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Consultant Reconstructive & Aesthetic Plastic Surgeon

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Information for patients considering liposuction

About Mr Stone

Mr Stone is a Consultant Reconstructive and Aesthetic Plastic Surgeon, now in his 14th year as an NHS Consultant, based at the Royal Devon & Exeter Hospital. In the NHS, Mr Stone undertakes a wide range of reconstructive procedures especially those related to major soft tissue cancers and malignant melanoma.

In his private practice, Mr Stone now specialises only in cosmetic breast surgery (breast enlargement, reduction and uplift) and body contouring procedures such as abdominoplasty and liposuction, although he also has extensive experience in other areas of cosmetic practice including face lifting, rhinoplasty and blepharoplasty.

Mr Stone is registered with the General Medical Council (appearing on the specialist medical register for plastic surgery) and he is a full member of the British Association of Plastic, Reconstructive and Aesthetic Surgeons (BAPRAS). He is also an accredited Medico-Legal Expert working in the field of clinical negligence and is a member of several medico-legal societies.

What should I do before my consultation?

Liposuction is a very commonly-performed cosmetic surgery procedure in the UK and is intended to address discrete areas of fat deposition as may occur, for example, on the hips or tummy. Before your consultation it would be helpful to consider what areas of your body you feel are disproportionate due to an excess of subcutaneous fat so that these can be specifically targeted for treatment. It is important to realise that liposuction is not a treatment for generalised obesity for which general advice regarding diet and exercise might apply. Liposuction may be undertaken as an adjunct to other procedures, typically abdominoplasty. Indeed some patients who are unhappy with the appearance of their tummy, and who feel that liposuction may be an effective treatment, may also need to consider an abdominoplasty.

There are many web sites available for you to read about liposuction. A good starting point would be the Exeter Medical site (www.exetermedical.co.uk) or Mr Stone's own web site (www.medicalandlegal.co.uk), where you can see before and after photographs of patients Mr Stone has operated on.

What happens at my consultation?

Mr Stone sees his private cosmetic patients at 'Exeter Medical', a private clinic close to Exeter Airport. He generally reserves around 45 minutes for each new patient.

When you see Mr Stone he will go through your medical and surgical history to assess your overall fitness for surgery. In the vast majority of cases there will be no concerns about undergoing the operation although some patients may need a pre-operative assessment prior to admission. He will spend some time listening to the concerns that you have and will need to examine the areas of your body that you have identified as concerning you. During the examination there will, of course, be a female chaperone in attendance.

Mr Stone will then discuss how liposuction, or indeed other treatments, might be used to help you. He will explain to you how the operation of liposuction is performed, the risks that are associated with it and the recovery period afterwards.

Some patients may wish to see pictures of other patients who have undergone similar surgery to you, so there will be a selection of clinical photographs for you to see. These will help you get an idea of what can be achieved but may not be directly relevant to you nor will they necessarily predict your own individual result.

Mr Stone will not normally need to see you between your initial consultation and your admission date unless you have any specific concerns in which case he would, of course, be more than happy to do so.

How much does the consultation cost?

Mr Stone charges £100 for a new patient consultation. There is no fee for any related follow-up consultations.

Mr Stone will write to your GP informing them about your proposed operation and he will send you a copy of that letter.

How is the operation done and how much does it cost?

Liposuction is a relatively straight forward procedure. It is usually performed under general anaesthesia and most patients are suitable for discharge home either the same day or the day after treatment.

Several small incisions are placed around the area to be treated to allow access for the liposuction canula. These incisions are placed carefully so as to hide them in as favourable a cosmetic location as possible. Mr Stone uses a tumescent technique for liposuction. This means that a solution of saline, local anaesthetic and adrenaline is injected in to the fat tissue before it is removed to make the aspiration of fat cells more effective. This technique also minimises bleeding and bruising as well as post-operative discomfort.

The liposuction canula is then introduced through one of the incisions and suction is applied. The canula is criss-crossed through the area to be treated from several different angles using each of the planned incisions, thereby helping to produce a smooth, even result.

Mr Stone will measure the volume of fat that is removed, matching similar areas on either side of the body as closely as possible to maintain symmetry. However, perfect symmetry may not always be achieved. At the end of the operation a dissolvable stitch is used to close each of the small incisions and a pre-ordered pressure garment is then fitted.

The operation is undertaken either at the Exeter Nuffield Hospital or at the Royal Devon and Exeter Hospital. Payment will be requested in advance of your operation. The cost of cosmetic surgery will include hospital, surgical and anaesthetic fees and follow-up. Costs sometimes vary depending upon the specific nature of the proposed procedure and are likely to depend upon where you elect to have it performed. Mr Stone is happy to discuss costs with you at the time of your consultation.

What are the risks of liposuction?

There are risks associated with any operation. Mr Stone will take some time to outline the risks and complications that can be associated with liposuction. In brief, these include risks that are associated with any surgical procedure including scarring (which can occasionally become lumpy), infection, bleeding, and thrombo-embolic complications (clots in the legs or lungs).

While scars are inevitable, liposuction scars are small and generally well hidden. The other complications are rare, but there are some factors which might increase your risk of thrombo-embolic complications such as smoking, obesity, a previous history of deep vein thrombosis and taking the oral contraceptive pill. Every precaution is taken to avoid clotting problems in all patients. Those patients who are taking the oral contraceptive pill are asked to discontinue for six weeks prior to surgery. Infection complicating a liposuction procedure does have the potential to be relatively serious because of the wide areas treated but, once again, this is very uncommon.

There are also some potential complications related specifically to liposuction. Contour irregularities may sometimes be encountered following liposuction, with residual areas of lumpiness or the perception that either too much or not enough fat has been removed from a particular area. This may occasionally necessitate further surgery, potentially at extra cost, although often these irregularities settle down in time of their own accord. From a cosmetic point of view, liposuction can also generate some skin redundancy in treated areas. While this would be likely to resolve in younger patients, older patients, smokers and those patients who have lost a significant amount of weight may find that this redundancy persists. Consequently a secondary skin tightening procedure may sometimes be required.

Most patients have an element of swelling for at least a fortnight after liposuction and some report numbness which would normally settle. There is, however, a risk to skin and other nerves during liposuction, depending partially upon the area treated, but this is rare. One other risk of abdominal liposuction, albeit extremely rare, is abdominal wall perforation and injury to the underlying abdominal contents. This has been reported very infrequently across the world but because it would be a serious complication it is worthy of mention.

This list is not exhaustive and there may be some risks that are relevant to you as an individual that have not been specified here.

What happens on the day of my operation?

You will be asked to come in a couple of hours before your scheduled theatre time. One of the nurses will perform some routine pre-operative checks and you will be seen by a consultant anaesthetist. Mr Stone will then see you to sign a consent form and take some pre-operative photographs purely for your clinical records – they will not be shown to any other patient without your permission.

Mr Stone will draw contour lines around the area(s) to be treated to guide the liposuction in theatre.

What should I do after my operation?

When you wake up you will have already been fitted with a pressure garment. The aim of this is to compress the area(s) treated by liposuction both to control swelling and encourage the soft tissues to heal together. You are also likely to be wearing support stockings and calf pumps which gently massage your lower legs to maintain the venous circulation, and thereby reduce your risk of a DVT. A drip will be placed in the back of your hand and the nurses and anaesthetist will ensure that you have all the painkillers that you might need. There is usually some leakage of tumescent solution (most of which is removed with the liposuction) from the dressings beneath the pressure garment after surgery, but you should not be at all worried by this as it is self-limiting and is otherwise harmless.

Patients are encouraged to mobilise as soon as possible after liposuction. After you have been discharged from hospital you should require simple pain killers (such as paracetamol and ibuprofen) only and you will be advised to keep the pressure garment on for the next two weeks day and night, removing it only briefly for bathroom visits. Mr Stone or his nurse will see you for review after two weeks at which point the pressure garment will be removed and the scars inspected. You can then start moisturising the scars, either with a standard moisturising cream, such as Nivea, or with a silicone-based cream such as Dermatix which has been shown clinically to improve some scars. Alternatively, some patients elect to use Bio-oil to soften their scars which generally heal very cosmetically anyway. Pressure garment support should be maintained for a total of six weeks post-operatively; a second garment will help with rotation and washing of the garments.

Most patients find that they are confident to drive after a couple of weeks at which point, depending upon their occupation, they can consider a return to work.

Mr Stone will see you again for a final check-up after 6-8 weeks. Thereafter he will not normally need to see you again but is always available should you have a problem.

What is something goes wrong?

Adverse outcomes are very unusual following liposuction. Certainly, if there is an immediate post-operative complication, or one arising within one month, necessitating a return to the operating theatre (such as bleeding or infection), there are no cost implications for you. Even after one month both Mr Stone and the provider hospital understand that their overriding priority is to try to achieve for you what you had hoped, and so any further surgery that may be required will be considered on an individual basis in terms of on-going costs. You should anticipate, however, that there will be a cost for surgery related to problems that occur in the longer term such as cosmetic adjustments etc.

Informed consent

It is important that you have a full understanding of the nature of the proposed treatment, its purpose, the risks that any reasonable patient would consider to be significant and the alternative treatment options before agreeing to undergo surgery. If there is anything that you have not understood from this information leaflet you should ensure that you have clarified it with Mr Stone, either verbally or in writing, before your operation.

This information sheet will form part of your medical records. You should sign and date one copy and keep a further copy safely. You will find it useful to refer to during your treatment programme.

Signed (patient)

Date:

Mr Stone's private practice is conducted through a limited liability company, registered with Companies House number 07184587 'C A Stone (Medical & Legal) Ltd'. His practice is indemnified by Premium Medical Protection.