ADVERT

Spotlight On... Mummy Makeover

The term 'mummy makeover' is increasingly being used in cosmetic practice and in the media. For this issue's *Spotlight On...* feature, we ask Mr Gary Ross to explain exactly what this involves and how combination treatments can transform the body after pregnancy.

The 'mummy makeover' is a term that is often applied to the combination of body and breast rejuvenation surgery. Often with age, following pregnancy or where there have been changes in weight, there is a change in the skin quality and elasticity. Combined with an effect on the ligaments of the breast and the abdominal wall, the changes associated with pregnancy can alter the appearance of the body significantly. Often women look to improve the contour of both their breasts and their abdomen at the same time.

Although not all women are suitable the vast majority can have both procedures simultaneously and consulting with a plastic surgeon that has experience of these combination surgeries is important. It is also important to consult with a surgeon who can show you examples of his/her work. Some women choose to split the procedures

following a discussion regarding the pros and cons, whereas others are happy to have both surgeries performed together.

TUMMY TROUBLES

The commonest form of 'mummy makeover' is an abdominoplasty- with or without liposuction- and breast augmentation which can also involve mastopexy (breast lift) surgery. The aims of an abdominoplasty are to improve the contour and reduce the excess skin and fat.

The 'ab wall' almost always needs to addressed with tightening of the muscles in the abdominal wall. This can be done by approximating the muscles without direct trauma to the muscles. The layer of the abdominal wall on top of the muscles is tightened and in doing so the muscles are brought together leaving less discomfort postoperatively.

Stretch marks in the lower abdomen can be removed and those found in the upper abdomen are brought down to the bottom of the abdomen. These upper stretch marks are often improved in appearance following an abdominoplasty procedure. Often the pink appearance can become paler in perception, although patients with excessive stretch marks should be aware that these will still be present postoperatively; albeit lower on the abdominal wall. Hernias can occur as a result of pregnancy and these can also be addressed at the same time as an abdominoplasty.

BEST FOR BREAST

In terms of breast rejuvenation, most women feel that they have lost both volume and shape, especially after breast feeding. In some patients where the nipple areola is at a suitable height breast augmentation alone may suffice.

Often women look to improve the contour of both their breasts and their abdomen at the same time...















Pre- & Post-Op Mastopexy Implant & Abdominoplasty

Pre- & Post-Op Mastopexy implant & Abdominoplasty 2A&B

Pre- & Post-Op Breast Augmentation & Abdominoplasty

Pre- & Post-Op Abdominoplasty & Breast Augmentation

Scars are generally placed as low as possible and with improved techniques there is no need to use drains and patients can go home within 24 hours...

Where the nipple areola complex has dropped a mastopexy is often required to lift the breast up the chest wall.

If a patient chooses a mastopexy they may wish to have increased fullness especially in the upper part of the breast and may consider breast augmentation at the same time. This can be with autologous fat or with breast implants. Autologous fat transfer- removed during liposuction- can be used to increase the size of breasts, but patients must be aware that the size increase is small and less predictable than breast implants. There are different types of breast implants and it is important to discuss the different types, different shapes and different positions that the implants can be placed in.

Breast augmentation in combination with an abdominoplasty can give a good result although it is dependent on the position of the nipple areola complex preoperatively and the expectations of surgery. Some patients choose this rather than accept the scars associated with a mastopexy. Patients must be aware that it is likely that they will require a mastopexy at some point in the future.

Combining a mastopexy with an implant at the same time has some limitations in terms of the volume that can be created but a one stage mastopexy implants is often the best way to give back both the shape and volume lost. With mastopexy implant improved techniques mean that drains are often not required and patients can go home within 24 hours.

FORWARD THINKING

When considering a mummy makeover it is best to be at your ideal weight and have completed your family. You should be able to have help at home postoperatively especially if you have young children. Careful consideration of the postoperative arrangements is important so that you avoid excessive lifting in the days following surgery. The surgery should not be performed in smokers or those with significant comorbidity but, with careful patient selection, complications are uncommon.

It is usual to have swelling for a number of weeks afterwards and the final results from abdominoplasty can take a number of months to show fully. It is usual to have some discomfort although this is more usual in the abdomen surgery than the breast. Sensory changes do occur although most changes are temporary.

Issues with infection, haematoma, wound healing or wound breakdown can occur although these are unusual, and with the introduction of internal stitching and internal glue the incidence of seroma (fluid build up) has significantly reduced.

For breast augmentation there can be long term issues relating to breast implants and it is important to go through these potential risks preoperatively so that you can make an informed decision as to which operation is best for

Although there are anaesthetic risks with combined procedures any of the combinations of surgery described can be carried out in under 4 hours, thus minimising anaesthetic risks and preventing the need for a catheter. Early mobilisation is important to decrease the risks associated with general anaesthesia and compression garments should be worn for 4-6 weeks alongside a support bra.

The combination of surgeries is often termed an 'extreme makeover' however the combination of breast and abdominal rejuvenation surgery in one stage is increasingly being recognised as a better alternative in selected patients than splitting the procedures in two stages. Patients can turn back the clock and rediscover the contour they had prior to having children with one op-



For more information on Mr Gary Ross visit www.garylross.com

24 The Cosmetic Surgery Guide The Cosmetic Surgery Guide 25