

## Arm Lift - 'Brachioplasty'

Excess skin can gather on the upper arms and this is a combination of ageing which increases skin laxity and weight loss after being overweight. Women are most usually affected by this problem and may be self-conscious about their appearance in armless tops and dresses or in swimwear. It may also be difficult to fit into the arms of blouses or jackets.

### What is an Arm Lift?

Arm Lift reshapes the upper arms by selectively removing the excess skin and restoring a slimmer contour to the upper arm. The skin is carefully assessed and measured prior to the surgery in order to achieve this. Liposuction is often used to facilitate the operation. Most usually, a longitudinal section of skin is removed from the underside of the upper arm. Sometimes this may be extended past the elbow to the forearm or past the arm-pit onto the side of the chest. Transversely oriented scars at or near the arm-pit can also be used. Liposuction is typically used to facilitate the operation.

### Do I need to lose weight before having Arm Lift?

Arm lift is best for patients with 'redundant' or saggy skin and typically these will be people who have been heavy and then lost weight but been left with loose skin. If the skin on your arms is quite 'tight' and 'well-filled' with fat then Arm-lift is not likely to be appropriate.

### Does the surgery require a general anaesthetic or hospitalisation?

Arm lift surgery is done under general anaesthetic, as a day case or a one-night-stay procedure.

### How long is the procedure?

Standard arm-lift normally takes approximately 2.5 hours to complete and the operation time is largely dependent on the length of the scars.

### How long is the recovery time?

Moderate pain / discomfort is expected for 3 – 5 days. Patients can go back to their normal daily activities after 2 weeks, but avoid strenuous exercise / activity for 6 weeks. The arm will feel slightly tight after surgery. It will be helpful and comforting to wear a tubigrip or other support garment for the first 6 weeks, day and night. There will be bruising and swelling and some tightness which will mostly resolve within 6 weeks but it will take at least 3 months to completely subside.

### What appointments will I have after operation?

Usually you will have a nurse appointment scheduled approximately 1 week after operation and appointments with Mr Harley approximately 2 weeks, 3 months and 1 year post op. If you have any queries or difficulties you can be seen at other times by hospital duty staff and/or Mr Harley. There are no additional charges for clinic calls or visits during the first year after operation.

You should contact the hospital directly if you have an emergency or urgent problem as there are duty doctors and nurses available at all times. If it is less urgent, please contact Mr Harley's office.

### **What will it look like in the end?**

It is impossible to simulate or exactly predict the final outcome. You should notice a pleasing and dramatic change in the contour of the arms. The objective is to remove excess skin, tighten the remaining skin as much as it is safe to do. Over-resection can lead to a surgical wound which is impossible to close or which fails subsequently - so there is a balance to be struck during the operation in terms of removing a satisfactory amount of tissue whilst completing a safe and secure wound closure.

Due to surgical swelling which lasts approx 3 months the skin of the arm will feel quite firm and it will loosen slightly as the swelling subsides. Ultimately the texture of the skin is determined by the quality of your collagen and the operation does nothing to alter this. The contour of your arm will be improved but the 'tightness' of the skin is typically less than patient's anticipate.

Most patients are not symmetrical before surgery and it is usual for some of asymmetry to persist afterwards. It is important to have realistic expectations - it will not be possible to achieve 'perfection' but Arm-lift aims to improve your body shape. Your profile will certainly be improved for the wearing of clothing but, when you are bare, there will be signs that you have had surgery in the past especially due to surgical scars, possible surface irregularities and some asymmetry.

### **What about the scars following Arm Lift?**

Unfortunately, it is necessary to have a scar as a result of arm lift, but every effort is made to minimise the scars and ensure that these are as inconspicuous as possible. The goal is to achieve a scar which is as short as possible and which, once fully healed is barely visible. The scar is placed at the back of the arm and slightly towards the body. The extent of the scar is determined by the amount of excess skin to be removed but is most of the length of the upper arm. The scar will mature and fade, in the months that follow surgery; sometimes it can take nearly 2 years for a scar to fully mature. It is often possible to see some or all of the scar from behind. Occasionally scars

can become very widened or overgrown (scar stretch or scar hypertrophy)

### **Will any further treatment be necessary?**

There is always some unpredictability with the final results because of variation in skin elasticity and fat thickness and texture. It is possible for scars to cause tightness in the arm or across the arm-pit if wound healing or scar maturation are unfavourable. There could be some folds, wrinkles, irregularities or asymmetry. These may be amenable to further operation and approximately 5% of patients will require a further procedure to 'touch up' the results. This is an extra potential cost that you should be prepared for.

### **What are the limitations of Arm-Lift?**

- Meeting expectations - it is important to have reasonable expectations about what can be achieved. Because it is impossible to exactly simulate or predict the final appearance of the arms, some patients may be disappointed with the outcome despite a technically sound and appropriate operation.
- Scars - The appearance and position of scars is not entirely predictable.
- Dog-ears - a secondary fold can develop at the ends of the scar and this is known as a 'dog-ear'. Every effort is made to avoid this but it may not always be possible. A further, usually local anaesthetic, procedure may occasionally be required to improve dog-ears - the cost for this is not covered by your surgical fee.
- Numb skin - the skin is usually quite numb after operation. Sensitivity usually returns during 1-2 years although this rarely returns to normal.
- Skin 'tightness' is never as much as patients expect because it can be dangerous to overtighten the arm when cutting away and stitching skin and also because the skin and collagen tend to relax and stretch a bit in the months that follow surgery.

### **What are the risks of Arm lift?**

It is impossible to eradicate all the risks associated with surgery. However Arm-Lift is considered to be a safe, routine procedure if performed by a fully qualified and trained Plastic Surgeon in Hospitals with a high standard of care. The overwhelming majority of patients have a straightforward recovery and are pleased with the results in the short and the longer term.

### **Risks include:**

#### **Dangerous or urgent (but rare) - requiring additional urgent treatment:**

Life threatening or life changing complications from surgery (stroke, pneumonia, heart failure, severe allergy, severe infection, hypoxia)

Dangerous blood clots ('DVT', 'PE')

Fat embolism

Penetration of organ or structure

Bleeding (approx 1%)

Deep Infection (approx 1%)

#### **May affect cosmetic result - may develop in longer term - may lead to further investigations or treatment.**

Irregularities of skin / tissue / scar

Folds or loose skin

Skin necrosis or discoloration

Asymmetry (often pre-existent)

Seroma (collection of fluid)

Development or worsening of psychological / psychiatric problems associated with body image

Failure to meet expectations

Wound failure

Long term pain - neuroma - numbness due to cutaneous nerve section

### **Other problems - usually temporary**

Swelling, bruising, pain

Numb or hypersensitive skin

Tethering/puckering

Scar healing abnormality: 'hypertrophy'; 'keloid'

Minor wound infection or stitch problem (quite common - 10-20%)

Allergy to dressings / antiseptics / stitches

### **Smoking and Vaping**

These may add some risk to all operations because they make general anaesthetic less safe, and they reduce the body's ability to combat infection and heal wounds. You are strongly advised to cease smoking for at least one month before and a further month after operation.

## Travel and other commitments before and after surgery?

Surgery and Long-haul air travel each carry some risk for blood clots ('DVT' or 'PE') so it is inadvisable to travel long-haul for 6 weeks each side of your operation.

You usually are required to attend the hospital 2-3 weeks before operation for pre-op health checks and tests so you should check on the likely dates for these if you are planning to be away immediately prior to your intended operation date.

Whilst this is routine surgery, problems can occur and these could be disruptive if further hospital visits or treatment become necessary. Travel plans, work and other important commitments (e.g. weddings) could be disrupted with loss or expense incurred if you develop a problem (e.g. infection, wound failure, excessive pain or swelling) in the weeks that follow surgery or if a problem were to emerge or whilst you are abroad.

The longer you can leave between surgery and travel / commitments the better. If you reach 6 weeks post-op without problem, it is most unlikely that you would run into difficulties but tissues and scars will still be softening and maturing at this stage. For very important commitments, it is preferable to plan for several months gap after operation.

No responsibility can be accepted for expenses or losses relating to missed employment, transactions or events, curtailed travel or holiday plans, travel to receive medical care, care received at other hospitals in UK or overseas.

Swimming is not advised until scabs and crusts have separated (usually by 3 weeks).