

Atraumatic Handling of Umbilicus in Abdominoplasty

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Citation

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Abstract

A technique is described where the circumscribed umbilicus can be freely grasped with a tissue holding forceps, yet ensuring a non traumatized and neatly incised margins to ensure healing with minimum inflammation.

Dear Sir

Circumscribing umbilicus during abdominoplasty can sometimes be tricky. If umbilicus is not handled delicately, forceps can easily traumatize it. A technique is described where the circumscribed umbilicus can be freely grasped with a tissue holding forceps, yet ensuring a non traumatized and neatly incised margins to ensure healing with minimum inflammation.

The umbilicus is stretched inside out with a pair of skin hooks and two concentric circular incisions are made. The inner incision only 'scores' the skin while the umbilicus is circumscribed on its stalk with the outer incision (Fig. 1). For further dissection the umbilicus is handled in the region between the two incisions (Fig. 1). This ring of tissue is excised just before final reciting of the neo-umbilicus (Fig. 2). This leaves a non-traumatized and cleanly incised stalk (Fig. 3). It also helps to reduce the length of the stalk effectively while preserving the neatly excised margins ensuring proper healing with less inflammation and possibly less scarring or constricture formation.

Figure 1

Figure 1: The umbilicus is circumscribed on the outer incision and the rim tissue is used to grasp it while defatting it.



Figure 2

Figure 2: The rim of tissue is excised before reciting.



Figure 3

Figure 3: At reciting, the umbilicus has neat and clean cut margins for good healing.



Yours sincerely

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References

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