MATTHEW POTTER

ABDOMINOPLASTY

Benefits

The tightening of the skin of the tummy (tummy tuck). This also is done in conjunction with liposuction as well as tightening of the tummy muscles to give a more pronounced hour glass contour to the abdomen

Risks

- 1. Infection/wound break down.
- 2. Scarring. These scars run above the pubic hairline from hip to hip. The scars will be puckered but this will settle to flat scars after approximately a month. Abnormal lumpy or raised scarring can occur in some patients. This is rare.
- 3. Pain (Mr Potter injects the area during the procedure with local anaesthetic to limit the post operative pain)
- 4. Swelling all post surgical wounds and sites will be inflamed after the procedure - this should settle within a week if not less. Rarely the area may swell and this may take time to settle.
- 5. Bleeding / haematoma this is a collection of blood that can occur within the operative site that may well mean a return to theatre to remove the blood and stop any bleeding sites. This complication is rare. At the time of the operation if the operative site is very oozy we may well insert drains to decrease the chance of this complication.
- 6. Change in skin sensation. It is common to be left with altered sensation around the operative site. This should resolve with time. Rarely patients are left with areas of the groin, flanks and lower tummy that are numb.
- 7. Asymmetry.
- 8. Fat necrosis (loss of fat volume after the procedure that may cause lumps or an oily or creamy discharge). This is rare and may well be treated with dressings in the clinic setting. It may also be resolved with massaging any

lumpy areas.

- 9. Clots in the legs and or lungs (Deep vein thrombosis, DVT and Pulmonary embolus, PE). Any operation runs the risk of such clots. You will be given specialist stockings to wear over the course of your inpatient stay and injections to thin the blood to decrease this risk. This is a rare complication.
- 10. Over/ under resection. With all aesthetic surgery Mr Potter is more likely to err on the side of under-resection than over-resection. If underdone this is far more straight forward to correct than an over-resected area.
- 11. Redness/bruising. This is expected and should settle at a week.
- 12. Further procedures if there are imperfections or adjustments to be made, Mr Potter and the hospitals in which he practices are happy to facilitate further surgery, within reason, and where clinically appropriate to be sure you are happy with your final result.
- 13. Pulling on the pubic area. Due to tension the pubic area may well be elevated after the procedure. This should improve and settle with time as the skin tension eases.

The procedure

You will be admitted to the ward the day of your procedure where you will be seen by the anaesthetist and Mr Potter. Your abdomen will be marked with you standing and sitting and you will have the opportunity to discuss the operation further if needed.

The procedure takes approximately 2 -3 hours and is under General Anaesthesia with you asleep for the whole process.

All wounds are simply dressed with skin coloured surgical wound tapes which are designed to be showered from day one.

All sutures are dissolving. All wound edges will be raised due to underlying deeper sutures. Such raised wound edges will flatten at about a month. This, long term, will give better scars. \rightarrow

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Inpatient course

You will recover on the ward for the post operative day and night.

You are likely to be discharged after one or two nights' stay in hospital. On the first day following the procedure your wound sites will be checked, and drains removed if used.

You will be asked to shower the morning after the procedure.

All wound tapes should get thoroughly washed and allowed to air dry.

Postoperative course

You will be discharged with oral pain relief which on average is only needed for two - four days.

The tapes applied to the wounds will simply start to peel off after a few days and these can be trimmed at home with ease.

We would like you to wear a supportive garment for 6 weeks after the procedure both day and night.

Post operative follow up

You will be reviewed at 7 days within your original hospital where the wounds and operative sites are reviewed. All sutures used will dissolve internally.

Mr Potter will review you after three weeks to assess your progress and he will give you regular reviews until all has fully settled and healed.

Do's and Don'ts

You should only return to driving when you have the strength to perform an emergency manoeuvre.

You should avoid strenuous exercise for 6 weeks. Lifting heavy weights should be avoided for 8 weeks at least.

You should be able to return to normal activities at 8 weeks.