MR SIVA KUMAR

CONSULTANT PLASTIC SURGEON

PATIENT INFORMATION

Liposuction for men

Removing stubborn fat from the love handles, tummy, chest, chin and back

Mr Siva Kumar Veeramani
Consultant Plastic, Reconstructive and Cosmetic Surgeon
MBBS BMedSci MRCSEd MBA FRCSEd (Plast.) · GMC 6114710

The Ü Clinic
Sevenoaks & Oxted

Version 1.0
November 2026

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This booklet explains liposuction for men, what it can and can't do, how to prepare, the risks, and what to expect.

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01 Why you have this booklet

You've been given this booklet because you have talked to Mr Kumar about liposuction, or you're about to.

It explains what the operation involves, how to prepare, the risks and the recovery.

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 liposuction involves

Men tend to store fat on the flanks, tummy, chest, under the chin and across the back.

Liposuction removes fat through cuts of a few millimetres, using a fine tube called a cannula. Male fat is usually firmer and more fibrous than female fat, so power-assisted equipment is often used.

Fat you can pinch, and fat you can't

Liposuction removes the fat under the skin. It cannot remove the deep (visceral) fat behind the stomach muscles, around the organs. A firm, round belly that is hard to pinch is usually deep fat, which only weight loss and exercise can reduce.

The chest

A fuller chest may be fat, gland (gynaecomastia) or both. Gland is removed through a small cut at the edge of the areola.

Skin tightening

Where the skin is a little loose, BodyTite radiofrequency can be used through the same small cuts to help the skin contract.

03 Before you decide

You're likely to be a good candidate if:

- you are within a stable, healthy weight range
- you have stubborn areas of fat you can pinch
- your skin has reasonable elasticity
- you are in good general health
- you have realistic expectations

What the treatment won't do

- It won't remove deep fat behind the stomach muscles.
- It won't replace weight loss.
- It won't tighten a lot of loose skin.

Please tell Mr Kumar if you have, or have had

- you take blood thinners or have a bleeding disorder
- you or a close relative have had a blood clot
- you use, or have used, anabolic steroids, testosterone or bodybuilding supplements
- you take weight-loss injections
- diabetes, heart or lung problems
- previous surgery in the area, or a hernia
- allergies to medicines, plasters or latex
- you smoke or vape

04 Other options

You don't have to have surgery. The alternatives include:

- diet and exercise, which reduce both kinds of fat
- medical weight-loss treatment, through your GP or a specialist service
- doing nothing

05 Getting ready

Before your operation you'll have a pre-operative assessment. You'll also be asked to:

- ✓ stop smoking and vaping for at least 4 weeks before and after surgery
- ✓ stop aspirin, anti-inflammatory painkillers and supplements such as fish oil, garlic and vitamin E, usually 1–2 weeks beforehand. Don't stop a prescribed blood thinner without checking first.
- ✓ arrange for someone to take you home and stay with you the first night

- plan 3 to 7 days away from work
- follow the fasting instructions you are given

06 Anaesthetic and where it happens

Most liposuction for men is done under general anaesthetic. Smaller areas, such as under the chin, can be done under local anaesthetic, sometimes with sedation. Most men go home the same day.

07 The procedure

Mr Kumar marks the areas with you standing. Fluid containing local anaesthetic and adrenaline is injected to reduce bleeding and discomfort, then fat is removed through small cuts.

The operation takes one to three hours, depending on the areas treated. You put on a compression garment before you leave.

08 Recovery

- **Days 1–3:** rest. Expect bruising, swelling and some fluid leaking from the small cuts. Wear your garment day and night.
- **Week 1:** most men return to desk work after 3 to 7 days. Walk every day.
- **Weeks 2–4:** light cardio from about 2 weeks. Keep wearing your garment.
- **Weeks 4–6 onwards:** back to weights and full training, building up gradually. The final shape shows at 3 to 6 months.

09 Risks and complications

Most people recover without any serious problems. But like any treatment 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	UNCOMMON	RARE	VERY RARE
more than 1 in 100	1 in 100 to 1 in 1,000	1 in 1,000 to 1 in 10,000	fewer than 1 in 10,000

Your own risk may be higher or lower depending on your health, whether you smoke, and the details of your treatment. 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 tightness for several weeks.
- Numb skin around the scars, which usually improves over months.
- Tiredness for a few weeks, especially after longer operations.

Other complications

Most complications are minor and settle with simple treatment.

- **Lumpiness or irregular contours** COMMON
  Usually settles with time and massage. Occasionally a small touch-up is needed.
- **Numb or altered skin sensation** COMMON
  Usually improves over weeks to months.
- **Fluid under the skin (seroma)** UNCOMMON
  Usually drained with a needle in clinic.
- **Infection** UNCOMMON
  Usually treated with antibiotics.
- **Loose skin** UNCOMMON
  If the skin does not shrink back well over the treated area.
- **Asymmetry** UNCOMMON
  Small differences between sides, which can be corrected later.

Rare but serious complications

Please read this section carefully.

- **Blood clots in the leg or lung** UNCOMMON
  Deep vein thrombosis or pulmonary embolism. A clot in the lung can be life-threatening. Walking early, stockings and any injections you are given reduce the risk.
- **Injury to deeper structures** RARE
  Very rarely, the cannula can injure deeper structures such as the bowel. This is a medical emergency.

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.

10 Further treatment

A small further procedure is sometimes needed to tidy a scar, remove a "dog ear" or tighten skin that has loosened again. This isn't usually considered until things have fully settled, often 12 months afterwards. The cost of any further procedure isn't automatically included in your original fee; the clinic team can explain our policy.

11 Photographs and records

Photographs are taken before and after your treatment 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.

12 Costs and insurance

Liposuction for appearance isn't covered by the NHS or by health insurance.

If you are paying for yourself, you'll receive a written quote after your consultation, setting out what is included. Self-pay consultations cost £250 and follow-ups £150.

13 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.

14 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.

15 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.

Contact us promptly if you have

- redness that is spreading, warmth, discharge from a wound, or a temperature

- one area becoming much more swollen, tight or painful
- severe or worsening tummy pain
- bleeding that doesn't stop with 20 minutes of firm pressure
- pain, swelling or redness in your calf, or breathlessness or chest pain

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

16 What happens next

Before your treatment, 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 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.

Notes

Notes

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.

Telephone	020 3026 9695
Email	info@theuclinic.com
Sevenoaks	The Ü Clinic, 74 London Road, Sevenoaks TN13 2DN
Online	mrsivakumar.com

Mr Siva Kumar Veeramani is a Consultant Plastic, Reconstructive and Cosmetic Surgeon. GMC 6114710.