



KATARZYNA MACKENZIE

PLASTIC SURGEON

Thigh Lift

Ageing and weight loss can leave patients feeling conscious of their body. If exercise and weight control efforts have not achieved the goals for a body that is firmer, more youthful-looking and more proportionate to your overall body image, a surgical lift may be right for you.

Thigh lift surgery is designed to tighten the skin and improve the contour of the inner thigh, giving smoother contour. The surgery can improve the shape of the inner thigh, allowing people to wear clothing without feeling self-conscious. It may help to increase confidence and a better self-image.

Length of surgery	2-3 hours
Anaesthesia	General anaesthetic
Hospital stay	1 night
Risks/complications of surgery	Frequent: Bruising, swelling, temporary numbness Infrequent: Infection, bleeding (haematoma), delayed wound healing, asymmetry, skin necrosis, poor scarring, seroma, nerve injury, labia displacement
Recovery	5-7 days until socialising with close friends and family 2 weeks until return to work and normal social engagements 2-4 weeks compression garment 3-4 weeks until swelling and bruising disappears 4 weeks reduced lower limb movement 6 weeks until return to gym and other strenuous activities 3 months until final result
Driving	2 weeks
Follow up	1 week, 6 weeks, 3 months, 6 months
Duration of results	Permanent unless followed by weight gain

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Thigh lift information sheet

Any plastic surgery procedure is a very personal choice and understandably there are a number of questions that arise. This information sheet is a general guide for patients considering a thigh lift under the care of Dr Mackenzie. It should provide the answers to some questions that you may have. There are many factors that can affect your individual operation, your recovery and the long-term result. Some of these factors include your overall health, previous surgery, any bleeding tendencies that you have and your healing capabilities, some of which will be affected by smoking, alcohol and various medications. Such issues that are specific to you need to be discussed with Dr Mackenzie and are not covered here. Please feel free to ask her any further questions before you sign the consent form.

Introduction

As we age, the natural elasticity of the skin is lost as the amount of elastin lessens, and the skin and fat of our inner thighs begin to sag, creating saggy skin that hangs from the inner part of the thighs. This condition can also occur after substantial weight loss. Exercise may help to strengthen and improve the underlying muscle tone of the thigh; however, exercise will not help any excess skin that has lost tone, nor help underlying weakened tissues and localised fat deposits.

Patients with this condition are self-conscious and embarrassed about the appearance of their thighs. They do not like the saggy inside the thigh and the excessive skin and fat just above the knee. In addition, they also suffer physical discomfort as the inner thighs rub against each other causing chafing.

It can be corrected by removing skin and fatty tissue, however the surgery often leaves a scar which begins in the groin area, runs across the inside of the thigh and then under the crease of the buttock. In cases where there is significant excess loose skin on the inner aspect of the thigh going almost to the level of the knee, additional surgery must be done to contour the area properly. This results a vertical scar on the inside of the thigh.

Liposuction may be used as an adjunct to help with the contours of the inner thigh or in some cases liposuction can be used as an alternative.

In cases where skin elasticity is poor, a thigh lift along with liposuction is recommended.

If you are committed to maintaining a healthy lifestyle and a moderate weight, a thigh lift can help you regain the youthful thigh contours you desire.

What is a thigh lift?

Thigh lift surgery is a procedure that reshapes the thighs by reducing excess skin, and in some cases fat, resulting in smoother skin and better-proportioned contours of the thighs and lower body.

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Who is a good candidate for a thigh lift?

Thigh lift is an individualized procedure and may not be suitable for everyone. The following are common reasons why you may want to consider a thigh lift:

- Aging, heredity and weight loss have left you with significant inner thigh skin excess
- You are bothered by the appearance of the thighs
- Self-consciousness due to the appearance of the thighs
- You want your thighs to have a better, more proportional contour and a firmer look and feel.
- You have undergone bariatric surgery or massive weight loss
- You are distressed about loose skin on your thighs
- You have difficulty fitting into clothing because of heavy thighs
- You have succeeded in a weight reduction program and you now desire shapely thighs that reflect your more proportional, toned figure

Thigh lift may be a good option for you if:

- You do not smoke as smoking slows down the healing process and increases the risk of serious complications during and after surgery
- Your weight is stable. Slender individuals with extra fat and loose skin of the thigh are the best candidates; if you are generally obese, this procedure is not appropriate for you
- You are physically healthy. You must be in relatively good physical shape to tolerate this procedure
- You have a positive attitude and realistic expectations

Please note, that thigh lift is not intended strictly for the removal of excess fat. Liposuction alone can remove excess fat deposits where skin has good elasticity and is able to naturally conform to new body contours. In cases where skin elasticity is poor, a combination of liposuction and arm lift techniques may be recommended.

It is very important to understand that in thigh lift, the quality of the scar is very important as a measure of the outcome. Despite the possibility of problematic scars, the overwhelming majority of patients scar well and are extremely happy with the changes that have been achieved.

Are there any reasons for a patient to not have a thigh lift?

Patients who are actively smoking or on blood thinning medication such as aspirin and warfarin are at a high risk of complications such as bleeding or wound infections and delayed wound healing. It is advisable to not consume nicotine in any form for six weeks before thigh lift and a similar time after. Medication such as aspirin or warfarin may need to be stopped (if this is not for an essential or life-

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threatening condition) at the appropriate time before surgery. This should be discussed with Dr Mackenzie or GP.

What are the limitations of a thigh lift?

- Thigh lift surgery does not treat the lower leg
- A scar along the inner side of the thigh is necessary to perform thigh lift surgery. This may need to run into knee on occasion to gain the optimal result. Milder cases may be suitable for short scar thigh lift or in select cases liposuction alone. If this scar is an issue for you, then you should not have thigh lift surgery
- Significant changes in weight can affect the long term results of thigh lift surgery. Therefore, if you are considering thigh lift surgery after weight loss, it is best to be at a stable weight with no further changes in weight planned before undergoing the surgery

What to expect from a thigh lift consultation?

You would normally meet Dr Mackenzie for at least two pre-operative consultations. The first of which is mainly about assessment and the formulation of an operative plan specific to your thighs. Dr Mackenzie usually summarises this consultation in a letter to you and if you decide to move forward towards surgery, a second consultation is scheduled to go over things once more and discuss the possible complications in more detail. It is usual for Dr Mackenzie to write to your GP but often patients do not want this, in which case no communication is made.

During your thigh lift consultation Dr Mackenzie will discuss:

- Your surgical goals
- What outcome do you expect from the surgery? What is your chief motivation in undergoing thigh lift?
- Your complete medical history, drug allergies
- Your previous surgery
- Your current prescription medications, including vitamins, herbal supplements, alcohol, tobacco and drug use. Make sure to tell your doctor about any herbal supplements you take, as some of them may cause bleeding problems

Dr Mackenzie will also:

- Evaluate your general health status and any risk factors
- Discuss your options
- Ask you to look in a mirror and point out exactly what you would like to see improved
- Examine your thighs including measurements

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- Evaluate elasticity of the skin
- Discuss the scarring and make sure you understand the amount of scarring to be expected
- Take the photographs
- Discuss your ideal weight, realistic weight and current weight and possibly suggest a weight loss program before surgery
- Discuss your expectations with you. An honest discussion will help determine a satisfactory outcome
- Recommend a course of treatment
- Discuss likely outcomes of thigh lift and any potential complications
- Blood tests, a heart trace (ECG) and a chest X-ray may need to be organised

At your initial consultation, Dr Mackenzie will recommend the exact nature of your proposed treatment, including procedure details, recovery times and any possible side-effects. You should then have a cooling-off period before booking surgery and meeting Dr Mackenzie again for a second consultation. At that second consultation, she will go over the risks and complications in more detail with you. There will also be some more specific points to discuss about the practicalities of the procedure, which are summarised below.

Preparation for surgery

It is important to avoid taking any aspirin or products containing aspirin for 2 weeks either side of the operation since aspirin has an adverse effect on bruising as it thins the blood. The same is true for non-steroidal anti-inflammatory drugs (such as Brufen, Nurofen and Voltaren and vitamin E tablets. You may also be asked to stop taking naturopathic substances such as garlic, ginko, ginseng and St John's Wort as they may affect clotting and anaesthesia. Always tell your surgeon EVERYTHING you are taking.

For procedures lasting longer than 1 hour it is normal practice to stop the contraceptive pill one cycle before the date of surgery. For smaller procedures may not be necessary and you should discuss this with Dr Mackenzie before surgery.

Some patients find homeopathic remedies such as arnica helpful to reduce bruising although it is very difficult to prove their efficacy scientifically. If you wish to use arnica you should begin 2-3 days before the operation and continue for a week afterward.

If you are a smoker it is absolutely imperative that you to stop for 6 weeks before surgery and for 6 weeks afterwards so as not to restrict the circulation to the skin. This restriction applies to all forms of nicotine including patches, inhalers and nicotine chewing gum!

For the best results of thigh lift, it is optimal if you have a body mass index (BMI) as close to normal (25) as possible.

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Surgery requiring general anaesthesia is most safely conducted when patients are fit and healthy. General anaesthetic is unwise in patients who are unwell with viral illness or colds.

On the night before surgery we would ask that you eat well, and remain well hydrated. In most cases you will be asked to come to the hospital at 7:00am on the morning of surgery, having had nothing to eat from midnight. Clear water can be drunk up to 2 hours before surgery and tea without milk or coffee without milk can also be taken. Milk is considered to be solid food and cannot be taken within 6 hours of the start of surgery.

On the morning of surgery, you will be admitted to the ward. You will meet the anaesthetist who will discuss the anaesthetic with you in detail and you will also see Dr Mackenzie who will mark the surgical site as required and complete the consent form for surgery with you.

While making preparations, be sure to arrange for someone to drive you home after your surgery and to help you out for a few days at home.

What is involved in the operation?

Thigh lift is carried out under general anaesthesia. It requires one night stay in hospital after surgery.

Dr Mackenzie will create markings on your thighs. The location, length and direction of these incision markings will be dictated by the type of thigh lift you will undergo. Incision length and pattern during thigh lift surgery depend on the amount and location of excess skin to be removed. Incisions are generally placed at the groin crease, a longitudinal incision along the inside part of the upper thigh, or a combination of both may be required. Excess fat may be directly excised or treated with liposuction.

If Dr Mackenzie feels that you have very good quality of skin and the problem is relatively too much fatty tissue present only, then liposuction alone may be useful. This is usually carried out under general anaesthetic and involves one or two tiny incisions. Please refer to the liposuction information sheet.

If there is also skin excess in the inner thighs, then some form of excision surgery is required. Normally, this can involve a transverse incision in the groin crease, a longitudinal incision along the inside part of the upper thigh, or a combination of both. An incision is made in the groin crease or the groin crease and inner thigh, the upper part of the skin is undermined and the excess skin is trimmed. Suspension sutures are then used to attach the skin to the groin area and the wounds are closed either with or without drains. The length of the longitudinal incision can vary depending of the exact contour that needs to be corrected, but it can extend as far down as the knee. Dr Mackenzie would do her best to minimise the appearance of the scar by locating the incision in naturally occurring folds of skin wherever possible. This excision is usually only as deep as the protective layer of the muscles, which is not then damaged.

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After the incisions have been made, Dr Mackenzie will remove the excess skin and fat and bring the incisions together to provide a firmer and smoother thigh contour. Dr Mackenzie will close the incisions carefully to minimize scarring. Your sutures may be placed beneath the skin, where they will be gradually absorbed by your body.

If excisional surgery is used then there is almost always a need for a small amount of liposuction at the edge to blend in the change.

Surgical drains are sometimes used to drain any excess fluid. If drains are used, they will normally come out the day after the operation. If a large amount of fluid is drained however, then the drains may stay for several days until this amount has reduced to an acceptable level.

Surgical dressings are applied and compression garments are placed on the area which will need to be worn for several weeks following surgery to retain the shape and reduce swelling.

Where will the scars be?

Thigh lift scars vary depending on the amount of excess tissue you have and the elasticity of your skin. Scars usually fade and soften over a period of one year, however they will never disappear. They can become raised and itchy after surgery. Despite the possibility of problematic scars, the overwhelming majority of patients scar well and are extremely happy with the changes that have been achieved.

Liposuction

Liposuction incisions are small; therefore, the scars are also small. Most liposuction scars fade and are barely visible over time.

Standard thigh lift

Scar will most likely be limited to the groin area. It begins in the groin area, runs across the inside of the thigh and then under the crease of the buttock.

Extended thigh lift

In cases where there is a significant excess skin on the inner aspect of the thigh, in addition to the groin scar, longitudinal scar can extend as far down as the knee along the inner thigh.

What can you expect after a thigh lift?

It is vitally important that you follow all postoperative instructions provided by Dr Mackenzie. Dr Mackenzie will also provide detailed instructions about the normal symptoms you will experience and

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any potential signs of complications. It is important to realize that the amount of time it takes for recovery varies greatly among individuals.

You may expect the following immediately after the procedure:

- Immediately following thigh lift, the skin of your thighs will feel very tight
- After this kind of surgery, it is especially important to take proper care of your wound to reduce the possibility of infection. Although oral antibiotics will be prescribed, you will need to use an antiseptic wash on the wound area whenever you use the toilet. Once the area has been washed, a light dressing should be reapplied to the area and held in place by a compression garment
- You should expect to light to moderate bruising. This is quite normal and usually begins to settle in 3 to 4 weeks. It should be completely gone in about six weeks. Taking Arnica for a week before your surgery and two weeks afterwards can lessen bruising
- The pull of gravity and the actions of walking, sitting, and bending put stress on the sutured areas, so you should make careful and deliberate movements
- Thigh swelling may take three to five weeks to subside
- You can shower in seven days, but in the early stages you should try to keep the dressings dry
- If drainage tubes are placed, they are usually removed after 24 hours and the dressings from the surgery are usually left in place until the first visit to the practice one week following your operation. You must keep them dry
- Mild to moderate discomfort is common and can usually be controlled by taking pain killing tablets such as Paracetamol as required. Stronger painkillers are also prescribed and given on discharge, but they are often necessary only before you go to sleep at night. Aspirin and certain anti-inflammatory medications must be avoided because it can promote bleeding
- You may be wearing an elastic compression garment to reduce swelling and provide support to the skin as it tightens. You will wear this garment for 6 weeks day and night

Recovery from thigh lift occurs over a period of few weeks or more. After several months, you can start evaluating the aesthetic outcome of your surgery. It is important to remember that the time it takes to recover varies greatly among individuals.

- To prevent coughing and bleeding, do not smoke after your procedure. Do not drink alcohol for five days after surgery or while you are taking pain medication
- Occasionally, fluid will continue to collect under the skin (a process called seroma formation). If this occurs the fluid may need to be drained with a needle
- Dissolving stitches are used and therefore their removal is not necessary
- You may resume driving and walking for exercise after the first two to three weeks, when these activities do not cause pain
- Avoid heavy lifting and jogging for six to eight weeks
- Plan to take about two weeks off from work, depending on the physical demands of your job

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- It is advisable to have help around the house and with young children for the first couple of weeks after surgery
- At the end of 6-8 weeks patients are expected to be able to return to normal lifestyle including gym, sport and aerobics
- Most people are able to return to work which does not involve heavy lifting in approximately one to two weeks after surgery
- Like all surgeries, thigh lift carries some risk, however they are small and infrequent. To prevent blood clotting problems, you will wear anti-embolism (TED) stockings before, during and after your surgery for 6 weeks and will be encouraged to get up and move about as soon as possible
- Scars from thigh lift usually take many months, or even a year to settle. In the period immediately following your surgery, these scars may be firm, red, raised, lumpy and itchy due to a build-up of excess scar tissue. As your skin strength returns and the scars mature, they will become softer, flatter and more natural in colour and texture. This process usually takes about 18 months and can be helped by daily massage with moisturizing cream
- Call your surgeon immediately if you notice an increase in swelling, pain, redness, drainage, or bleeding in the surgical area, or if you develop fever, dizziness, nausea, or vomiting. Other red flags include shortness of breath, chest pains, and an unusual heartbeat

It's important that the surgical incisions are not subjected to excessive force, swelling, abrasion or motion during the time of healing.

How long does the effect of a thigh lift last?

The results of thigh lift surgery will be long-lasting, provided that you maintain a stable weight and general fitness. Thigh lift will not prevent the effects of aging. It is natural to lose some firmness, but most of your improvement should be relatively permanent.

If you gain considerable weight after the surgery and then lose the weight, loose skin will return.

In either scenario, subsequent arm laxity will be far less significant than before your surgery.

What are the complications of a thigh lift?

In general, thigh lift is safe and the results are entirely predictable, with an associated high- degree of patient satisfaction. Nevertheless, no surgery is without risk.

All general anaesthetics carry risks such as deep vein thrombosis and chest infection but with modern anaesthetic techniques, these are minimised.

Early complications

- Bleeding which can lead to a collection of blood (a haematoma) that needs to be drained in theatre. This is likely to be a concern in the first few days after surgery

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- Infection- you are given a dose of antibiotics at the beginning of the operation. Further antibiotics are not routinely given, because this leads to antibiotic resistance. The signs of infection are increased redness, discharge from the wound, fevers or feeling unwell. If your wound gets infected, more antibiotics will be required, and sometimes admission to hospital or an operation may be needed to resolve it
- Pain- usually not severe and you can manage it by oral pain relief
- Seroma (fluid collection within the wound after the drains have been removed)- because surgery can interrupt the lymphatic vessels (channels that return tissue fluid back to the circulation) of the thigh, this clear fluid can collect in small pockets underneath the scar. It may need to be drained using a little needle
- Swelling and bruising of thighs which lasts for a period of a few weeks
- Damage to deeper structures such as nerves, blood vessels and muscles
- Restrictive movement to the tightened skin
- Fat necrosis-fat has a poor blood supply may result in a discharge from the surgical wounds or palpable lumps

Late complications

- Numbness- problems with skin sensation below the scars -This usually takes twelve to eighteen months to fully settle. Rarely there may be a permanent patch of sensation loss
- Visible and prominent scars such as keloids and hypertrophic scars. These scars are raised, red and thickened, and may form over healed incisions. They may be itchy, annoying and unsightly but are not a threat to health. These scars may restrict the clothing you can wear
- Contour irregularities and asymmetry. Inadequate tissue removal, an uneven contour or differences between each thigh. A perfect result will never occur and one can always find shortcomings with any cosmetic surgery operation
- Swollen legs – because of the liposuction and the interrupted lymphatic channels, the legs below the surgery may swell somewhat in the post-operative period. Compression stockings, massage and elevating the legs at night can help reduce this
- Distortion of the genitalia's contour and appearance, especially in women
- Sutures may not absorb, but spontaneously surface through the skin, causing irritation, drainage and redness
- Occasionally, there is a need to undertake adjustment or revision surgery at a later date to correct an uneven result or an uneven scar. If needed, this can usually be performed under local anaesthetic as an outpatient procedure.
- Bulge at the knee just below the operated area resulting in a visible "cut-off" point between the reshaped thigh and the unoperated lower leg
- Lymphoedema where fluid drainage channels in the leg are disrupted by the surgery and therefore the leg tends to swell to a varying degree

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Sometimes after undergoing thigh lift surgery, patients are disappointed with the result. This may be due to one of the problems described above occurring or due to unrealistic expectations of the surgery e.g. mild asymmetries, visible scarring or less than expected definition of the thigh area. It is important that you discuss your expectations in advance of the surgery so that you can understand what to expect from the surgery and so this situation is avoided as much as possible. Additional costs may be incurred for further procedures.