

PATIENT INFORMATION

Mummy makeover

Combined breast and tummy surgery
Tailored to you

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The Ü Clinic
Sevenoaks & Oxted

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Contents

This booklet explains a mummy makeover, from deciding whether it is right for you to your recovery.

01	Why you have this booklet	3
02	What a mummy makeover is	3
03	Is it right for you?	4
04	Other options	5
05	What you can expect from the result	5
06	Getting ready	5
07	Anaesthetic and where it happens	6
08	The operation	6
09	Straight afterwards	6
10	Recovery	6
11	Risks and complications	7
12	Further treatment	8
13	Photographs and records	8
14	Costs and time to think it over	9
15	Your decision	9
16	Your personal information	9
17	Who to contact, and when to get help urgently	10
18	What happens next	10

01 Why you have this booklet

You've been given this booklet because you've talked to Mr Kumar about a mummy makeover, or you're about to.

It explains how the procedures are combined, and the risks and recovery. There are separate booklets about each of the individual operations, which you should read as well.

It won't answer every question, and it isn't a substitute for talking things through with Mr Kumar, so please note down anything you want to ask and bring it to your next appointment. There is space for your questions at the back.

02 What a mummy makeover is

Pregnancy and breastfeeding can leave the breasts lower and emptier, the tummy muscles stretched, and loose skin and stubborn fat around the middle. A mummy makeover combines procedures such as a breast uplift or augmentation, a tummy tuck and liposuction.

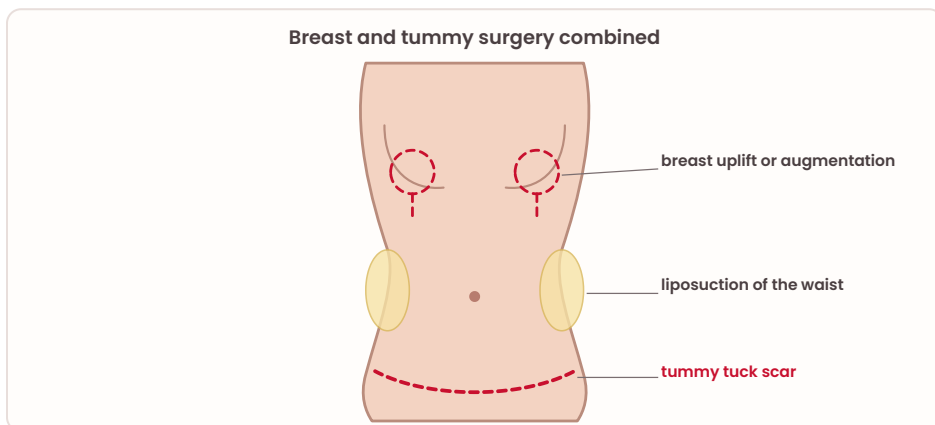


Figure 1. The procedures commonly combined in a mummy makeover. A simplified drawing for guidance only.

One operation or two?

Combining procedures means one anaesthetic and one recovery, but longer operations carry a higher risk, particularly of blood clots. Mr Kumar may recommend splitting the procedures into two stages, a few months apart.

03 Is it right for you?

You're likely to be a good candidate if:

- ✓ you have finished having children
- ✓ you finished breastfeeding at least 6 months ago
- ✓ your weight is stable
- ✓ you have help at home for the first few weeks
- ✓ you don't smoke

What the operation won't do

- It isn't a weight-loss operation.
- A future pregnancy will affect the result.

Please tell Mr Kumar if you have, or have had

- a blood clot in the leg or lung, or a family history of clotting problems
- the contraceptive pill or HRT, which raise the risk of blood clots
- a hernia, or previous surgery in the area, including a caesarean section
- plans to lose a lot of weight, or you use weight-loss injections
- previous weight-loss (bariatric) surgery
- plans for a future pregnancy
- you smoke, vape or use nicotine replacement
- high blood pressure
- a bleeding or clotting disorder, or you take blood thinners, aspirin or supplements such as fish oil, garlic, ginkgo or vitamin E
- diabetes, heart or lung disease
- a tendency to keloid or thickened scars
- body dysmorphic disorder, or hopes that surgery can't realistically meet

Please tell Mr Kumar if you have, or have had (continued)

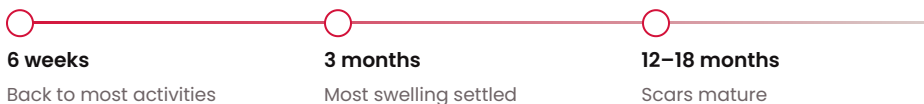
- a personal or family history of breast cancer, or any breast lump

04 Other options

You don't have to have this operation. Depending on what bothers you, the alternatives include:

- having one procedure at a time
- diet, exercise and physiotherapy
- doing nothing for now.

05 What you can expect from the result



06 Getting ready

Before your operation you'll have a pre-operative assessment, with your medical history, an examination, photographs and sometimes blood tests. You'll also be asked to:

- ✓ **stop smoking, vaping and nicotine replacement** for at least 4–6 weeks before and after surgery
- ✓ **stop aspirin, anti-inflammatory painkillers and supplements** such as fish oil, garlic, ginkgo and vitamin E, usually 1–2 weeks beforehand. Please don't stop any prescribed blood thinner without checking first.
- ✓ **follow the fasting instructions** you are given if you are having a general anaesthetic or sedation
- ✓ **arrange for someone to take you home** and stay with you for the first night
- ✓ **follow the advice you're given about the contraceptive pill or HRT.** You may be advised to stop them for a few weeks around surgery.
- ✓ **keep your weight steady**

- ✓ **have your compression garment ready**, or bring it on the day
- ✓ **avoid long-haul flights** for about 4–6 weeks after surgery
- ✓ **arrange help with childcare and lifting** for at least 2–3 weeks
- ✓ **buy a soft, non-wired bra**

07 Anaesthetic and where it happens

A mummy makeover is done under general anaesthetic, usually with a stay of one or two nights.

08 The operation

The operation usually takes 3–5 hours, depending on what is combined. Each part follows the steps described in its own booklet. You wake up in a support bra and a compression garment.

09 Straight afterwards

You will be sore, tight and tired. Walking early and often is important to prevent clots.

10 Recovery

When	What to expect
Days 1–3	Rest, with help at home. Short, frequent walks.
Weeks 1–2	Wound checks. No lifting, including children.
Weeks 2–4	Return to desk work and driving.
Week 6	Return to exercise and lifting, gradually.
3–12 months	Final shape; scars fading.

11 Risks and complications

Most people recover without any serious problems. But like any procedure it carries risks, and you should understand them before you decide. Where reliable published figures exist, we've given an approximate, rounded figure. Where they don't, we've used these standard terms:

COMMON more than 1 in 100	UNCOMMON 1 in 100 to 1 in 1,000	RARE 1 in 1,000 to 1 in 10,000	VERY RARE fewer than 1 in 10,000
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Your own risk may be higher or lower depending on your health, whether you smoke, and the details of your procedure. Mr Kumar will talk through what applies to you.

What almost everyone experiences

These aren't really complications. They're a normal part of healing.

- Swelling, bruising and tiredness.
- Numbness of the tummy and altered nipple sensation.
- Scars on the breasts and tummy.

Other complications

- **Fluid collection (seroma)** ABOUT 1 IN 10
A soft, fluid-filled swelling. It is usually drained with a needle in clinic, sometimes more than once.
- **Wound-healing problems** ABOUT 1 IN 20
Slow healing, usually in the centre of the tummy scar or where the breast scars meet.
- **Collection of blood (haematoma)** ABOUT 1 IN 50
May need a return to theatre.
- **Infection** ABOUT 1 IN 30
- **Asymmetry** UNCOMMON
- **Change in nipple sensation** COMMON
- **Noticeable or thickened scars** COMMON

Rare but serious complications

Please read this section carefully.

- **Blood clots in the leg or lung** UNCOMMON

The risk is higher with longer, combined operations. A clot in the lung can be life-threatening.

- **Loss of part of the nipple or skin** RARE

Mostly in smokers.

Complications of the anaesthetic

Modern anaesthesia is very safe. Feeling sick, a sore throat or feeling drowsy are common for a short time afterwards. Serious problems, such as a severe allergic reaction, are very rare. Your anaesthetist will meet you before the operation and explain the risks for you personally.

12 Further treatment

Occasionally a further procedure is needed to refine the result, for example if healing leaves an area uneven or a scar needs revising. This isn't usually considered until things have fully settled, often 6–12 months afterwards. The cost of any further procedure isn't automatically included in your original fee; the clinic team can explain our policy.

13 Photographs and records

Photographs are taken before and after your procedure and kept in your medical records. They help Mr Kumar plan your treatment, record how things looked beforehand and follow your progress. This is standard good practice. If we ever want to use your photographs for teaching, publication or marketing, we will ask you separately and specifically, and saying no won't affect your care in any way.

14 Costs and time to think it over

You'll receive a written quote covering your treatment, aftercare and any follow-up included in the price, together with our deposit and cancellation policy. Self-pay consultations cost £250 and follow-ups £150.

Time to think it over

We recommend waiting at least two weeks between your consultation and your operation. This follows good practice for cosmetic surgery, and gives you time to think things over and ask more questions. You can change your mind at any point before surgery, even on the day, and you don't need to give a reason.

15 Your decision

This is your decision and you have the right to:

- ✓ take as long as you need to decide, and bring someone with you to appointments
- ✓ say no to treatment, or withdraw your consent at any stage, without having to explain why and without it affecting any other care you receive
- ✓ ask for a second opinion from another surgeon.

16 Your personal information

Your personal and medical information is kept securely and used in line with UK data protection law (the UK GDPR and the Data Protection Act 2018). It's only shared with the people directly involved in your care, or where the law requires it, unless you give your consent for anything else.

17 Who to contact, and when to get help urgently

If you have any questions or worries, please contact the clinic during opening hours on **020 3026 9695** or **info@theuclinic.com**.

Call 999 or go to your nearest A&E immediately if you have

- chest pain, shortness of breath, a fast heartbeat, or coughing up blood
- severe or worsening pain in your tummy, especially with a swollen tummy, a high temperature or vomiting
- confusion, unusual drowsiness, or feeling faint or collapsing

Contact us promptly if you have

- a painful, swollen calf
- redness that is spreading, warmth, discharge from a wound, or a temperature
- swelling that is increasing quickly, is much worse on one side, or feels like a soft, fluid-filled bag
- a wound opening up, or skin that becomes dark, purple or black
- bleeding that doesn't stop with 10 minutes of firm pressure

Out of hours, your emergency contact number will be given by the treating hospital or clinic.

18 What happens next

Before your procedure, Mr Kumar will go through this information with you again and take your written consent. If anything in this booklet has raised a question, or if anything changes with your health, your weight or your medication before then, please let us know.

My questions

Note down anything you want to ask Mr Kumar and bring it to your next appointment.

Questions or worries?

Please contact the clinic during opening hours. Out of hours, your emergency contact number will be given by the treating hospital. In an emergency, call 999.

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