



PANTHEA  
CLINICS



Mummy Makeover



# What is a Mummy Makeover?

Mummy makeover is a term given to surgical procedures undertaken after pregnancy that focus on the breast and abdomen. It is a commonly performed procedure for mothers seeking to regain much of their pre-pregnancy physique or to improve their overall self-image.

During pregnancy and breastfeeding, breast tissues respond to normal cyclical hormonal changes as well as those related to the sustained hormonal changes. Because of this, the breasts increase in size and then reduce once again when normal hormone levels have been resolved. Although this is an entirely normal process, after it is finished, it can leave the breasts looking and feeling empty and deflated.

Equally, the abdominal tissues respond with extraordinary resilience during pregnancy. The expansion of a pregnant woman's belly over what is a relatively short time period may result not only in weight changes, but also subsequent accumulation of fat deposits. Furthermore, redundant skin of the abdominal wall after childbirth may not, despite the inherent elasticity of the skin, return to its previous taut state. 'Stretch marks' are caused by microscopic rupture of a layer of collagen and elastin bundles under the skin, revealing the underlying vessels.

Physical signs of pregnancy such as sagging breasts and tummy can be rectified by this procedure. The breasts may be lifted and/or augmented with implants, and the abdominal tissues can be brought back to its original shape with an abdominoplasty ('tummy tuck').

# In order to have a breast lift, will I need to have implants?

Mastopexy ('breast lift') is a procedure that allows lifting of the sagging breast, repositioning of the nipple-areolar complex and re-coning of the breast tissues.

Whether or not you also require breast implants depends on whether there is enough breast tissue to recreate a new breast mound. Many women following family planning and breast feeding have deflated breasts but adequate amount of breast tissue to recreate breast mounds. In these cases, a breast lift without augmentation would be appropriate.

However, when there is not enough breast tissue and an upper breast pole prominence is needed, Dr Farhadieh will usually suggest a breast augmentation as well. Breast implants will assist in restoring and supplementing the loss of volume and help return the nipples to their natural position.



# Will I need a mini, standard or extended abdominoplasty?

## **Mini-abdominoplasty**

The mini-abdominoplasty differs from a standard abdominoplasty in a shorter resulting scar and restricted skin resection. This procedure is indicated in patients with a mild to moderate skin laxity and tissue excess of the lower abdomen.

## **Standard Abdominoplasty**

The standard abdominoplasty is one of the most common procedures in plastic surgery world-wide. It enables simultaneous treatment of the upper abdomen, peri-umbilical area and lower-abdomen with optimally concealable scars. The standard abdominoplasty is indicated in patients that demonstrate a diet-resistant adiposity of the abdominal wall in combination with slack and atonic (loss of muscle tone) skin, such as patients after multiple pregnancies, patients with weakness of the connective tissue or patients after weight loss.

## **Extended Abdominoplasty**

An extended abdominoplasty is frequently offered to patients after moderate to massive weight loss, who would benefit from a technique that expands the scope of the surgery beyond the abdominal region. The procedure addresses loose, hanging skin, removes excess deposits and improves 'love handles' as well as the lower back and hip region.





## Will I have liposculpture as part of my procedure?

In patients with an abdominal contour impaired by an irregular and solely thickened abdominal fat layer, liposculpture may improve the abdominal shape dramatically. Ideal cases for liposculpture are patients with localised deposits of fat that cannot be disposed of regardless of health and fitness regimes. This stored fat may be inherited or have accumulated with age. Adjoining regions, such as the flanks and the hips, can also be treated by liposculpture during the abdominoplasty procedure. Cannulas are introduced through small incisions and, using suction assistance or ultrasound frequencies, these deposits are removed. liposculpture can also be used to help slim down and define contour in the hips, thighs, parts of the abdominal wall or other anatomical locations.

# What can I expect at my initial consultation?

## History

Dr Farhadieh will go through details of your medical history such as weight stability and constancy, the frequency of your exercise regime, past surgical history including bariatric procedures, nutritional disorders, medications, the number of pregnancies and children, history of caesarean section, gastrointestinal, cardiac and/or pulmonary history, and smoking history.

## Physical examination

Dr Farhadieh will discuss the areas that concern you with your body, so that he can get a clear understanding of what you're hoping to achieve with surgery. He will then assess the quality and redundancy of your fat, skin as well as the underlying layers in the breast and abdomen. Any pre-existing scars will be documented, as they may impair the blood supply of the overlying skin.

## Aesthetics

Dr Farhadieh will discuss all surgical options, and associated procedures such as liposculpture, with you. This allows us to find the right option for you and address your particular needs. Regardless of which option you choose; your surgical incisions will be tailored to your preference to ensure that they can be concealed as much as possible.

## General

Every surgery carries risks and complications, and these will be discussed with you at length during your consultation. Dr Farhadieh will also take preoperative photos for your medical records. Smokers will be instructed to stop smoking for 3 – 6 weeks prior to surgery and to abstain for at least 3 – 6 weeks after surgery. Patients are advised to stabilise their weight for at least 6 – 12 months preoperatively; any desired weight loss should be completed prior to surgery.

# What happens on surgery day?

## Prior to surgery

On the day of your surgery, you will be admitted to hospital where Dr Farhadieh will see you along with our anaesthetist so that any remaining questions can be addressed and your procedure check list can be reviewed for a final time. Surgical markings will be done just prior to your procedure. The markings are started in an upright position with your chest, the borders of your underwear and the expected and desired incision lines. You will also be asked to elevate the redundant abdominal tissue for identification of the abdominal fold.

## Your procedure

Once Dr Farhadieh has completed your surgical markings, you will then be brought to the operating theatres where you will be monitored and anaesthetised. At surgery, incisions will be made around the nipple as well as a vertical incision from the nipple to the lower part of the breast. Dr Farhadieh will then re-cone the breast shape and reposition the nipple-areola complex for a more youthful look. Excess abdominal wall skin and fat will then be removed and your muscles will be tightened where indicated. The wounds will be closed over drains and sealed with sutures, skin glue and dressings. Postoperatively, you will be moved to the recovery area where local anaesthetic and pain relief will be provided. Your compression garment will keep your skin nice and tight, and should be worn for 8 weeks postoperatively.



[www.panthea.com.au](http://www.panthea.com.au)

# What will my follow up include?

## **Postoperative appointment**

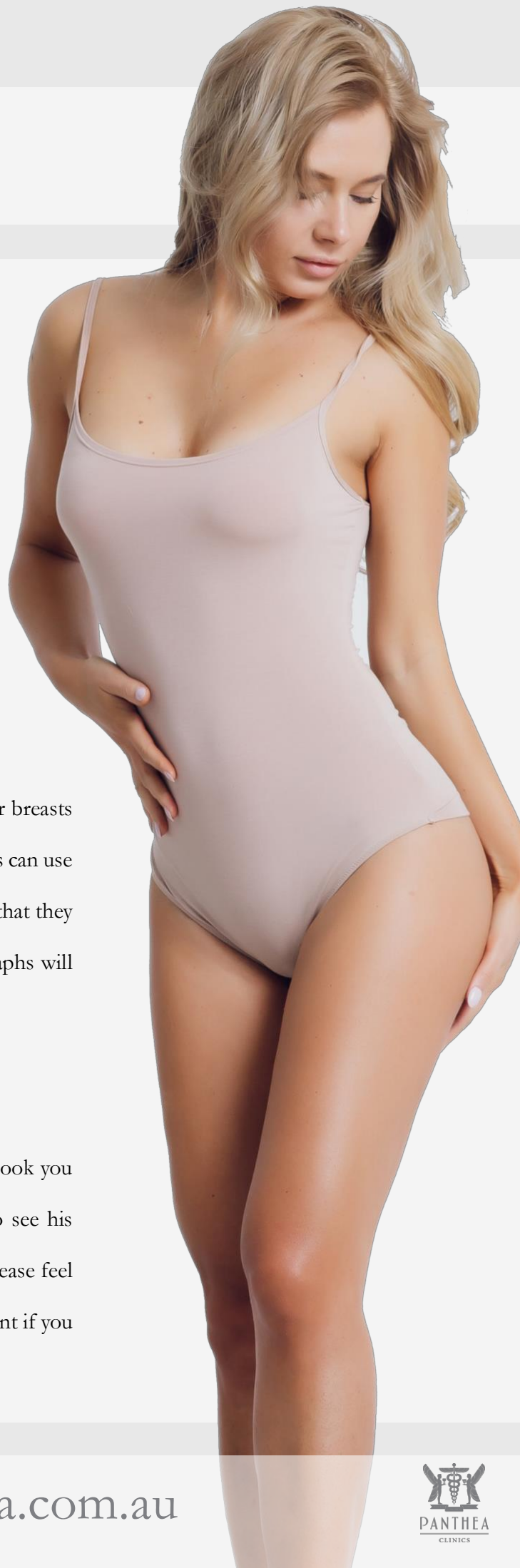
You will be asked to come into the clinic 5-7 days after your procedure. Dr Farhadieh will remove any drains and inspect your wounds with reiteration of scar management advice. You will be able to resume most normal activities within 2-3 weeks. We advise that you do not major sporting activities for 8 – 12 weeks postoperatively.

## **3-month review**

At your 3-month review, Dr Farhadieh will examine your breasts and abdomen to ensure that you have healed well. Patients can use this time to ask Dr Farhadieh any questions or concerns that they may have. At this appointment, medical record photographs will be taken.

## **Subsequent reviews**

The team here at Panthea Clinics will give you a call to book you in for any subsequent reviews, as Dr Farhadieh likes to see his patients again 6 – 9 months postoperatively. However, please feel free to give us a call at any time to schedule an appointment if you wish to speak to Dr Farhadieh.





# What are the potential risks and complications?

## **For the breasts**

There are inherent risks involved with all surgical procedures, and when they involve a prosthetic device these are considered more significant. Potential aesthetic outcomes include capsular contractures, malposition of implant, implant visibility/palpability/rippling, sensory and asymmetrical position changes to the nipples/areolas, breast size asymmetry, contour deformities, galactorrhoea (lactation unassociated with breastfeeding or childbirth), skin stretch deformities and need for device change with passage of time.

Surgical complications include postoperative haematoma, device failure/rupture/rotation/infection, hypertrophic/keloid scarring as well as implant-related T-cell lymphoma.

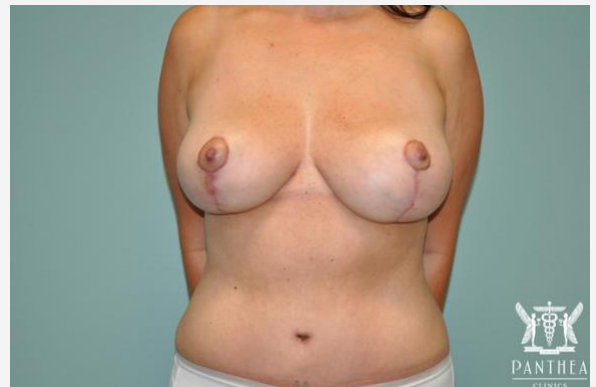
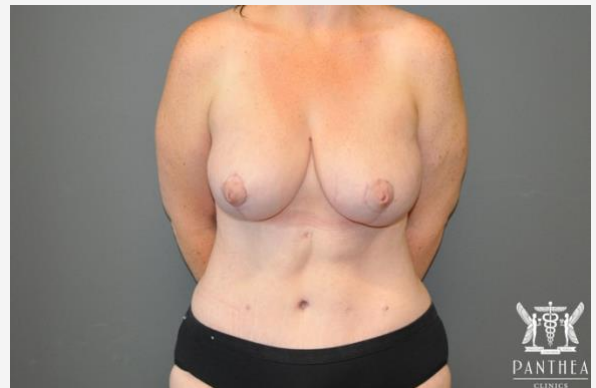
## **For the abdomen**

General symptoms after skin-tightening procedures include postoperative pain or soreness, numbness of the abdominal flap, bruising, general fatigue and discomfort due to increased skin tension for many weeks.

Local complications in all regions include haematoma, seroma, wound infection, fat necrosis, wound dehiscence, paraesthesias, and persisting numbness. Further local complications include dog-ears, hypertrophic or malposition scars, and in the abdominal region cosmetic problems related to the belly button. Most of these issues can be avoided with good preoperative planning and attention to surgical detail.

Treatment by liposuction may lead to postoperative contour irregularities and dermal tethering. Other complications may include deep vein thrombosis, pulmonary embolism, fat embolism, and respiratory compromise.

# Mummy Makeover Gallery



# Frequently Asked Questions

**Q: How much will my consultation cost?**

\$250. With a current GP referral, you will be able to claim approximately \$75 back on Medicare rebate.

**Q: How much will my procedure cost?**

A mummy makeover procedure can range between \$28,000 - \$30,000, which is inclusive of surgeon, anaesthetist and hospital fees.

**Q: Will my private health insurance cover the hospital fees?**

Some patients may qualify for a Medicare item number, such as those after massive weight loss, however this is not always the case. Dr Farhadieh will assess whether you qualify for an item number during your initial consultation.

**Q: Is the surgery painful?**

There is some discomfort associated with surgery. Most patients report a 'tightness' rather than pain. However, we have an excellent pain control regime, which includes local anaesthetic for the immediate postoperative period as well as powerful analgesics.

**Q: How many days will I need to be in hospital for?**

You may be required to stay in hospital for 1-3 days.

**Q: I need further information on postoperative care. Where can I find this?**

Our experienced team here at Panthea Clinics has developed a 4-page document on postoperative care to help you through the recovery process. This will be given to you prior to your procedure date.