DR EYAS MEDANAT

Dr. Eyas Medanat
Unit 303, 3rd Floor, Block B, Ibn Sina Building 27, Dubai Healthcare City, Dubai, UAE
+971 50 108 8378 · info@eyas.doctor

GUIDES · SIGNATURE ABDOMINOPLASTY (TUMMY TUCK)

Tummy Tuck (Abdominoplasty)

A tummy tuck removes loose lower-abdominal skin and repairs separated abdominal muscles. It is one of the most transformative body procedures and also one where careful aftercare matters most: protecting the muscle repair, keeping circulation moving, and not stretching the scar too early.



1 At a glance

PROCEDURE TIME	ANAESTHESIA	GOING HOME	GARMENT / DRESSING
2–3 hours	General anaesthesia	Usually 1 night	Abdominal binder or 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; core training at 8–12 weeks

2 Before your surgery

Specific to this procedure

- Stopping all nicotine for 4 weeks before is essential — it is the main cause of wound breakdown after a tummy tuck.
- Reach a stable weight you can keep; future pregnancy or major weight change can affect the result.
- Set up a recliner or a stack of pillows, and a chair you can get out of without using your stomach muscles.
- We may prescribe blood-thinning injections or stockings after surgery 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 slightly bent forward at the hips for the first 7–10 days to take tension off the wound, straightening gradually as it feels comfortable.
- Rest with your back raised and a pillow under your knees, in a 'beach chair' position — including at night.
- Get up and walk every 1–2 hours while awake. Circle your ankles and breathe deeply 10 times every hour.

- To get out of bed, roll to your side and push up with your arms — do not sit straight up.
- If you have drains, empty and record them twice daily; they come out when the output is low.

The wound

- The scar runs low across your abdomen, usually hidden by underwear, with a small second scar around the belly button.
- Keep the tapes or dressings on and dry; we check and change them at your follow-up visits. You may shower from 48 hours (or when drains allow) and pat dry.
- Once the dressings are off, apply fusidic acid cream on the wound twice a day until it has healed.
- Small scabs or slow-healing spots — most often in the middle of the scar or around the belly button — are common in the first weeks. Keep them clean and dry and we will dress them with you.
- Numbness of the lower abdomen is normal and can take months to improve — avoid hot water bottles and heat pads on it.
- No baths, pools or saunas for 4–6 weeks.

Scars

- Once the wound has fully healed (usually around 3 weeks), start silicone scar tapes. Wear them day and night, taking them off only to wash, for at least 3 months.
- Scars are pink and firm at first, then soften and fade gradually over 12–18 months.
- Keep scars out of the sun for at least a year — sun makes them darker. Cover them, or use SPF 50 once they have healed.

Binder and protecting the muscle repair

- Wear the binder or garment day and night for 6 weeks, off only to shower.
- No lifting more than 5 kg for 6 weeks — including children and shopping bags.
- Avoid sit-ups, crunches, planks and twisting for at least 8–12 weeks.
- Prevent constipation: drink well, eat fibre, and use the gentle laxative we give you. Avoid straining.
- Hold a pillow against your tummy when you cough, sneeze or laugh.

4 Your recovery, week by week

Day 1–3
Most discomfort; walking bent forward; drains in.

Week 1
Drains usually out; first check.

Weeks 2–3
Standing straighter; back to desk work; driving once you can brake hard without pain.

Week 6
Binder off, light gym and swimming.

Months 3–12
Core training; swelling settles and the scar flattens and fades.

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

- The skin of the lower abdomen becoming dark, blistered or cold.
- Fluid swelling above the scar that sloshes or is growing (seroma) — we can drain it easily in the clinic.
- 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.