

OVERVIEW OF BODY CONTOURING SURGERY

The sub-specialty of body contouring after massive weight loss is relatively new to the field of plastic and reconstructive surgery. Weight loss procedures, also known as bariatric surgery resulting in significant long-term weight loss is only a few decades old. Massive weight loss results in improved health and an improved psychological outlook. Reconstruction of the resulting sagging skin involves numerous areas such as facial laxity, arm laxity, hanging breasts, abdominal skin overhang, and sagging of the lower abdomen, back and thighs.

The large quantities of skin that need to be removed is very different from the traditional abdominoplasty ("tummy tuck") that is performed following childbirth, or smaller weight loss, in that body contouring surgery takes longer and deals with considerably more skin tightening. These patients are often medically compromised with additional medical conditions that need to be diagnosed and treated when possible before surgery is done. Recovery takes longer, and there is a higher incidence of complications. Nevertheless, the well being of the patient, and the quality of life after body contouring surgery can be profound as noted by the many testimonials from patients who have had this surgery.

The Obesity Epidemic:

It is estimated that approximately 65% of adults (127 million) in the United States are overweight; 60 million are obese and 9 million severely obese. It is also estimated that 16% of children and adolescents ages 6 to 19 years old are overweight.

Obesity increases a person's risk for diabetes, heart disease, high blood pressure, pulmonary problems, obstructive sleep apnea, anemia, nutritional deficiencies and arthritis. The estimated medical costs exceed \$117 billion a year and it is estimated that consumers spend in excess of \$30 billion a year to lose weight or prevent weight gain.

History of Bariatric Surgery Procedures:

Bariatric surgery procedures for patients, who are unable to lose weight with dieting, include procedures to interrupt the digestive system, or to restrict food intake by altering the size of the stomach. Early operations in the 1950's caused mal-absorption of food by creating a "short gut syndrome" causing vitamin and mineral deficiencies and diarrhea. With time, other medical problems evolved, especially involving the liver. The earlier procedures caused a "dumping syndrome" characterized by nausea, flushing, sweating, lightheadedness and watery diarrhea. Additionally, many patients experienced frequent, foul smelling stools.

The gastric bypass procedure was developed in 1966, restricting both the size of the stomach and the outlet, resulting in fewer postoperative complications.

Newer procedures include the vertical banded gastroplasty, adjustable gastric bands, and gastric bypass.

Body Contouring Procedures:

Body contouring procedures are generally begun 12 to 18 months after weight loss surgery and patients should be weight stable for 3 to 6 months.

Positive postoperative changes include improved self-esteem, better body image, improved mental satisfaction, reduction of eating disorders, reduction of depression and anxiety, and improved health-related quality of life scores. At times, there may be negative consequences such as identity crisis, new relationship demands, jealousy from the spouse, obese friends and family, need to relearn how to eat, weight loss plateaus, and failure to achieve a "normal" looking body.

Staging of Body Contouring Procedures:

The amount of surgery that can be done during any one operative procedure varies according to the number of areas involved, the medical condition of the patient, and the size of the patient. At

times, a single operation may be very helpful; at other times, a series of operations may be performed over a year or more. Operations are often spaced 3 months or more to allow the patient to return to their pre-operative health status before another body contouring procedure is performed.

Most massive weight loss patients tend to be interested in the lower trunk first. A lower body lift also known as belt lipectomy, or circumferential abdominoplasty, results in improvement of the pubis, thighs, buttocks and back, and to a lesser degree, the chest.

Varying deformities involve the arms, often extending into the armpits and onto the sides of the chest. At times, liposuction alone may be beneficial, but more often an arm lift (brachioplasty) is needed, possibly in conjunction with contouring of the armpits and sides of the chest.

Both men and women struggle with considerable breast sag, and varying types of breast lifts are done depending on the deformity. Back rolls are also a problem involving the upper trunk and reconstructive cosmetic procedures are needed here also.

The thighs and legs usually present with considerable hang, especially when there is significant loss of fat (deflation). At times, as in the arms, residual fat is still present, which can respond to liposuction.

The face generally presents with both a loss of volume and skin laxity. Volume replacement can be done with facial fillers or fat grafting, often together with face lifting procedures, and advanced skin care programs.

Informed Consent:

Before undergoing any operative procedure, it is important that you read the informed consent regarding complications, and ask our staff to assist you in areas that you might not understand. This information is vital to your understanding and education.

Despite the potential for a number of surgical procedures, and the possibility of many surgical scars, body-contouring patients are a very happy group of patients. They have cohesive networking before and after their surgery, and a great deal of support from other massive weight loss patients, as well as from family and friends. They have done a remarkable job losing their weight and deserve the rewards of a more streamlined body.

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