

Upper arm reduction

Who is suitable for upper arm reduction?

Upper arm reduction (brachioplasty) is most commonly performed after a significant weight loss. The weight loss may have occurred through dieting or after gastric banding or bypass surgery. As a consequence of the weight loss there may be large amounts of loose, sagging skin hanging from the arms that many patients feel is unattractive. The excess skin can also interfere with wearing certain clothes and can cause difficulty with exercise. Some patients experience infections and chaffing. This excess skin cannot be reduced by any means other than surgery.

Brachioplasty is also performed in individuals who have always had a tendency towards larger, fuller arms or in those who have developed loose skin due to ageing. Whatever the reason, most of these concerns can be addressed with brachioplasty.

Patients who have undergone weight loss may also be concerned about excessive loose skin in other areas such as the thighs, buttocks, breasts and abdomen. These areas may be reshaped using other procedures such as abdominoplasty or breast lift/ reduction.

How is brachioplasty performed?

There are three different approaches. The first involves liposuction alone which has the advantage of leaving minimal scars and can be very helpful when there is not too much slack skin. Its obvious limitation is that it will not remove skin excess although it can produce some skin contraction.

The second option involves liposuction combined with a transverse scar in the armpit which will move upper arm skin in an upward direction. This will have more effect than liposuction alone in tightening skin but again, the effect is not dramatic. When skin excess is marked, whether or not combined with fatty excess, then a procedure which leaves a vertical scar running from the armpit to the elbow is most appropriate. The scar is designed so that when the arm is against the side of the body it should not be visible but it is, nevertheless, an obvious and significant disadvantage of the operation. Excess surface skin is removed but the layers beneath are buried so as to give a firm contour to the arm and avoid unnatural depressions.

Dr Boorer performs brachioplasty in hospital under light general anaesthesia. The procedure takes 1-2 hours. Most patients stay in hospital overnight.

The recovery period

Dr Boorer will see you regularly after your procedure and is happy to be contacted between visits if you have any concerns. Each person differs slightly in their recovery. You will be given advice specific to your circumstances. Below is a general guide:

Pain and discomfort:

Usually lasts between 3-7 days. Most of the discomfort should have subsided within two weeks.

Bruising and swelling:

The majority of bruising and swelling subsides within three weeks.

Dressings:

The incisions will be covered with a shower proof dressing immediately following the procedure. These will be removed at the first postoperative visit. You will also be provided with a firm support garment to wear over your arms for 4-6 weeks. This garment is used to minimise swelling and promote healing and contouring.

Time off work:

The length of time off work depends on the extent of the procedure. Dr Boorer generally recommends you take off between one and two weeks for a desk job, and up to four weeks for more strenuous physical work.

Driving:

In order to be able to drive you must be comfortable. You will be required to have ceased all strong pain killers and you should be moving freely. Most people are able to drive within one week after the procedure.

Sports:

Dr Boorer recommends gentle walking only in the first week following the procedure. You may progress to strenuous walking and light gym work after 3-4 weeks, and after six weeks most people have no restrictions upon their exercise regimen.

Follow-up:

There are three scheduled follow-up appointments; at one week, one month and six months after your procedure.

Final result:

The final result of surgery should be evident 3-6 months after the procedure. The scars continue to improve for a further 12 months.

Is there a risk of unexpected outcomes?

The large majority of patients who have brachioplasty performed by an experienced and well trained surgeon do not run into any unexpected outcomes. However, there is a risk of complications with all procedures.

Dr Boorer always takes the utmost care, and will use the most up to date techniques and preventative measures to minimise complications associated with your procedure. During your initial consultation/s Dr Boorer will explain in detail the complications associated with brachioplasty.

Following brachioplasty most people experience some pain, bruising, swelling, minor bleeding, temporary numbness of the skin and temporary firmness of the area. Uncommon complications include infection, anaesthetic complications, poor scarring, large fluid collections, permanent numbness and delayed wound healing. Some of these complications may require minor revisional surgery.