

## **PANNICULECTOMY Clinical Indications**

The following criteria <u>must</u> be met for completion of a panniculectomy<sup>1</sup> within an Alberta Health Services (AHS) or AHS contracted facility **following significant weight loss:** 

CRITERIA			
1a	. Following weight loss that was	OR	<b>1b.</b> Following bariatric surgery weight
	dependent of surgical intervention, <b>12</b>		loss, 12 months post-surgery + 6
months of weight stability <sup>2</sup> is required			months weight stability <sup>2</sup> is required
AND			
2. Panniculus size: hangs below and obscures the genitalia, impacting patient quality of life			
AND			
3. Minimum of 2.5 kg of tissue or 2.5% of body weight expected to be removed			
AND AT LEAST ONE OF:			
4.			
a.	. Patient has chronic and recurrent (2-3 times per year) skin infections due to panniculus,		
	as confirmed and documented by surgical specialist		
b.	b. Documentation of necrosis of the panniculus		
C.			
d.	d. Problems with (genital) hygiene as a direct effect of the panniculus size		
e.	e. Surgery is expected to restore functional impairment; impairment due to the size of the		
panniculus			

The following are not indications for abdominal panniculectomy: rash, back pain, multiple gestation, previous caesarean section, tethered abdominal scars, postural changes, rectus diastasis.

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**Development led by:** AHS Provincial Surgery Utilization & the Alberta Surgical Initiative **SME contribution:** AHS Reduction in Clinical Variation Panniculectomy Working Group

<sup>&</sup>lt;sup>1</sup> Panniculectomy is defined as the removal of the abdominal panniculus, without the involvement of the abdominal wall or expectations of a cosmetic outcome.

<sup>&</sup>lt;sup>2</sup> Weight stability defined as weight +/- 5 kg.