

ABDOMINOPLASTY

GENE SLOAN, MD, FACS



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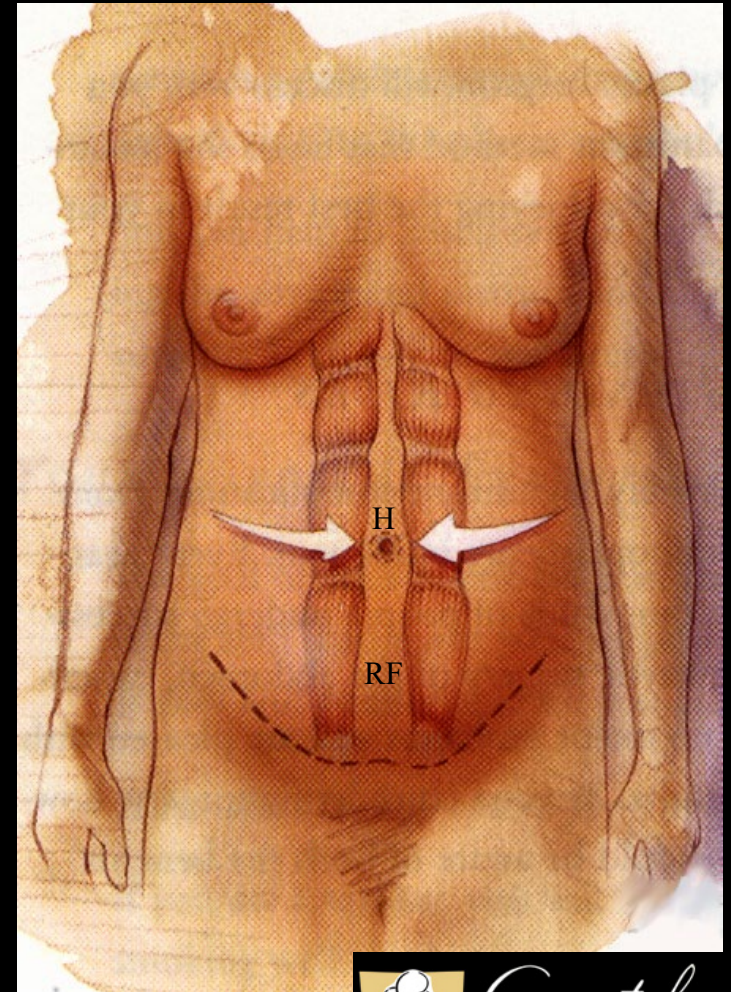
ABDOMINOPLASTY (TUMMY TUCK)

- Improve shape - reduce abdominal bulge
- Remove excess skin and fat
- Tighten abdominal muscles
- Liposuction routinely performed



ESSENTIAL ANATOMY

- Skin
- Fat
- Rectus abdominus muscle
- Rectus fascia (RF)
- Umbilicus (belly button)
- Hernia (H)



SKIN

- Elastic fibers allow skin to conform tightly over underlying tissue
- Elasticity is lost with pregnancy, aging, weight gain
- Loss of elasticity is responsible for loose skin
- Excess skin best treated by excision (scar)



FAT

- Heredity determines location and number of fat cells, which is fixed after puberty.
- Nutrition and exercise increase or decrease the amount of fat in each cell, but will not affect the total number of cells or their distribution.
- Size can be drastically changed by weight reduction, shape stays relatively the same.



MUSCLE

- Weak abdominal muscle tone partly responsible for bulging abdomen
- Weak fascia between muscles treated by suturing
- Hernia is often present



BENEFITS

- Tighter skin
- Improved shape
- Some stretch marks will be removed

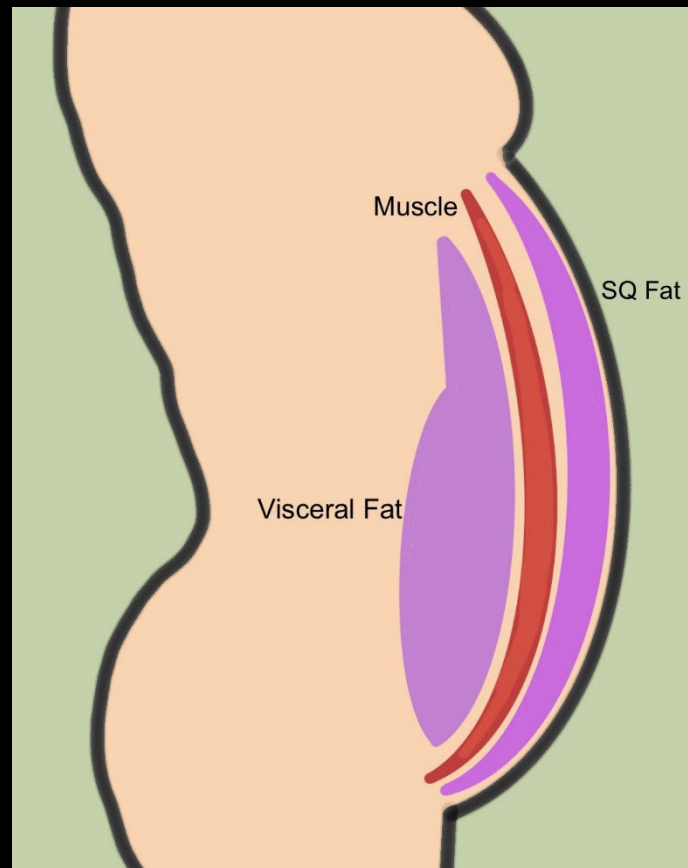


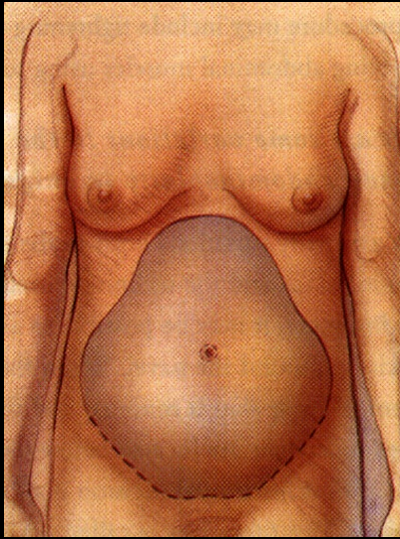
LIMITATIONS

- General obesity not corrected
- Abdominoplasty is NOT a weight loss procedure
- Only front of trunk improved, not sides
- Some excess skin may persist
- May have short vertical scar

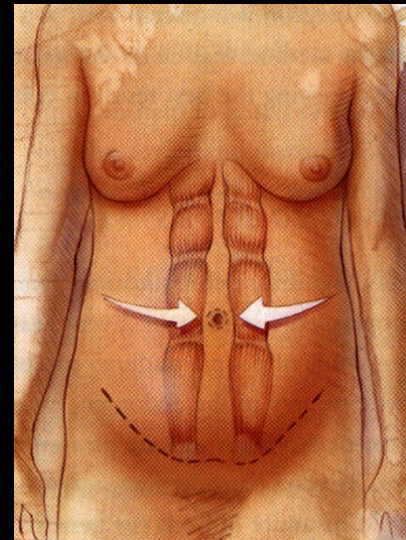


BELLY FAT

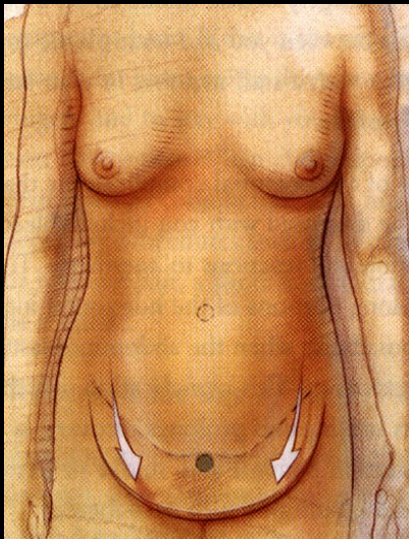




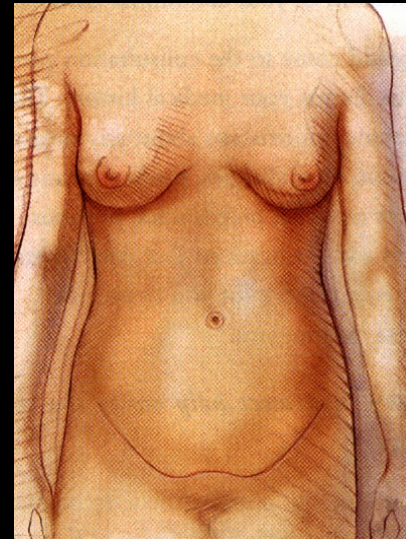
Incision made; Skin undermined



Muscles sutured



Excess skin and fat removed

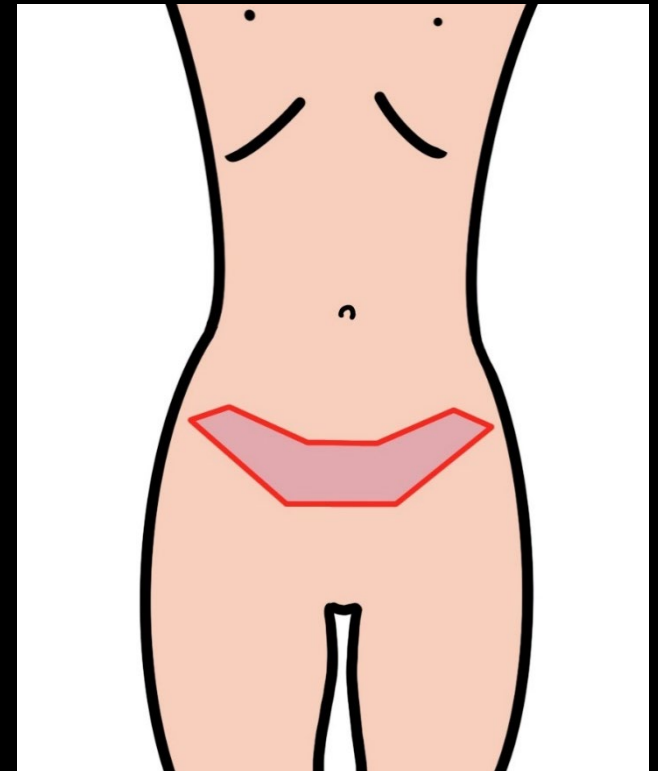


Incisions closed



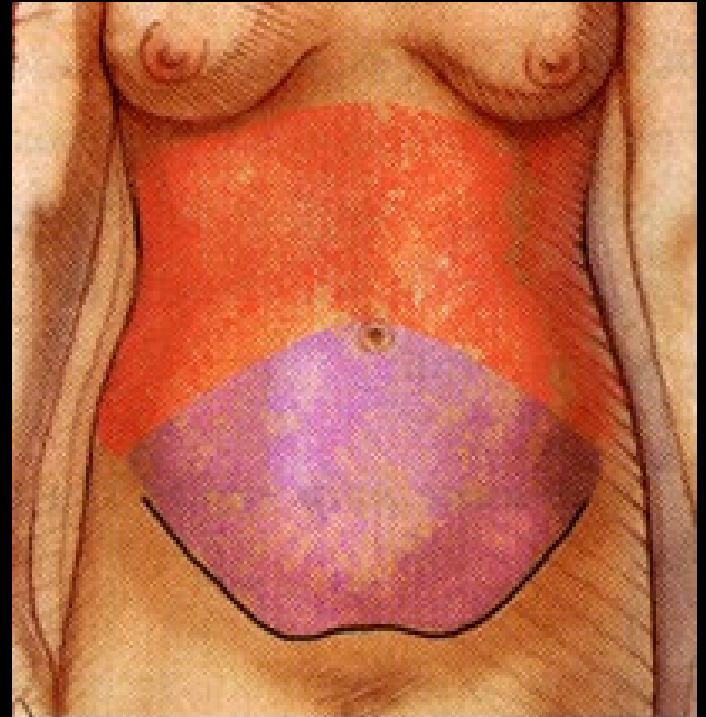
MINI ABDOMINOPLASTY

- Shorter scar
- No scar around umbilicus
- Lower muscle may be tightened
- Easier recovery
- Does not tighten upper abdomen



EXTENDED ABDOMINOPLASTY

- Similar to standard
- Extends far horizontally
- Extensive liposuction
- Belt lipectomy is circumferential
- Long vertical scar if one already there



PROCEDURE

- Outpatient Surgery
- Anesthesiologist Evaluation / General Anesthesia
- Surgeon Pre-op Markings and Operative Plan Review
- Procedure lasts 1.5 to 3 hours
- Need caregiver first 72 hours
- Drain care



RECOVERY

- Off work, no driving x 2 weeks
- No restrictions after 6 weeks
- Start compression garment at 2 weeks
- No Sutures to Remove (Buried Under Skin)
- Tape scars for 3 months
- Change tape every 2 weeks



RECOVERY

- See flatter abdomen immediately
- Drains removed in 5-7 days
- Stand up straight in 10 days
- Can take 6 weeks to “feel yourself” again
- Swelling above scar may persist for 6 months
- Lipo areas – final result in 3 months
- Final scar appearance - 1 year

TRADE-OFFS

- Long permanent horizontal abdominal scar
- Scar at umbilicus
- May leave a vertical scar
- Numb abdomen for 6 to 12 months
- Small numb area may persist



RISKS

- Fluid collection (Seroma)
- Minor wound healing problem
- Nicotine use greatly increases risks
- Need for minor revision



OUTCOME

- Extremely high satisfaction rate
- Improved body contour
- Increased self esteem
- Increased clothing options
- May lessen embarrassment due to unwanted areas of fat
- Better balance of upper and lower body



Had pre-existing vertical scar



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MASSIVE WEIGHT LOSS PATIENT



Vertical scar needed to remove horizontal excess



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BEFORE / AFTER



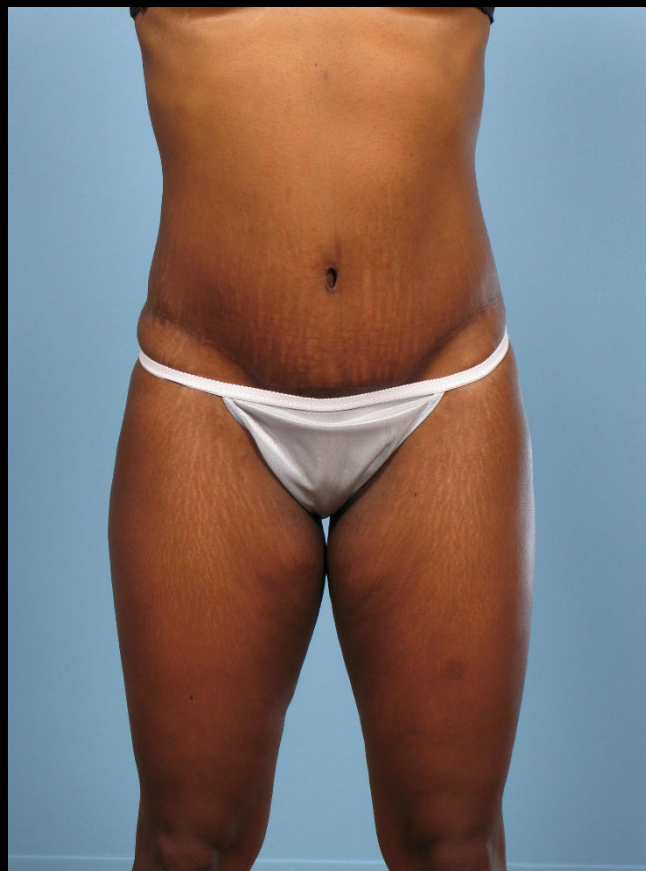
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