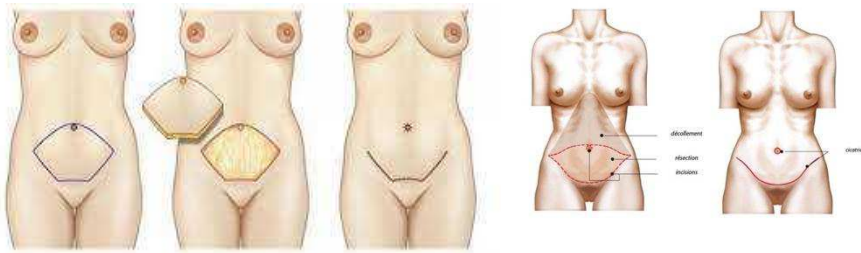


Abdominoplasty “Tummy Tuck”

- 🕒 **Duration : 2h-3h**
- 🏥 **Anesthesia : general**
- 🏥 **Hospitalization : 1 night**
- 👤 **Results : 2 weeks**
- 📅 **Recovery : 10 days - 2 weeks**
- 💰 **From 10 400 CHF**

Over the time, after weight loss or a decrease of physical activity, patient can have an excess of fat and skin on the stomach. When there is excess fat without associated excess skin, liposuction can be considered. When there is also an important skin excess associated, the best indication of correction is a surgical abdominoplasty.

This excess of skin and fat may be associated with stretch marks on the lower abdomen, diastasis (gap) of the rectus muscles after a pregnancy or an umbilical hernia. These elements can be corrected during abdominoplasty.



Technique:

The procedure is performed under general anesthesia. Dr. Lucas creates a low curved scar, just above the pubic hair, along the inguinal folds (natural hollows separating the pubis from the roots of the thighs) which rise towards the iliac spines (bony relief at the top of the inguinal folds). The scar is made as low as possible, so that it is hidden in the underwear.

Then, the skin is separated along the muscular plane and the umbilicus is isolated (the umbilicus is supplied with blood by small vessels coming from the abdominal wall) and this removal continues up to 3 cm from the xyphoid appendix. The diastasis of the rectus muscles is corrected at this stage and if an umbilical hernia is present, it is also corrected. Finally, the skin that is more mobile thanks to the detachment is resected, a suture is made after having made a 1.5 cm hole to pass the umbilicus and suture it. Dr. Lucas uses biological surgical glue for the scar, so that the patient can take a shower as early as the 2nd day after the operation. Liposuction of the hips and flanks can be combined with the procedure to optimize the result.

Mini-abdominoplasty

For minimal skin excess, a mini-abdominoplasty can be performed, which requires less extensive detachment and does not require isolating and transposing the ombilicus. This procedure can be done under local anesthesia with sedation and takes approximately 60-90 minutes.

Results:

Time to final results:

2 weeks to see a significant result, 3 months to see the final result

Longevity of results:

Definitive, but will change with weight changes, pregnancies, breastfeeding and time.

Before surgery:

Stop smoking 1 month before surgery (important risk of necrosis of the umbilicus if active smoking)
Do not take Aspirin 10 days before surgery, inform Dr. Lucas of any anticoagulant medication (Sintrom, Coumadin, Eliquis, etc..) to organize its stop or replacement.
Take Arnica 5 capsules 5 times a day for 5 days before surgery to prevent hematoma.
Shower with Hibiscrub soap provided on the prescription 48 hours before.
On the day of the intervention, you must fast 6 hours before (do not drink, eat or smoke).

Intervention :

Duration of the procedure: 2h30

Anesthesia: general

Location: operating room

Hospitalization: ambulatory for mini-abdominoplasty, hospitalization 1 to 2 nights for abdominoplasty

After surgery:

Post-operative pain: 3/10 the first 3 days then pain to 1/10, with appropriate analgesia. Dr. Lucas performs an infiltration of the rectus muscles during the operation with long-acting anesthetics, in order to cover the 3 postoperative days.

Hospitalization: 1 postoperative night is recommended after the procedure.

Social eviction: 4-7 days with some discomfort. Shower possible from the 2nd day thanks to the use by Dr Lucas of biological surgical glue replacing the dressings.

Return to work: 2 weeks

Resumption of sports: 6-8 weeks

Instructions:

Arnica 5 capsules 5 capsules 5 times a day for 5 days after surgery to prevent hematoma.

Stop smoking permanently to minimize complications.

Clexane 40 mg once a day SC for 7 days, until mobilization.

Check-up by Dr. Lucas on D2, D7, 3 weeks, 3 months, 6 months, 1 year

During the first 3 days especially: no rapid effort, rest, do not get up too quickly, do everything slowly so as not to make any sudden movements (efforts may increase the tension and open the small vessels and thus cause a hematoma).

Removal of redons between day 2 and day 5

Sometimes, when we have closed in tension in order to optimize the aesthetic result, the patient must sleep and walk with the trunk at 30-45° for 3 - 7 days. Dr. Lucas will tell you after the procedure if this is the case.

Do not lift heavy loads > 3-4 kg and no pushing for 6 weeks.

Abdominal compression 3 weeks day and night, 3 weeks during the day.

Shower from the 2nd day: pass water over the scar without rubbing, dab with clean cloth without rubbing
Between the 2nd day and the 7th day, disinfect the wound once a day with Merfen spray or another disinfectant spray.

From the 15th day, gently rub glue on the scar which will disappear over several days without tearing it off

Bath from 3 weeks depending on the evolution of the scar at 3 weeks.

Massage scar with Gorgonium 2 times 5 minutes per day for 3 months after the shower, from the 15th day.

Strataderm silicone once a day for 3 months, starting on the 15th day.

Sun protection with an index higher than 50 during the 6 months following the surgery.

Complications

- Hematoma: A hematoma can occur especially during the first 48 hours. If it is significant, it is necessary to reoperate and evacuate it. During the first few days, you must rest and not make any sudden movements in order to reduce the risk of hematoma.

- Seroma: there may be an effusion of lymph in the area of the abdominoplasty detachment, which often resolves spontaneously. Sometimes, lymphatic drainage sessions are prescribed to accelerate its disappearance and sometimes it is necessary to puncture it in consultation. In exceptional cases, it is necessary to reoperate.

- Localized skin necrosis, necrosis of the umbilicus: the risk of this is greatly increased by tobacco intoxication.

- Infection: fortunately rare, infection may require antibiotic treatment.

- Decreased sensitivity in the abdomen: often transient, full recovery is usually achieved after a few months
- Abnormal scars, hypertrophic or even keloids: patients with dark skin, at risk of abnormal scars, must pay particular attention to the care of the scar with Gorgonium and Strataderm, follow-up remains essential.
- Abdominoplasty and pregnancy: there are no consequences on a future pregnancy, the patient can have a pregnancy after an abdominoplasty, but we advise patients wishing to become pregnant soon to do the abdominoplasty after the pregnancy.
- Scar dehiscence and delayed healing (favored by smoking): sometimes there are small openings in the scar of a few millimeters, which can be healed with dressings, usually without the need for reoperation. The follow-up by Dr. Lucas of the scar is essential.

Combinations and alternatives:

A surgical treatment by mastopexy and breast prostheses can be combined with in the same operation time, and a so-called "Mommy makeover" can be performed: breast lift, breast prosthesis associated with an abdominoplasty.

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