

Preparing for your breast reduction or mastopexy operation

This leaflet explains more about breast reduction surgery and mastopexy surgery, including the benefits, risks and any alternatives and what you can expect when you come to hospital.

If you have any further questions, please speak to a doctor or nurse caring for you.

What are breast reduction surgery and mastopexy surgery?

Breast reduction is an operation where both skin and breast tissues are removed.

A mastopexy is an operation where only skin is removed.

Why should I have breast reduction or mastopexy surgery?

These operations are offered to patients for one or more of these reasons:

- to improve the shape, firmness and appearance of one or both breasts
- to help with any physical discomfort caused by having large breasts
- to make the breast(s) smaller
- to improve the symmetry between the breasts.

What are the risks?

You will only be discharged when the medical and nursing staff think it is safe for you to return home.

The following are some risks of the surgery to look out for at home, and what to do if they happen to you.

Bleeding

If your wound bleeds apply firm pressure to the area for 15 minutes.

If the bleeding doesn't stop after 15 minutes with this pressure, continue to apply pressure and go to the nearest Emergency Department (ED or A&E).

Wound breakdown

It is common for small areas of your stitches to open up and produce fluid.

If this happens you should buy a simple dressing from a chemist and apply it, and then make an appointment either with your GP or in the Plastic Dressing Clinic (PDC) - whichever is more convenient for you in terms of time and distance.

If you go to your GP please also make an appointment in the PDC afterwards so we can keep a check on any problems.

Infection

Signs of infection are: increased pain; redness; swelling; oozing (discharge) from the wound; a raised body temperature.

Infections can normally be treated successfully with antibiotics.

Please see your GP straight away if you notice any signs of infection and also call us and ask to have your hospital appointment sooner.

If you can't get in touch with your GP, contact Keate ward or the PDC or come to the ED (A&E) – don't delay getting medical attention as an infection can become life threatening if left untreated.

Altered sensation

You may lose some feeling in your nipples and breast skin because of swelling caused by the operation.

Any numbness usually fades in the following weeks.

Occasionally it may last longer or be permanent.

Scars

These can become red and lumpy.

You will be left with a permanent scar, but most scars will settle and fade - this can take at least a year.

There is a possibility that a scar will remain raised and very noticeable.

Nipple loss

If the blood supply to the nipple is reduced, the nipple will not survive.

This is monitored closely while you are in hospital.

If this happens you may need another operation to unblock the blood supply.

If this is not possible you will lose the nipple and will have a dressing put on it until the non-healthy tissue comes away from the healthy part. Reconstruction of the nipple can be done later, but you won't have sensation there anymore.

Extra skin lumps

You may get these at the edges of your scar - they look like small pyramids of soft tissue sticking out.

You may be able to have surgery to reduce these at a later date once all the swelling has gone down – your surgeon will discuss this with you at your follow up outpatient appointment.

Asymmetry

Breasts are never symmetrical, and after surgery this can become more noticeable, as you may have unevenly positioned breasts or nipples, differences in scarring or size.

It may not be possible to solve these problems, please discuss with the surgeon at your follow-up appointment if you are worried.

Breast-feeding

Your operation may permanently affect your ability to breast-feed.

Are there any alternatives?

Breast reduction or mastopexy are not essential operations – your decision whether to have it depends on how you feel about your breasts.

It may be possible to help with any problems caused by large breasts without surgery:

- If you're overweight, losing weight can help reduce the amount of fatty tissue in your breasts.
- Visiting a professional bra-fitting service to fit a correctly-sized bra can help discomfort.
- Physiotherapy exercises can sometimes help aches and pains caused by large breasts.
- Psychological support and treatment can help with any emotional or mental health issues.

You may be advised to try different solutions first before being considered for NHS breast reduction surgery.

How can I prepare for breast reduction or mastopexy?

If you smoke you should give up before the operation and not smoke during your recovery - your GP can give you advice and support for giving up smoking.

Smoking can prevent healing and nicotine increases your chance of nipple loss.

Do not use nicotine patches before, during or just after your operation until your wounds have completely healed.

When you come in for your operation, please bring any regular medications with you and some pyjamas with a button up top, to make it easier to look at your dressings.

Try to arrange for someone to drive you home from hospital and help you at home while you recover, (for at least two weeks). You will not be able to lift or drive for four to six weeks.

Asking for your consent

It is important that you feel involved in decisions about your care. For some treatments, you will be asked to sign a consent form to say that you agree to have the treatment and understand what it involves. You can withdraw your consent at any time, even if you have said 'yes' previously. If you would like more details about our consent process, please ask for a copy of our policy.

What happens before and during breast reduction or mastopexy surgery?

Before:

You will have this operation as an inpatient at St George's Hospital even if you saw the surgeon in another hospital first.

The plastic surgery admissions office will post you all the information you need about coming in.

We try to give you two weeks' notice of your operation date.

You will be told to fast before the operation – you can't have any food or drink for a certain amount of time before it. You will be told the exact amount of time to fast either in a letter or at your pre-operative assessment if you have one.

During:

You will have a general anaesthetic which means you will be "asleep" during the operation, which will take two to four hours.

The number and size of incisions (cuts) needed is different in different people - your surgeon will discuss this with you.

Cuts are stitched and covered with a dressing - stitches are usually dissolvable and go away naturally but there may be stitches or clips that need to be removed after your surgery.

When you wake up after your operation you may have:

- A drip - a small tube attached to a needle into a vein in your hand or arm for medications and fluids to be given as needed.
- A drain - one or more small tubes to drain away any fluid or blood from your wounds.

Will I feel any pain?

After the operation your breasts will be bruised, swollen and uncomfortable.

Tell ward staff if you have any pain and they will give you painkillers.

When you go home you can take painkillers such as paracetamol or ibuprofen (as long as you are not allergic) for any pain.

What happens after breast reduction or mastopexy surgery?

After the operation:

You will go back to the ward and will usually stay in hospital for one or two days to recover. You may stay for up to five days.

You will be offered something to eat and drink as soon as you feel like it.

Your drip will be taken out after a few hours, once you are drinking enough fluid and the anaesthetic has worn off so you can get up and move around.

Drains are usually taken out after 24 to 72 hours, when the fluid reduces. If the drains need to stay in the option of going home with the drains in place may be discussed with you.

When the drains are removed a trained nurse will measure your bra size. Please then ask someone to buy you one. If there is no nurse free to measure you for a bra please go to a lingerie department to have this done as soon as possible after you leave hospital.

Before going home:

Someone must drive you home. Ask this person to bring a small cushion or pillow and place this under the seat belt to make it more comfortable.

You will need to rest for at least two weeks after your operation - ask someone to help you with childcare, shopping, cooking, laundry and cleaning.

Make sure you have contact numbers for the hospital and any tablets or medicines you need - and know how and when to take them.

What do I need to do after I go home?

Buy a well-fitting bra for support and comfort. Sports bras are best as they have wide elastic panels for extra support. Do not buy a vest-like sports bra as these flatten the breast and won't give enough support. Don't wear an underwired bra as this will rub against your stitches.

Wear the sports bra day and night for at least two weeks and carry on wearing it during the day for six weeks after your surgery - longer if you need to for comfort and support.

Only buy one bra at a time. Your breasts will be swollen after your operation and as this swelling goes down their size and shape will change. You will need to be re-measured in a lingerie department and fitted for a new bra as the swelling goes down. Don't rush to do this - you will see changes in the breast over the next three to six months, and they may carry on changing for at least a year.

Avoid any activities where you use your upper body, such as heavy lifting or sport for at least six weeks.

Don't drive for at least four weeks or until the wounds have healed and you have no pain.

Don't go back to work for at least three to four weeks, depending on the type of job you do and your recovery. You can discuss this with the surgeon, or the nursing staff caring for you.

Do take gentle exercise and keep moving around. Gentle shoulder exercises will help prevent stiffness.

Do keep looking for any warning signs such as bleeding and infection – and get help if you notice them.

Will I have a follow-up appointment?

You will be given a plastic dressing clinic (PDC) outpatient appointment approximately one week after your discharge from hospital. This should be given to you before you leave hospital or be sent in the post. At this appointment a nurse will remove your dressings and check your wounds and a further appointment will be made for you to see your surgeon approximately six to eight weeks after the operation. If you have not received this PDC appointment and it is four days since your discharge then please contact the appointments department on the number below.

Useful sources of information

<http://www.nhs.uk/conditions/breast-reduction/Pages/Introduction.aspx>

<http://www.bapras.org.uk/public/patient-information/surgery-guides/breast-reduction>

Contact us

If you have any questions or concerns about your breast reduction or mastopexy operation, wound or dressing, please contact the plastic dressing clinic (PDC) on 020 8725 0473 and leave a voicemail with your name and telephone number (Monday to Friday, 9am to 5pm).

You can also contact the lead clinical nurse in plastic surgery on 020 8672 1071, or 020 8725 1255 - ask for bleep 6332 (Monday to Friday 9am – 5pm).

Out of hours, please contact Keate ward on 020 8725 3226 or 3227.

For appointments please contact 020 8725 5855.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9am and 5pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough Wing (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

