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This leaflet will help to give you an idea of what to expect during your hospital stay and afterwards. It also identifies some of the possible complications, although obviously this is not a comprehensive list. If you have any questions please ask your surgeon or breast care nurse.

A breast reduction operation is to help control the symptoms caused by very large breasts or to improve asymmetry caused by cancer surgery on your opposite breast. It may reduce shoulder and/or back pain, shoulder grooving (from bra straps), intertrigo (inflamed, moist skin) below the breast and breast discomfort -but only if these symptoms are actually caused by large breasts.

## What does the operation involve?

The operation is performed under general anaesthetic. The anaesthetist will see you before your operation and can discuss any queries you have about the anaesthetic. The surgery may be as a day case but be prepared for an overnight stay.

Breast reduction involves removing a large quantity of tissue from within the breast. It is not possible to do this without creating long scars. Your scar will go around the nipple, and along the crease below the breast. The part of the scar below the breast extends to the side towards the armpit and may be visible in some clothing i.e. sleeveless tops or swimsuits. The scars will never completely disappear and may even widen as the years go by. The scars will start off red but over a period of time they will tend to fade; this process will occur over about 18 months. Some people's scars fade better than others. If you scar badly, there will be only slight fading and you will be left with red, thickened scars that remain noticeable.

Removing tissue from the breast interferes with the blood and nerve supply of the skin and nipple. This may result in an alteration in the nipple sensation. Some women find a decrease in sensation with a degree of tenderness.

Interfering with the blood supply to the nipple may occasionally result in small areas of the nipple and/or areola (the coloured area surrounding the nipple) breaking down. These areas can be slow to heal and will heal leaving an area of scarring on the nipple and areola. It is possible to lose all or nearly all of the nipple and areola on one or both sides. This is a more serious complication and would require further surgery to reconstruct the nipple. Fortunately this does not occur often.

Removing breast tissue damages the milk ducts of the breast. More often than not breast feeding is no longer possible after a breast reduction operation.

Sometimes the fat tissue in the breast forms hard tender lumps after surgery. This is called fat necrosis. These lumps usually settle on their own over a period of time which may be several months. Occasionally further surgery is required to remove particularly troublesome areas.

## When should I seek help?

Any operation can give problems with infection or bleeding and breast operations are no exception. If a simple infection occurs this normally resolves after a course of antibiotics. If you notice increasing redness of your wound and it is painful you are advised to see your surgeon or GP as soon as possible – Infections caught early are easier to treat.

Bleeding after your operation can result in a collection of blood called a haematoma. A Haematoma may resolve by itself but may occasionally require a small procedure or operation to remove the blood and help the wound heal.

The surgeon will try to size your breasts in proportion to your general shape after discussing this with you. If you look carefully at your breasts before your operation you will notice there is some asymmetry (unevenness in size). This is normal and may be more obvious in some women than others. After a breast reduction there may be a slight degree of asymmetry, but this is seldom noticeable to other people.

Once your breast surgery has settled sometimes there are small folds of skin at the ends of the scars, these are called 'dog ears'. If they do not settle over a period of approximately 6-12 months they can be removed by a simple operation under local anaesthetic as a day case procedure.

## Aftercare

Stitches are dissolvable and you may have steristrips (thin strips of adhesive dressing) over your wound, which will be removed in clinic. Your consultant may ask you to wear a surgical corset for one week to help with any bruising and bleeding. After removal of the corset you may wear a firm crop top or sports bra.

If you are unsure as to which garments to wear please discuss this with the breast care nurse. You should refrain from driving, strenuous exercise or heavy lifting for two to three weeks; you may resume all other normal activities as comfortable.

Immediately after your breast reduction the breasts will be swollen and bruised but this will disappear in the first few weeks. It is usual for their appearance to be high and firm but as healing occurs and gravity takes effect your breasts settle and relax into a more natural shape, although it may be six months to a year before the full results are achieved.

**If you have any concerns, please contact your breast care nurse on 01493 452447 9am-4.30pm Monday to Friday.**

## Feedback

We want your visit to be as comfortable as possible. Please talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve your concern, please ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care. **Before you leave the hospital you will be asked to complete a Friends and Family Test feedback card.** Providing your feedback is vital in helping to transform NHS services and to support patient choice.

### Trust Values

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| <ul style="list-style-type: none"><li>Courtesy and respect</li><li>• A welcoming and positive attitude</li><li>• Polite, friendly and interested in people</li><li>• Value and respect people as individuals</li></ul> So people feel <b>welcome</b>                            | <ul style="list-style-type: none"><li>Responsive communication</li><li>• Listen to people &amp; answer their questions</li><li>• Keep people clearly informed</li><li>• Involve people</li></ul> So people feel <b>in control</b>                              |
| <ul style="list-style-type: none"><li>Attentively kind and helpful</li><li>• Look out for dignity, privacy &amp; humanity</li><li>• Attentive, responsive &amp; take time to help</li><li>• Visible presence of staff to provide care</li></ul> So people feel <b>cared for</b> | <ul style="list-style-type: none"><li>Effective and professional</li><li>• Safe, knowledgeable and reassuring</li><li>• Effective care / services from joined up teams</li><li>• Organised and timely, looking to improve</li></ul> So people feel <b>safe</b> |



The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

**For a large print version of this leaflet, contact PALS 01493 453240**