



Post Op Instructions

Lipoedema Surgery

Please read carefully **BEFORE** your surgery + keep it handy after surgery for quick reference.

Don't forget to bring your surgical garment to hospital on the day (except arm garments).

FOLLOW THE INSTRUCTIONS GIVEN BY DR SOMIA CLOSELY - IF YOU EXPERIENCE ANY OF THE FOLLOWING, PLEASE CALL US OR AFTER HOURS CONTACT THE HOSPITAL AND ASK FOR DR SOMIA.

- Fever/chills (temperature higher than 38o)
- Heavy oozing/bleeding from the wound
- Increased swelling around the wound
- Increased pain
- Difficulty breathing or passing urine
- Spreading redness around the wound or foul odour

HOSPITAL CONTACT NUMBER

Lakeview Private Hospital — 8624 5000 or 8711 0736 (after hours)

BASIC WOUND CARE

IF THE WOUND STARTS TO BLEED, SIT DOWN + REST, APPLY GENTLE BUT FIRM PRESSURE FOR 5 MINS WITH THE PALM OF YOUR HAND. Most bleeding will stop. If bleeding continues, contact us or the hospital (seek medical attention). If the wound is itchy, use gentle pressure with the palm of your hand, under no circumstances should you rub the suture line vigorously.

MEDICATIONS

Take your prescribed medications + analgesia such as Panadol. If you feel you need stronger painkillers contact our office. Antibiotics are not always necessary except in special cases. If you have been prescribed antibiotics take them as instructed. You can recommence your regular medications soon after your surgery.

Dr Naveen Somia
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WALK, REST, HYDRATE, REPEAT: Keep moving, increase fluids. Walking speeds up drainage, reduces inflammation + aids healing. Increase activity gradually. Aim for 10 mins of slow walking every hour.

DRESSINGS: It is normal for your dressings to be soaked from the blood-tinged liposuction fluid in the following days. You can have a quick shower however you should not soak or be fully immersed in water for at least 2 weeks following surgery.

Your wounds will initially be covered by a waterproof dressing. If this dressing gets soaked + no longer keeps your wound dry/protected from water, remove it + gently pat the wound dry and cover with a fresh dressing (you can purchase any dressing you like from the chemist) and you only need to change it if it gets soaked with water or it is lifting/peeling a lot on it's own unless advised otherwise by Dr Somia or your GP. If you have long white tape on your inner thighs, you can leave this on for 2-3 weeks. All of your sutures are dissolving + will spontaneously fall out over the course of the next 2-3 weeks.

After 10 days, you can remove your dressings and use a strip of micropore tape (available at most chemists) cut to size to cover the top of the incision sites. Some people find making an X with two pieces helps secure them better. This is just to help the scars flatten whilst they are healing. You can continue this for 6 weeks and then use silicone scar gel in it's place - 'strataderm' is a good silicone gel available at most chemists.

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DRAINAGE: Most stops in 24-48 hours. You may find it helpful to carry absorbent pads.

COMPRESSION: Wear your garment 24/7 for 12 weeks unless advised otherwise by Dr Somia. The garment helps the fluid drain, minimises your risk of haematoma's, seroma's + reduces bruising. Your garment holds your skin in place while it reattaches to the underlying tissue. You can wear your garments in the shower as they dry quickly, or you can remove it for showering purposes only.

SWELLING + BRUISING: You will swell to your original size or even larger. This will peak at 3-5 days + then slowly begin to subside. You may also experience swelling + bruising in the ankles + genitals. If you feel your garment is cutting-in on your inner thigh/genital area with the crotchless garment, you can strategically place 'combine dressing' to alleviate some discomfort. Available at your local chemist. Swelling takes at least 6-12 weeks to subside and often up to a year to fully resolve.

ITCHING, NUMBNESS + TINGLING: Itching of the treated areas is normal + indicates healing. Numbness + tingling is normal + in most cases resolves in 3-6 months however can last longer. You can use regular moisturising cream over intact skin.

CONSTIPATION/MENSTRUAL CYCLES: Removal of fat cells may result in constipation, loose or fatty stools + a more intense/unexpected period

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ACTIVITIES: The only activity permitted for 6 weeks is walking. Recommence normal physical activities after 6 weeks. In doing so you should gradually ease yourself into activities. During the 6 weeks avoid heavy lifting including moderate to heavy objects, pets or children, reaching for the top shelf, reaching cabin baggage, pulling luggage off the conveyor belt.

You can **drive** again when you can safely make an emergency stop. An emergency stop is when you have to slam your breaks. Usually you can recommence after 4 weeks. Check your motor vehicle insurance policy for any restrictions.

Laying in bed you should have at least one pillow under your knees.

FLYING AFTER SURGERY: If your flight will be less than 2 hours + Dr Somia has agreed to this before your surgery, you may fly on the third day post operatively provided you are feeling well enough. If your flight is over 2 hours, please ask Dr Somia for his approval well before surgery + arrange to stay in Sydney for one week post operatively. If you live more than 3 hours from a major hospital, please arrange to stay in Sydney for 3-7 days.. You will require a carer if you plan to fly after surgery and potentially a DVT Scan prior to leaving.

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MLD + COMPRESSION PUMPING: Begin MLD (Manual Lymphatic Drainage) with your therapist at least once a week after surgery. You can commence this as soon as you feel well enough to tolerate MLD. You can use your compression pump every day post operatively at a level/setting that you can comfortably tolerate - please refer to our pump protocol in the "prepare for lipoedema surgery" document.

EMOTIONAL WELLBEING: It is important to have a good support network + an understanding support person post operatively. It is not uncommon to experience 'post op blues' after a general anaesthetic + major surgery. Patients + importantly the patients support person/carer should be aware that between days 3-6 post operatively they may experience low mood, irritability, bouts of tearfulness, + general feelings of "what have I done". There are many reasons for this phenomenon; the medications used for your general anaesthetic slowly exiting your body along with a combination of post operative pain, swelling, sleep disturbances, pain medications, fatigue + the disruption to your body in general after major surgery all attribute to post op blues. This usually resolves after the first week but can last a little longer in some patients.

If you feel your mood is not improving or it is getting worse after 7 days post operatively, please speak to your GP who can assist you appropriately.

Patient Care Team @Dr Naveen Somia

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