PATIENT LEAFLET - LIPOSUCTION

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WHO THIS LEAFLET IS FOR?

This leaflet is for anyone who is undergoing fat grafting, a surgical procedure used for removing fat from where it can be spared and injecting it where more volume is wanted. Usually only modest amounts of fat are removed from the tummy, thigh or flank areas. Common places to inject the fat are the breasts, face and into scar tissue. The following information is designed to help you make decisions about surgery and about your recovery. The advice in this leaflet offers broad guidelines for people who do not have any complications as well as re-iterating the potential pitfalls and complications possible. Obviously, every individual as different needs and recovers in different ways – so not all the advice in this leaflet will be suitable for everybody.

WHAT TO EXPECT FROM THE CONSULTATION

During the consultation I will assess if you are a suitable candidate for the operation. If so, I will discuss the various methods that can be used, and suggest the best method tailored for you. This will depend on where fat can be spared, how much is needed and where it is needed. I will show you examples of patients who have undergone the surgery and we will discuss the consequences of surgery and possible complications again with sample photographs. There is a lot of information to take in and I always advise patients who wish to proceed to surgery to return for their second pre-operative consultation which is free of charge. I will give you the opportunity to speak to other patients who have had the operation done.

WHAT TO EXPECT AFTER THE OPERATION

Surgery is done under general anaesthetic (with you asleep.) It takes 1-2 hours. Normally you will stay overnight and go home the following day, but it can be done sometimes as a daycase if the amount of fat removal is small. Someone should stay with you at least the first night after discharge. The operation involves making 1-2 small (1/2cm) cuts around where the fat is to be harvested, enough to pass a narrow tube (cannula) that removes the fat under low pressure vacuum, and 1-2 small (2-3mm) cuts around where it is to be injected. I will demonstrate scars and any proposed variation to you in the consultation, depending on what will suit your needs best. After the operation there will be dressings over the wounds that support and protect them. You will need to keep the dressings dry until a week to ten days after surgery when you return for a wound check and trimming of the dissolvable stitches. You can normally then shower and get the wounds wet. You may need to wear a support garment over the operated areas for 2 weeks minimum which will be provided for you, and ordered at 'preadmission'. There will be bruising, swelling and pain around the operation site/s and you will need to take tablet painkillers until this subsides. DO NOT TAKE ASPIRIN or IBUPROFEN which increases the risk of bruising and bleeding. Most of the bruising and swelling will settle in the first two weeks, and most patients don't need painkillers at all after 1-2 weeks. There may be a smaller degree of residual swelling for 3-6 months before you achieve your final appearance and contour. Avoid any heavy lifting and do not go to the gym except for a gentle cardio workout such as walking without any strenuous activity until I have seen you 4-6 weeks after the operation.

Things that will help you recover more quickly

Eat healthily - this ensures your body has the necessary nutrients it needs to heal. Eat a healthy balanced diet with plenty of fresh fruit, vegetables and protein. Don't rely on multivitamin tablets alone!

Stop smoking - smoking affects wound healing and increases the risk of infection. I will advise you to stop smoking prior to surgery and its best to keep off tobacco as much as possible until the wounds have healed completely

Get support – family and friends can give you practical support with tasks you may find difficult in the recovery period such as driving or looking after pets and children. They can also help to keep your spirits up! Until you have fully recovered from surgery and until you can enjoy the results it is natural to feel a little low. I will normally let your family doctor/GP know you are having surgery so they can support you too if needed.

Keep a routine – get up and go to sleep at the normal times for you. Keep moving. You may be a little tired but bedrest increases the risk of deep vein thrombosis. Build activities up gradually. You should be able to recommence light household duties after a week. Keep support stockings on until you are fully mobile again.

CHELTENHAM GLOUCESTER WORCESTER DROITWICH BRISTOL

RETURNING TO WORK

Everyone needs time off after an operation, but too much can stand in the way of you getting back to normal and recovering well from surgery. How quickly you can return to work will depend on how you heal, your response to pain, and the type of job you do. Depending on the nature of your job you might want to ask your employer about returning to work on lighter duties at first. If your employer has an occupational health department they might be able to advise you on this and how having time off might affect any benefits. As a general guide, you can anticipate returning as follows:

Managerial/Supervisory/Clerical 1 weeks Light Manual work 2 weeks Heavy Manual work 3 weeks Custodial or rescue services 4 weeks

DRIVING

You will need someone to drive you home from hospital. Your insurance company should be informed about your operation. Some companies stipulate a number of days following surgery you cannot drive,- so check the policy with them. Before driving, you should be free of the sedative effects of any painkillers you may be taking. Before you go out on the road its worth testing how comfortable you are in the driving position. Be careful with the seatbelt and how this drapes across the breasts. Think what it would be like if you had to stop suddenly. You should be able to grip the steering wheel comfortably and safely and comfortably control the car. Start in a safe place and with short journeys at quiet times. Most of my patients need around a week to two weeks off driving after this operation.

WHAT ARE THE CONSEQUENCES OF SURGERY?

Scars - There will be permanent scars where the cuts are made. Scar quality cannot be guaranteed. Usually the scars are hardly noticeable in time, but at first they may be red and raised and need a period of moisturisation and massage once healed. Sometimes this redness persists for many months or the scars widen and stretch.

Asymmetry – It is normal for one side of the body to be a bit different to the other- You can expect some minor differences after surgery too, but these would be within 'normal limits' i.e. not noticeable to the average person unless scrutinized very closely.

Numbness - Most of the skin around the operated area will feel numb immediately after surgery. This steadily improves with time. You must be careful in the early stages not to balance hot items such as hotwater bottles and laptops on your operated area as there will be no protective feeling and you could burn the skin.

WHAT ARE THE COMPLICATIONS?

Bleeding. - Blood vessels are cauterized at the time of surgery to stop bleeding, but occasionally it can start again, within a few hours. A small amount of bleeding may stop, but if the blood collects and puts pressure on the wound (something called a haematoma) then you will need to go back to the operating room to have this treated. The risk is less than 1%

Infection. - Bacteria are naturally present on the skin and can enter wounds. The signs of this are worsening redness, pain and swelling or discharge of fluid from the wounds, usually 4 or 5 days after surgery. If the infection is on the outside of the body, this will normally settle with tablet antibiotics and it is rarely something that would bring you back to stay in hospital. The risk of this is about 1%.

Seroma - Inflammatory fluid that builds up where the fat was harvested. This is normally reabsorbed but if significantly noticeable can be drawn off with a needle and syringe. This process is painless and takes just a few minutes in clinic, and normally only needs to be done once or twice. It is more common if large amounts of fat are being harvested.

Wound Healing Problems - Sometimes wounds can partly re-open and take longer than the standard of 1-2 weeks to heal and seal themselves. This may need a period of dressings before it heals. If so, this will be done under my supervision and you will be provided with appointments and dressings at no extra charge.

Contour defects - Sometimes there can be dimpling of the skin or areas where it is concave or feels tethered where the fat was harvested from. As the amounts removed are usually small this is rare in experienced hands.

Resorption of Fat - The transferred fat needs to develop a new blood supply to survive. Not all the fat cells will achieve this in time so a number will die off, liquefy and gradually be absorbed into the body. On average about 50% of the transferred volume will be lost after fat transfer, but this amount is not fully predictable and varies from patient to patient. For this reason, the process is often a little 'overdone'- putting in more volume than would appear necessary, and may need to be repeated to get the desired effects.

Deep Vein thrombosis (DVT) - immobility can cause the blood in the veins of the legs to clot. This will cause pain swelling and redness in the leg. You will be given treatment to minimise this risk, which is around 1%

Though most patients have an uneventful recovery, if you develop any of the following you should contact the ward

- Temperature greater than 38.5 Severe pain not settling with painkillers Fresh bleeding from the wound which does not stop with pressure applied for 10 mins Sudden rapid enlargement of the operated area Fluid escaping through dressings
- You think you may have DVT

Bruising and swelling. - The operated area may be buised and swollen for some weeks, sometimes months. This will eventually settle, but the rate is variable and changes from patient to patient. support garments can help and in operations where these are provided you must ideally wear them day and night for 6 weeks

The results of cosmetic surgery are not entirely predictable, so there is no particular guaranteed result from any operation. Sometimes the results of surgery are modest. Beauty is in the eye of the beholder and what is good for some may not be for others. I can only guide the likely result for you in the consultation. You may also notice other un-operated areas more such as the flanks or thighs after tummy tuck or tummy after breast reduction. Surgery comes with no guarantee of happiness. Cosmetic surgery is not to be undertaken lightly, and you must be confident you can cope physically and mentally with any complications. For this reason, I always suggest patients not to hide the fact from friends and family, but involve them in decision making.

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