



# PIPS *Steps*

A PUBLICATION OF THE PITTSBURGH INSTITUTE OF PLASTIC SURGERY

## Like A Bowl Full Of Jelly

At this time of year all of us are reminded of the famous Clement Clarke Moore poem, "A VISIT FROM ST. NICHOLAS". I continue to be amused by the line, "He had a broad face and a little round belly, that shook when he laughed, like a bowl full of jelly". Maybe those of us who still like to leave a snack for Santa and his reindeer should think of designating the carrots for Santa and the milk and cookies for the reindeer. While most of us, myself included, can and should address our extra poundage through diet and exercise, some of us find that diet and exercise alone are not enough to address our expanding girth. In my last article for this publication I spoke about Liposuction. Today I would like to talk about **Abdominoplasty**, otherwise known as "Tummy Tuck".

The procedure of Abdominoplasty is designed to address two problems: first, the presence of redundant abdominal skin, usually lower abdominal skin, which has stretched (perhaps because of multiple pregnancies or seesaw weight gains and losses) beyond its ability to contract following weight reduction; and second, the diastasis or separation of lower abdominal muscles, specifically the Rectus Abdominis Muscles. The latter problem, that is the diastasis of the Rectus Abdominis Muscles, is related almost exclusively to pregnancies, whether delivered vaginally or via Caesarean section. The Rectus Abdominis (straight abdominal) Muscles extend from the lower edge of the central ribcage to the pubic bone and sit on either side of the vertical midline of the abdomen. As pregnancies repeatedly strain the junction of those muscles, particularly along the lower abdomen, those muscles move farther and farther apart resulting in an unsupported lower abdomen. That loss of integrity or strength often translates into lower back pain because of increased stresses placed upon the lower back muscles to maintain posture compromised by the forward displacement of lower abdominal contents. The end result of all of the foregoing is not only an

abdomen which may not be particularly appealing to the eye and certainly unsuited to the use of revealing clothing, but also musculoskeletal imbalance and pain.

Abdominoplasty involves not only the surgical removal of the excess, unnecessary skin and related subcutaneous (under skin) fat of the abdomen, primarily the lower abdomen, but also a re-approximation to a more normal anatomic position of the Rectus Abdominis Muscles. I like to call the procedure a "Facelift" of the abdomen. The surgical incision through which all of the foregoing is undertaken is positioned along the lowermost aspect of the abdomen, just above the inguinal (groin) creases and the hair-bearing pubic area. The resulting scar usually does not prove to be "hairline" thin as usually is the case with a traditional "Facelift" scar, but is one which, over time, generally proves very satisfactory and, given its position, certainly is easily camouflaged by most clothing, even most two piece bathing suits. The procedure normally is undertaken under general anesthesia and, in selected patients, may be undertaken on an outpatient basis but usually is followed by a one night hospital stay. Postoperative discomfort and disability are surprisingly minimal and most Abdominoplasty patients are back to their normal day-to-day activities within 10 to 14 days and even extreme physical activities within 4 to 6 weeks.

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While the procedure is one I, like most plastic surgeons, undertake moreso upon women than upon men (primarily because the major cause of the problems necessitating Abdominoplasty is pregnancy), it is a procedure which I, again like most plastic surgeons, undertake upon men with increasing frequency.

Under occasional circumstances, when the diastasis of the Rectus Abdominis Muscles is significant enough to produce documentable back pain in need of constant analgesics, physical therapy, etc. or when the abdominal "apron" of skin/fat is significant enough to compromise personal hygiene of the pubic and related areas, the procedure of Abdominoplasty is "covered" by health insurers. Ordinarily, though, health insurers regard the procedure of Abdominoplasty as a "cosmetic" undertaking.

*For more information about this and other cosmetic and non-cosmetic procedures, please call The Pittsburgh Institute of Plastic Surgery at 1-800-321-7477 or The Plastic Surgery Information Service at 1-800-635-0635.*



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