



Revere Esthetique
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Panniculectomy/Apronectomy (removal of abdominal excess skin fold)

(Please read this sheet together with the Tummy tuck Information Sheet)

What is the procedure? The procedure of Panniculectomy/apron removal is done for patients who have issues with excess skin on the tummy area. The skin is loose, hangs down and does not go away despite weight loss and exercise. The fold covers the genital region either partly or completely. There is constant rash, itching, discharge and discomfort. Your body weight must be stable for 6 months with no major fluctuations.

This is done for patients who have extreme weight loss, either through natural methods or after bariatric surgery.

The procedure involves removal of overhang only, as the intent is to improve FUNCTION due to issues with overhang and rash. This is different from a tummy tuck which is a COSMETIC PROCEDURE involving removal of maximum abdominal skin/relocation of belly button/tightening of muscles/contouring of skin fat with liposuction.

Tummy tuck is not covered by OHIP and is a self funded procedure.

What must you fulfill to have Panniculectomy procedure? Your health must be reasonable as this is an elective surgery. BMI must be around 30, you should stop smoking at least 2 months before the operation. All these are important for best results, safe recovery and low complications. Patients who have a large apron which covers the genitals and constant hygiene issues—may qualify for OHIP coverage. A request is sent to the MOH for prior approval on your behalf. The role of apron removal is to treat your symptoms; a tummy tuck is a cosmetic procedure.

What does not automatically qualify? The following **DO NOT AUTOMATICALLY** qualify for panniculectomy:

- Scars on the abdominal wall
- Weight loss
- Previous multiple Caesarean sections
- Previous bariatric surgery (unless the fold is covering the genitals in either the standing or sitting position)
- Psychological distress/Back pain

N.B. Each patient is individual and due consideration is given to every consultation before arriving at a mutual decision. Your primary care provider will always be informed if you agree to do so.

