization.

Liposuction is best for the individual with a strong abdominal wall, good skin tone, and simply an excess of fatty tissues. Full-term pregnancies will generally stretch your tummy muscles and skin, making liposuction less ideal. Liposuction depends on good skin tone to allow your skin to retract following removal of excess fat. Tumescence techniques, where high volumes of fluid with anesthetics are injected into the fat, are used minimizing blood loss and providing prolonged anesthesia following the procedure. Limited procedures may be done in the office under local anesthesia. However, extensive procedures or those with low pain tolerances should be done in an operating room where IV sedation or a general anesthetic is available. This does increase the cost of the procedure but is usually well worth it in terms of comfort.

Liposuction requires the use of a compression garment or girdle like garment following the procedure and this is worn 24/7 for a minimum of 3 weeks or longer, depending on your bruising. In general, you can return to work in 3-4 days but will again, continue wearing your garment. The more common risks of liposuction include contour irregularities, imperfect contours, asymmetries, numbness, and pigment changes of the skin, especially if you have excessive bruising. Any weight gains in your future will result in fat deposition in places where you have not received liposuction and can result in unusual shapes.

Mini-tucks are for those who have excessive tissues and protuberances below the belly button. This involves excising excess tissues, pulling the belly button down an inch or so, using sutures to tighten the muscles below the belly button (and sometimes above) and liposuction to thin the areas above the belly button. The scar runs mid-thigh to mid-thigh. It is an outpatient procedure and requires use of a surgery center. General anesthesia is required. A compression garment is again necessary and should be worn 24/7, 4-6 weeks following surgery. Full activities may be resumed at 5-6 weeks following surgery. This can distort your belly button or you can 'float' your belly button. If your belly button already can be pulled to your pubic area, you would benefit more from a full tummy tuck.

Full abdominoplasties involve dissection to your ribs allowing the muscles to be tightened from your ribs down to your pubic bone. Excess skin is then removed and you end up with a scar extending from hip to hip above the mons. Ideally, during your initial evaluation, the belly button can be pulled down to the pubic region indicating that the almost all of the lower abdominal skin (where most stretch marks exist) can be removed. If there is not excessive skin present but a full tummy tuck is needed to tighten the muscles, then you will eventually have a vertical scar above your pubic area or a higher positioned scar. This scar may discourage you from wearing true bikini type swimsuit. Location of the transverse scar depends on your preference for hi-cut type underwear/swimsuits or the traditional bikini which is cut lower in the groin. A binder will be worn for 6 weeks with full activities resumed after 6 weeks. *Recovery from this procedure takes longest* compared to other methods and this is one of our *most painful* procedures.

Muscles do not have to be sutured together (plicated) if you are willing to accept the need to still hold your tummy in to achieve the desired contours. This will shorten your recovery by 3 weeks and also diminish your costs. If you do not want your muscles tightened, you must let Dr. Wong know.

A newer technique called **lipoabdominoplasty** combines aggressive liposuction with excision of excess skin. This is ideal for the patient who has a rather thick layer of fat on their tummy and who does not need maximum tightening of the abdominal muscles. It is safer in that the risk for bleeding and seromas (fluid collections) are less and drains come out sooner, diminishing the risk for infection. Risks for tissue loss are also diminished with this procedure.

Drainless tummy tucks can also be done, using progressive tension sutures to help secure the abdominal flap to the underlying muscle and fascia. This will add additional time and cost to your procedure if you wish to have this but drains (still used) will be removed earlier and risks for development of a seroma or fluid collection are much less compared to no use of sutures.

Abdominoplasties are usually done as an outpatient (with a pain infusion catheter or patient controlled analgesia IV infusion device). You can choose to have this done as an overnight stay at Patient's Hospital, but it will cost you more. This procedure requires a general anesthetic and often requires some revisions to improve the final result. It is common to have fullness in your upper abdomen after surgery that is amendable to liposuction. The tighter abdomen will require that you use more of your chest muscles (breathe like an athlete) in breathing and can aggravate heartburn if it is already a problem. **Abdominoplasties (full and mini) eliminate using your tummy as an option for breast reconstruction** should the need arise in the future. Finally, your tummy is numb below the belly button and sensation may not return to that area.

Additional costs will be incurred for **revisions** and are usually required to improve on the lateral scars or to flatten any persistent abdominal bulges. This may also apply to liposuction cases or mini-tuck procedures as undesirable contour irregularities may result and motivate one to pursue more procedures to improve on the results obtained from the initial procedure.

The anticipated recovery involves going home with your catheter in your bladder that is removed within 2 days of your procedure. You are asked to walk bent over at your waist for a few days but can start standing upright 2 days post-op and when able to do so, you can sleep flat in your bed. You must walk frequently after surgery to prevent the development of blood clots in your legs. And you must protect yourself from constipation that frequently occurs with the use of narcotics. If you are doing well, you can start using anti-inflammatories the day after surgery. You can anticipate taking showers 2 days post-op if you can secure your drain(s) with a belt/necklace or lanyard so the drains are not dangling or being dragged.