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PATIENT LEAFLET - THIGH LIFT

MORE INFORMATION CAN BE FOUND AT WWW.MRTHOMASCHAPMAN.COM

WHO THIS LEAFLET IS FOR?

This leaflet is for anyone who is undergoing thigh lift surgery. 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 has 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 how much extra skin you have, the thickness and quality of the skin and underlying tissue, as well as your desired body shape. 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. We will also discuss whether additional liposuction will be of benefit at the time of skin resection. 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, sometimes the day after. Someone should stay with you at least the first night after discharge. The operation usually involves a cut running on the inside of the thigh from the groin crease towards the knee. There may be an additional cut within the inner aspect of the groin crease itself- I will demonstrate this or any proposed variation to you in the consultation. After the operation there will be dressings over the wounds that support and protect them. I may use small drains that are removed the following day. 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 stitches. You can normally then shower and get the wounds wet. You will need to wear a support garment over the arms which will be provided for you. There will be bruising, swelling and pain around the arms 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 thigh contour. You will need to be careful not to traumatise the thighs. Try to sleep on your back and use a pillow or two under the knees when resting. 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.

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 2 weeks

Light Manual work 3-4 weeks

Heavy Manual work 4-6 weeks

Custodial or rescue services 6 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 thigh contour 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. Sometimes the way the scars lie is unpredictable and there are some minor differences in scar length and position between the two sides.

'Dog Ears' - Skin is like any material and when it is sewn can cause some folding of the skin particularly in this operation at either end of the scar. This normally settles with time but if noticeable can be adjusted under local anaesthetic i.e. a very minor procedure and at no extra cost.

Numbness - Most of the thigh skin will feel numb immediately after surgery. This steadily improves with time, but the scar itself may continue to have little feeling.

The ageing process - The body will naturally change shape with age. Normally with time there is development of excess skin. The effects of surgery should last at least 10 years, but if you gain or loose weight the ageing affects are accelerated. If necessary, it is possible to redo the operation.

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 - The raw surfaces of the internal wound can produce fluid that builds up inside. 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.

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 is most common in the middle of the long scar where it is under the most tension, or where two scars meet in the groin. 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. It can potentially slow the recovery process and delay return to work, depending on your job.

Excess swelling - sometimes the swelling in the thigh is prolonged past a few weeks. Eventually it will settle but in 5-10% of patients, they notice some permanent puffiness of the leg which is usually very mild and only noticeable to the patient

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 a DVT

Bruising and swelling. - The operated area may be bruised 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.