NINA S. NAIDU
MD FACS

A Patient's Guide to Tummy Tuck Surgery

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Dear Patient,

Thank you for choosing to explore tummy tuck surgery with Dr. Naidu. This guide was written to help you understand the risks and benefits of abdominoplasty surgery.

Please read the following information in its entirety prior to your visit, as this will make your time with us more productive. If you have any questions about anything contained in this material, we will be happy to discuss them with you at the time of your consultation.

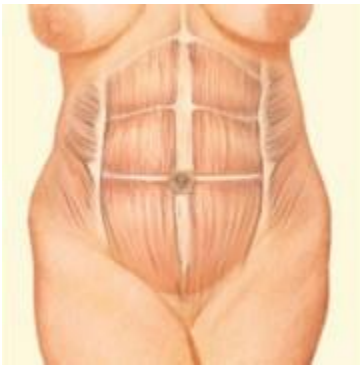
We look forward to meeting you.

When to Consider a Tummy Tuck

After pregnancy or significant weight loss, excess skin and fat can distort the appearance of the abdomen. Many women find that after their second child or after bearing twins, their muscles and skin do not return to their original appearance secondary to repeated stretch of the abdomen. The abdominoplasty, or "tummy tuck" procedure, creates a flatter, firmer abdomen by removing excess fat and skin, and tightening the abdominal muscles. You are a good candidate for a tummy tuck if you are at a stable weight and are physically healthy, you have realistic expectations, and you do not smoke.

Anatomy of the Abdomen

The abdominal wall consists of skin, fat, and muscle. The rectus abdominis muscles, which form the "six pack" of muscles on the abdomen, are covered by a firm sheath called the rectus fascia. This fascial layer frequently weakens and stretches out with pregnancy and weight gain. As a result, once a patient loses weight or has children, she may be left with laxity of the abdominal wall. During surgery, the fascial layer over the rectus abdominis muscles is tightened, and the excess skin and fat are removed.



Procedural steps

The abdominoplasty procedure is performed with a horizontal incision in the lower abdomen within the bikini line. In patients who have undergone a prior C-section, the incision can be made in the same location and extended to the sides. The rectus abdominis muscles of the abdomen are tightened, and the excess skin and fat are trimmed and redraped. Most abdominoplasty surgeries require repositioning of the umbilicus, or navel, through a second incision. In the "mini" abdominoplasty procedure, lower abdominal muscle tightening with fat and skin removal are performed through a limited horizontal bikini incision only, without repositioning of the navel. The resulting scar is usually low on the abdomen, and therefore can be concealed within most bathing suits and clothing. Small, temporary drain tubes are typically placed with both techniques.

Additional procedures

Liposuction is often performed in conjunction with tummy tuck surgery to contour the flanks. Some patients wish to undergo simultaneous breast surgery to lift, add volume, or both. The combination of tummy tuck surgery and breast augmentation or lift surgery is commonly referred to as a "mommy makeover" procedure.

Additional procedures incur additional operating time, anesthesia, and surgical risks.

Surgery and Anesthesia

Surgery is performed on an outpatient basis, either in the hospital or in an ambulatory surgery center. The surgery lasts 1.5—2 hours and is performed under general anesthesia. Many patients worry about the risk of general anesthesia, but it is safe and assures that you will be completely comfortable during surgery. Prior to surgery you will be required to obtain routine bloodwork, and in some cases preoperative clearance from your primary medical doctor. The evening prior to surgery, you should not eat or drink anything after midnight. This ensures that you will have an empty stomach prior to surgery, which is very important for your anesthesiologist to care for you safely. You will need to have a responsible adult available to escort you home after surgery. Some abdominoplasty patients opt to stay in the surgical center overnight following surgery.

Recovery

Following surgery, you will awaken in the recovery area. Once you are fully alert, you will be transported to the step-down area where you will be given something to eat prior to discharge. You will have a surgical garment placed at the conclusion of the procedure. A responsible adult will need to be available to escort you home.

Patients are seen in the office 4-7 days following surgery. At that time your drains will be removed and lymphatic drainage of the abdomen will be performed. Several sutures will be trimmed, but most sutures placed will dissolve on their own.

Walking is permitted the day after surgery, but strenuous activity and heavy lifting are limited until six weeks following surgery. Most patients do not complain of severe pain following this surgery, but note that the abdomen feels "tight", as if they have performed many sit-ups. Pain medication is prescribed for discomfort. Swelling will be present for the initial 2-3 months after surgery, and the final results are typically seen 3-6 months after surgery. The scar will continue to fade and soften for up to one year following surgery, although it may never completely disappear.

Risks of tummy tuck surgery

All surgery carries risks. The most frequently reported complications after abdominoplasty surgery are as follows:

Hematoma: A collection of blood underneath the skin can occur following surgery. Should this happen, you will most likely note a sudden increase in your drain output. Bleeding requires an immediate return to the operating room to stop the bleeding vessel and evacuate any blood.

Seroma: A seroma is a collection of clear fluid underneath the skin. This is removed by drains after surgery. After your drains have been removed, any persistent fluid collection can be removed in the office by using a small needle. Strict adherence to the garment-wearing schedule will reduce your chance of seroma formation. Seromas can result in an infection or an unsatisfactory cosmetic result if left untreated.

Infection: Infection following abdominoplasty surgery is rare. Infection may necessitate intravenous antibiotics or additional surgery. You will be given an antibiotic prior to surgery.

Scarring: You will have a permanent scar following abdominoplasty surgery. Although the scar improves with time, it may not completely fade. In some cases the scar may become thick or wide.

Necrosis: Necrosis, or the death of skin and fat, may occur in smokers, following an infection, or with the use of steroids. This complication may require additional surgery.

Pain: Most patients report only mild discomfort following surgery. A small number of patients may have permanent pain.

Blood clots: Blood clots may form in the legs, or travel to the lungs, following abdominoplasty surgery. This is a potentially fatal complication, and therefore preventive measures, including the use of leg compression devices during surgery, cessation of smoking, and avoidance of estrogens are taken with every patient.

What a tummy tuck cannot do

A tummy tuck is not a substitute for weight loss or exercise. If you have ongoing weight loss, or are planning to become pregnant, you should delay your surgery. A tummy tuck cannot correct stretch marks, but it will remove the skin beneath the umbilicus. Stretch marks above this level sometimes appear lighter after surgery, but they will not disappear.

About Dr.Naidu

Nina S. Naidu, MD, FACS is Board Certified by the American Board of Plastic Surgery and is a Clinical Assistant Professor of Surgery at Weill Cornell Medical College. Her practice focuses on aesthetic and reconstructive surgery of the breast and body.

Dr. Naidu completed her undergraduate studies at The Johns Hopkins University and obtained her medical degree from Cornell University Medical College. After completing her general surgery and plastic surgery training at New York Presbyterian – Weill Cornell Medical Center, she performed an additional year of fellowship training at the University of Pennsylvania. She is a former member of the American Society of Plastic Surgeons (ASPS), the American Society for Aesthetic Plastic Surgeons (ASAPS), and the International Society of Plastic Surgeons (ISAPS). She is an active Fellow of the American College of Surgeons (ACS). Dr. Naidu maintains privileges at New York Presbyterian Hospital – Weill Cornell Medical Center.

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