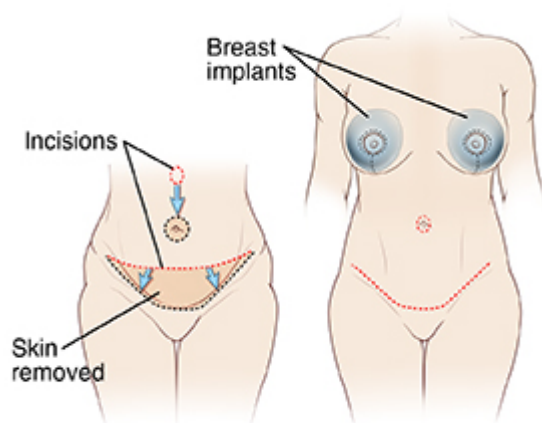


Tummy Tuck with Breast Implants



Tummy tuck (abdominoplasty) and breast implants (augmentation) are 2 cosmetic surgeries that may be done together. Having a tummy tuck can remove extra fat and skin from your belly. It can also tighten weaknesses in the belly (abdominal) wall by repositioning the affected muscles. Breast implant surgery is surgery to place breast implants. These make the breasts larger.



Different kinds of implants

Breast implants are made of a silicone shell. The shell may be filled with saltwater (saline) or silicone (gel). Different implant sizes, shapes, and textures are available, as well as different thicknesses of silicone. There are benefits and drawbacks to each type of implant. You and your healthcare provider will discuss which type is best for you.

Preparing for surgery

Meet with your surgeon before the day of surgery to ask questions about the surgeon's experience with tummy tucks and breast implants, your own surgery, and the results you can expect. The FDA has a list of questions that may help you with this conversation. Ask your surgeon what makes you a good candidate for a tummy tuck and breast implants, and what your choices are for size, shape, and surface texture. Your surgeon will also review the risks and benefits of the surgery. Ask for before and after pictures of other patients so you can understand whether your expectations are realistic.

During this meeting, ask the surgeon for a copy of the patient labeling for the breast implant that will be used. As a patient, it's your right to have this information and the surgeon will expect to provide it. Talk with your surgeon about the risk of breast implant linked to anaplastic large cell lymphoma (BIA-ALCL). This is a rare type of non-Hodgkin lymphoma that can develop after breast implants. The exact number of cases is not known, but the most current data suggest that BIA-ALCL is seen more often after breast implants or tissue expanders with textured surfaces instead of after those with smooth surfaces.

Read and understand the informed consent form. Ask any questions before you sign it.

Prepare for the surgery as you have been told. Also:

- Tell your surgeon if you think you could be pregnant.
- You may need a mammogram or breast X-rays before the surgery. This helps show any breast abnormality. It gives the surgeon an image of your breast tissue before surgery.

- Tell your surgeon about all prescription and over-the-counter medicines you take. This includes herbs and other supplements. It also includes any blood thinners, such as warfarin, certain anti-inflammatory drugs (NSAIDs), and daily aspirin. You may need to stop taking some or all of them before surgery.
- Don't smoke or use vaping nicotine products for 1 month before surgery. Smoking reduces the blood flow in the skin and raises the risk for wound healing problems. Nicotine from cigarettes, e-cigarettes, patches, and chewing tobacco slows healing. Your healthcare provider may delay your surgery if you are smoking. Join a stop-smoking program to improve your chances of success.
- Follow any directions you are given for not eating or drinking before surgery. (If you have been told to take medicines, take them with a small sip of water.)

The day of surgery

The surgery takes about 4 to 6 hours. You will stay overnight for 1 or more nights.

Before the surgery begins

- An IV (intravenous) line is put into a vein in your arm or hand. This line delivers fluids and medicines.
- To keep you pain free during surgery, you're given general anesthesia. This medicine puts you into a deep sleep through the surgery. A tube may be put into your throat to help you breathe.
- Don't smoke or vape. Smoking and nicotine slow healing.

For breast implants

- A cut (incision) for the implant is made. You and your surgeon will have discussed the placement of the incision before surgery. It may be under the breast. It may be under or within the dark skin around the nipple (areola). Or it may be under the arm.
- The surgeon forms a "pocket" to hold the implant. This may be above or below the chest muscle. Then the implant is put through the incision and into the pocket. If the implant needs to be filled with saline, it's done at this time. It's then positioned.
- If both breasts are getting implants, the procedure is repeated on the other breast.
- A small tube (drain) may be placed in each incision. This drains extra fluid as the wound heals.
- Incisions are closed with stitches, surgical glue, or both.

For the tummy tuck

- An incision is made in the belly from hipbone to hipbone. This is often along the lower part of the belly just above the pubic hairline. You and your surgeon will choose the exact incision site before surgery. An incision is also made around the bellybutton.
- The skin and fat beneath are lifted to expose the abdominal wall beneath. The abdominal wall includes fibrous tissue (fascia) and muscles.
- If needed, the belly muscles are pulled together to tighten the abdominal wall. Stitches are used down the middle of the belly, to hold the muscles in their new position.
- After the abdominal wall is tightened, the skin and fat are pulled back down. Extra fat and skin are then removed from the belly.
- Once the skin and fat are pulled down, the bellybutton may be covered up. In such cases, an incision is made so the bellybutton can be seen. The skin is then sewn into place around the bellybutton.
- Small tubes (drains) may be placed near the incisions. These drain fluid that may build up as the wound heals.

- Incisions are closed with stitches, surgical glue, or both.

After the surgery

You will be taken to the PACU (postanesthesia care unit) to be watched as you wake up from the anesthesia. You may feel sleepy and nauseated. If a breathing tube was used, your throat may be sore at first. You will be given medicine to control pain or nausea. If you need to stay overnight, you will be taken to a hospital room. Once you are ready to go home, you will be released to an adult family member or friend.

Recovering at home

Once home, follow any instructions you are given. Your healthcare provider will tell you when you can return to your normal routine. During your recovery:

- Take any prescribed medicines exactly as directed.
- Wear the special bra or bandage you were given before discharge as directed by your healthcare provider.
- Walk slightly bent at the waist, if suggested by your healthcare provider. This helps protect the abdominal wall as it heals.
- Care for your incisions and the dressing (bandage) over them as directed by your healthcare provider.
- Don't shower for 72 hours after surgery, or as directed by your healthcare provider. Don't swim, take a bath, use a hot tub, or do other activities that cause the incisions to be covered with water until your healthcare provider says it's OK.
- When you shower, gently wash your incision sites. Then pat the incisions dry. Don't put lotions, oils, or creams on the incisions until after they are fully healed.
- Don't raise your arms above breast level for 10 days. And don't lift, push, or pull anything heavier than 10 pounds for at least 14 days.
- Don't do strenuous activity and exercise as directed. Talk with your healthcare provider about light exercise, such as walking, that you can do to maintain your weight until you're fully healed.
- Don't drive until you are no longer taking prescription pain medicine and your healthcare provider says it's OK. When riding in a car, carefully position the seatbelt so that it doesn't go across your breasts.
- Be aware that breast swelling may last for 3 to 5 weeks. Talk with your healthcare provider about ways to manage the swelling. Follow instructions as directed.
- Don't smoke or use nicotine products. Nicotine reduces blood flow and slows wound healing.

When to call your healthcare provider

Call your healthcare provider right away if any of the following occur:

- Extreme chest pain or trouble breathing (call 911)
- A fever of 100.4° F (38°C) or higher, or as directed by your healthcare provider
- Bleeding or drainage through the bandage, compression garment, or special bra
- Symptoms of infection at an incision site, such as increased redness or swelling, warmth, pain that gets worse, or foul-smelling drainage
- Pain that is not eased by medicine
- A lot more soreness, swelling, or bruising on one breast than the other

- Breast that is very warm to the touch
- Nothing comes out of your drains for more than 6 hours
- Pain, swelling, redness, or warmth in your leg, calf, or thigh
- Symptoms get worse or you have new symptoms

Follow-up

You will have follow-up visits so your healthcare provider can see how well you're healing. If needed, stitches or drains will be removed at one of these visits. Let your healthcare provider know if you have any questions or concerns during your recovery. To maintain the results of your tummy tuck, take steps to not gain weight. Also call your healthcare provider if you notice any changes in your breasts. This may include injury to the breast or dimpling of the skin of your breast or nipple. If the implants leak or break, they will need to be removed or replaced.

Risks and possible complications

Risks and possible complications include:

- Bleeding or infection
- Blood clots
- Scar tissue squeezing the implant (capsular contracture)
- Extra scarring on the breast or abdomen
- Changes in breast or nipple sensation (short-term or permanent)
- Breasts that are not the same shape or size
- Pain that doesn't go away
- Skin color changes
- Damage to nerves, muscles, or the lungs
- Death of fat cells deep in the skin (fat necrosis)
- Rupture or leakage of an implant
- Not being happy with cosmetic results
- Risks of anesthesia
- Symptoms of breast implant illness. These include fatigue, memory problems, hair loss, or weight changes.

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