DR EYAS MEDANAT

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GUIDES · ADVANCED BODY LIFTING

Body Lift, Arm Lift & Thigh Lift



Body lifting removes loose skin — often after major weight loss — from the arms, thighs, abdomen, back or buttocks. The scars are longer than in other procedures, so most of your aftercare is about keeping tension off them while they heal and moving enough to keep your circulation healthy.

1 At a glance

PROCEDURE TIME	ANAESTHESIA	GOING HOME	GARMENT / DRESSING
2–4 hours	General anaesthesia	Usually 1–2 nights	Compression garment 24/7 for 6 weeks

STITCHES	BACK TO WORK	EXERCISE
Mostly dissolvable; drains (if used) out at 3–7 days	2–3 weeks	Walking from day 1; light gym at 6 weeks; full training at 8–12 weeks

2 Before your surgery

Specific to this procedure

- Stay at a stable weight for at least 3–6 months before surgery.
- Good nutrition helps long wounds heal: eat enough protein, and tell us if you have had bariatric surgery — we may check your vitamins and iron first.
- Stop all nicotine at least 4 weeks before and after.
- We may prescribe blood-thinning injections or stockings to prevent clots — we will show you how to use them.

Preparing for surgery

2–4 WEEKS BEFORE

- Stop smoking and all nicotine — cigarettes, vapes, shisha, patches and gum — at least 4 weeks before and 4 weeks after surgery. Nicotine narrows the small blood vessels that heal your wounds and is the commonest cause of wound breakdown.
- Complete the blood tests, ECG or other checks we request, and bring any recent results you already have.
- Tell us about every medicine, supplement and herbal product you take, any allergies, and any previous anaesthetic problems.
- If you take the contraceptive pill, hormone therapy, or weight-loss injections (such as Ozempic, Wegovy or Mounjaro), tell us early — some need to be paused before anaesthesia, and we will tell you exactly when.
- Arrange time off work and help at home for the first days, especially if you look after young children.

10 DAYS BEFORE

- Stop aspirin, ibuprofen and other anti-inflammatory painkillers, and supplements that thin the blood: fish oil / omega-3, vitamin E, ginkgo, garlic, ginseng and turmeric. Paracetamol is fine.

- Do not stop any prescribed blood thinner (warfarin, apixaban, clopidogrel and similar) on your own — we will plan this with you and your doctor.
- Avoid alcohol from one week before surgery.
- Let us know straight away if you develop a cold, fever, cough, cold sore or any skin infection — surgery may need to move to keep you safe.

THE DAY BEFORE

- Nothing to eat for 6 hours before your admission time. You may drink plain water until 2 hours before, unless we give you different times.
- Take your usual morning medicines with a sip of water only if we have told you to.
- Prepare your recovery space: extra pillows, loose front-opening clothes, water bottle, phone charger within reach.
- Arrange an adult to drive you home and stay with you for the first 24 hours. You must not drive or take a taxi alone after anaesthesia or sedation.

ON THE DAY

- Shower and wash your hair. Do not apply body lotion, make-up, false lashes, nail polish, fake tan, perfume or deodorant.
- Remove jewellery and piercings; leave valuables at home. Wear glasses rather than contact lenses.
- Wear loose, comfortable clothes that open at the front and flat shoes.
- Bring your ID, your list of medicines, and your compression garment if we asked you to buy one.

3 After your surgery

Your medicines

- Augmentin (antibiotic): 1 tablet twice a day, with food, for 7 days. Finish the full course even if you feel well. Tell us before surgery if you are allergic to penicillin.
- Reparil (for swelling and bruising): 2 tablets three times a day for 7–14 days, as we tell you.
- Brufen (painkiller): take it only when you need it, with food. If you cannot take anti-inflammatory painkillers — for example because of stomach ulcers, kidney problems or asthma — tell us and we will give you an alternative.
- Fusidic acid cream (antibiotic cream): apply a thin layer on the wounds twice a day, after showering, until they have healed.

First week

- Walk every 1–2 hours while awake; circle your ankles and breathe deeply each hour.
- Arm lift: keep your arms raised on pillows when resting, and do not lift your arms above shoulder height or carry anything for 3 weeks.
- Thigh lift: avoid spreading your legs wide or squatting for 3 weeks; sit carefully, and keep the groin area clean and dry.
- Lower body lift: walk slightly bent forward for the first week and sleep with pillows under your knees.

Garment and wounds

- Wear the compression garment day and night for 6 weeks, off only to shower.
- Shower from 48 hours (or when drains allow); keep tapes on and pat dry.
- Small areas of slow healing are common along long scars, especially where scars meet — we will dress them with you.
- No baths, pools or saunas for 4–6 weeks. Silicone scar treatment from 3 weeks; protect scars from sun for a year.

Daily life

- No lifting over 5 kg for 6 weeks.
- Eat protein with every meal and drink well — healing long wounds takes energy.
- Avoid constipation and straining; use the gentle laxative we give you.

4 Your recovery, week by week

Day 1–3
Tightness and soreness; drains in; walking short distances.

Week 1
Drains usually out; first wound check.

Weeks 2–3
Back to desk work; walking further each day.

Week 6
Garment off, light gym.

Months 3–12
Swelling settles; scars flatten and fade over 12–18 months.

5 Follow-up visits

- 4 days after your procedure
- 2 weeks after your procedure
- 29 days after your procedure
- 6 weeks after your procedure

Call us straight away if you notice

- A wound edge opening, with fluid or a bad smell.
- One limb becoming much more swollen or painful than the other.
- A temperature of 38 °C or higher, shivering, or feeling generally unwell.
- Bleeding that soaks through the dressing, or does not stop after 10 minutes of firm pressure.
- Swelling that is sudden, tense and painful, or clearly larger on one side than the other.
- Redness that is spreading, increasing heat, pus, or a bad smell from a wound.
- Pain that is getting worse rather than better, or not controlled by the medicine we gave you.
- Pain, swelling or redness in a calf, or new breathlessness or chest pain — call 998 first.

Chest pain, difficulty breathing, or heavy bleeding that will not stop: call 998 (ambulance) or go to the nearest emergency department, then let us know.

Questions while you recover — Message or call the clinic any time — no question is too small, and it is always better to ask early. **+971 50 108 8378** (WhatsApp) · info@eyas.doctor

This guide gives general advice. Dr. Eyas may give you instructions made just for you — at your consultation or when you go home after surgery. If his instructions are different from this guide, follow his instructions. If you are not sure, message us. Last reviewed: November 2026.