

WHAT IS A THIGH LIFT?

Cosmetic thigh reduction (thigh lift) is performed to tighten sagging and excess skin from the thighs. The aim of a thigh lift is to restore a more youthful and appealing body contour.

Thigh lift is particularly beneficial to individuals with large amounts of loose, hanging skin on the inner and outer thighs that may result from ageing or major weight loss.

A thigh lift procedure may involve an incision made in the groin area (horizontal incision). In addition a vertical incision extending along the inner thigh from the groin to the inner knee may be required to decrease the circumference of your thigh. This is often combined with liposuction to improve the contour of your thighs.

Some thigh lift candidates may be interested in incorporating other body contouring procedures to be performed at the same time. Abdominoplasty ('tummy tuck') is often a procedure that is combined with thigh lift.



ALTERNATIVE OPTIONS TO THIGH LIFT

Liposuction is useful for localised deposits of fat in people with a healthy and stable weight. Liposuction will not reduce excess skin, improve cellulite or excessive stretch marks. A thigh lift may be a more suitable alternative in patients where loose skin is less likely to contract following liposuction.

POST-OPERATIVE COURSE

The expected hospital stay will be 2-3 days depending on your comfort level. You may have drain tubes in place and these will be removed when drainage has decreased to an acceptable level prior to discharge. You may have a compression garment over your thighs to help with swelling.

Slow healing of any wound site deep in the groin can occur following thigh lift surgery and patients are naturally alarmed if this occurs. This area will usually heal with simple dressings over approximately 2 weeks.

Pain post-operatively will depend on the extent of the procedure and you will be provided with pain relief to manage any discomfort. Pain will improve significantly with time.

There will be swelling and bruising for up to several weeks post-operatively. You will be required to wear compression over the operation site for around 4-6 weeks. At WPRS we recommend the use of tight bicycle pants as a compression garment. Your final result will take approximately 3 months to achieve.

Whilst early mobilisation is important following thigh lift you will be required to rest from strenuous activities for 2 weeks. You should not drive a car during this time and avoid activities that stretch your wounds. After this period you may increase your activity level. However it will be 6 weeks before you can undertake heavy exercise or lift heavy objects.

POTENTIAL RISKS OF SURGERY

Bleeding: Bleeding after surgery is usually minor. In rare cases patients may bleed enough to require a return to theatre to stop any bleeding.

Infection: Uncommon. However if infection occurs you may be required to commence antibiotics.

Wound separation: Uncommon. However small areas may break down and require dressing or revision surgery.

Scar widening/hypertrophy: Your wound will be carefully closed. However some people may develop widened or elevated scars. WPRS monitor for this and provide information to avoid this potential complication.

Uneven scar: Every effort will be made to ensure that you obtain an even scar, however small irregularities may occur.

Contour deformity: Although we aim to obtain a perfect shape to match your body small irregularities may occur.

Numbness: This improves over time, however a small area may remain numb permanently

Fat necrosis (dead fat): May occur in small areas. This may cause hard lumps which may be palpable. These often resolve with time.

Asymmetry: Whilst every effort is made to ensure that you have symmetry post operatively there may be small differences.

Fluid collection: In rare cases fluid may collect under the skin. If this occurs it will need to be drained.

Labial distortion: Can result from incorrect suturing of the horizontal wound. Every precaution is taken to avoid this complication.

Anaesthetic complications: Sore throat, nausea/vomiting, other rare complications (i.e. allergic reaction to anaesthetic) can be discussed with your anaesthetist.

Deep venous thrombosis (DVT)/pulmonary embolism (PE): Risk of a DVT is 1 in 100 with procedures such as thigh lift. These rarely can be fatal if they become a PE. Special precautions are taken in hospital to avoid this. These include: calf compression devices, anticoagulant injections and early mobilisation.

Whilst we aim to achieve the best result from your surgery, there can be no guarantee of perfection. We pride ourselves in offering you the best possible experience.

If there are any questions or concerns, we encourage you to contact WPRS to discuss these either with your surgeon or the dedicated team at WPRS.

I
have read and understand the procedure and potential risks. I have no further questions regarding my surgery.

I consent to WPRS using my images for presentations and educational purposes.

Yes No

Signed:.....