MR SIVA KUMAR

CONSULTANT PLASTIC SURGEON

PATIENT INFORMATION

Upper body lift

Bra-line back lift to remove back rolls and loose skin at the sides of the chest

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

Contents

This booklet explains the upper body lift and bra-line back lift, how to prepare, the risks, and what to expect.

01	Why you have this booklet	3
02	What an upper body lift involves	3
03	Before you decide	4
04	Other options	5
05	Getting ready	5
06	Anaesthetic and where it happens	5
07	The procedure	6
08	Recovery	6
09	Risks and complications	6
10	Further treatment	8
11	Photographs and records	9
12	Costs and insurance	9
13	Your decision	9
14	Your personal information	9
15	Who to contact, and when to get help urgently	10
16	What happens next	10

01 Why you have this booklet

You've been given this booklet because you have talked to Mr Kumar about an upper body lift, 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 an upper body lift involves

After major weight loss, loose skin often gathers in rolls across the upper back and around the sides of the chest.

A bra-line back lift removes a band of loose skin and fat across the back, with the scar placed along the line of the bra strap, so that it is usually hidden by a bra or bikini top. The skin at the sides of the chest is tightened at the same time.

Combined with breast or arm surgery

An upper body lift is often combined with a breast uplift, with or without implants, or with an arm lift when loose skin continues down the arm. This gives a smoother result but makes the operation longer.

For men

Men often have loose skin on the back and chest after weight loss. The scars are planned to suit the male chest, usually across the back and along the fold below the chest.

03 Before you decide

You're likely to be a good candidate if:

- your weight has been stable for at least 6 to 12 months
- you have rolls of loose skin on the back or sides of the chest
- you are eating well, with enough protein, iron and vitamins
- you don't smoke or vape, or are willing to stop
- you accept a scar across the back

What the treatment won't do

- It won't lift the breasts on its own.
- It won't remove fat if there is little loose skin; liposuction may suit you better.
- It won't stop future changes if your weight goes up again.

Please tell Mr Kumar if you have, or have had

- you have had bariatric surgery, and which vitamins and supplements you take
- you take weight-loss injections such as semaglutide or tirzepatide
- you take blood thinners or have a bleeding disorder
- you or a close relative have had a blood clot
- diabetes, heart or lung problems, or a weakened immune system
- previous tummy operations 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:

- liposuction, if the skin is firm and the problem is mainly fat
- well-fitted bras with wider straps and bands
- doing nothing

05 Getting ready

Before your operation you'll have a pre-operative assessment, often with blood tests to check your iron, protein and vitamin levels. You'll also be asked to:

- stop smoking, vaping and nicotine replacement for at least 6 weeks before and after surgery
- eat a balanced diet with plenty of protein, and keep taking any supplements you have been advised to take after bariatric surgery
- tell Mr Kumar and your anaesthetist if you take weight-loss injections, and follow the advice you are given; don't stop or change them without speaking to your prescriber
- 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 help at home for the first week or two, and plan 2 to 3 weeks away from work
- follow the fasting instructions you are given for your general anaesthetic

06 Anaesthetic and where it happens

An upper body lift is done under general anaesthetic in hospital. You usually stay one night, or longer if it is combined with other surgery. You'll wear

compression stockings, and may be given injections to reduce the risk of blood clots.

07 The procedure

Bring your favourite bra to your appointment before surgery. Mr Kumar marks the scar line with you wearing it, so the scar sits under the strap.

You lie on your front or side while the loose skin across the back is removed and the wound closed in layers. You are turned if breast or arm surgery is done at the same time. The operation takes about two to four hours, and you wear a compression garment afterwards.

08 Recovery

- **Week 1:** rest at home. The back feels tight, especially when reaching forward. Wear your compression garment.
- **Weeks 2–3:** wound checks. Most people return to desk work after 2 to 3 weeks. Avoid lifting your arms above shoulder height.
- **Weeks 3–6:** driving from about 3 weeks and a gradual return to normal activities. No heavy lifting.
- **6 weeks onwards:** return to exercise, starting gently with upper body work.

The scar fades over 12 to 18 months. Keeping your weight stable protects the result.

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

Complications are more common after major weight loss than after other cosmetic surgery, because the operations are larger and the skin and tissues are thinner.

- **Slow wound healing** COMMON
  Especially where the back scar meets the side of the chest. Usually heals with dressings over a few weeks.
- **Fluid under the skin (seroma)** COMMON
  Usually drained with a needle in clinic.
- **Infection** COMMON
  Usually treated with antibiotics.
- **Collection of blood (haematoma)** UNCOMMON
  Usually in the first day. It may need a return to theatre.

- **Noticeable or stretched scars** COMMON
  The scar can widen or move slightly above or below the bra line. Most improve with time.
- **Tightness across the back** COMMON
  Usually eases over a few weeks.

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.
- **Loss of skin or fat** UNCOMMON
  An area of skin or fat can lose its blood supply and need dressings or further surgery. Smoking makes this much more likely.

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

The NHS funds skin removal after weight loss only in exceptional circumstances, under strict local criteria such as a stable, healthy weight and significant medical problems. Your GP can tell you your area's policy. Health insurance doesn't usually cover it.

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
- a wound opening up, or fluid leaking from it
- one area becoming much more swollen, tight or painful
- 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.