

Connective tissue disease may raise post-abdominoplasty risks

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(HealthDay)—Patients with autoimmune connective tissue diseases

(CTDs) undergoing abdominoplasty have increased risk of venous thromboembolism (VTE) events and need for blood transfusions compared to those without CTDs, according to a research letter published online Nov. 1 in *JAMA Surgery*.

Gustavo A. Rubio, M.D., from the University of Miami Leonard M. Miller School of Medicine in Florida, and colleagues examined whether patients with autoimmune CTDs undergoing abdominoplasties are at increased risk of complications. Data were obtained from the Nationwide Inpatient Sample for patients who underwent abdominoplasty as a primary procedure between January 2006 and December 2011.

The researchers found that 537 (1.3 percent) of the 41,030 [patients](#) identified had autoimmune CTD, most commonly rheumatoid arthritis and [systemic lupus erythematosus](#) (58.7 and 23.1 percent, respectively). The CTD group had higher rates of medical comorbidities than the non-CTD group. The overall in-hospital complication rate was 14.9 percent postoperatively, which did not differ significantly between the groups. Compared with the non-CTD group, the CTD group had significantly higher rates of hematoma (4.5 versus 3 percent), VTE (1.9 versus 0.9 percent), and need for blood transfusion (13 versus 7.7 percent). The median length of stay was four days for the CTD group versus three for the non-CTD group. CTD status was correlated with increased risk of VTE and perioperative [blood transfusion](#) on risk-adjusted multivariate analysis (adjusted odds ratios, 2.12 and 1.75).

"Plastic surgeons should be aware of these elevated risks for appropriate patient counseling and informed consent," the authors write.

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