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## **Breast Reduction**

### **Patient Information Handout**

#### **Breast Reduction**

Patients with large, heavy breasts often suffer from headaches, backaches, bra strap grooving and skin rashes under the breast (intertrigo). The breasts may be pendulous with enlarged areolas and the nipples may be sitting low (ptotic). Breast reduction surgery reduces the size of the breasts and lifts the nipple areolar complex, alleviating these troublesome symptoms and improving the shape of the breasts as well as the appearance. In many cases, targeted liposuction is also performed to improve the contour where the breast meets the lateral chest wall.



#### **What Will It Do?**

Breast reduction surgery removes excess breast fat, glandular tissue and skin to achieve a breast size more in proportion with your body. During a breast reduction, excess breast tissue is removed, the nipple areolar complex is moved to a more youthful position and the skin around the breast is tightened.

#### **Is it Right for Me?**

Breast reduction may be a good option for you if:

- You are bothered by the feeling that your breasts are too large.
- You experience neck, back or shoulder pain and suffer from bra strap grooving.
- Your breasts are limiting your physical activity
- The skin folds under your breasts develop rashes or infections.
- Your breasts are droopy with low nipples or stretched areolas
- You are physically healthy
- You have realistic expectations
- Your breasts are fully developed

Before you decide on breast reduction surgery, there are some important issues to keep in mind:

- It is usually best to wait until breast development, childbirth and breastfeeding have stopped before having breast reduction surgery.
- Breast reduction may interfere with your ability to breastfeed
- Breast changes during pregnancy or rapid weight fluctuation will compromise the results of your procedure.
- Preoperative asymmetry may not be fully corrected - it is normal to have some asymmetry after breast reduction

- Breast reduction surgery can interfere with some diagnostic procedures. A baseline mammogram should be undertaken 6 months after your surgery to provide a new baseline for your normal breast
- Patients who are significantly overweight and who smoke are at increased risk of complications. Lifestyle modification is necessary to address these issues before you undergo breast reduction surgery.

### **Will I need Anaesthesia?**

Mr. Bunker performs breast reduction under general anaesthesia to maximise patient comfort. Modern anaesthetics are safe and effective but carry some risks, which you will discuss with your anaesthetist.

### **Will I need to stay in Hospital?**

Usually only a one night stay is required after breast lift surgery. This means we can monitor for unexpected postoperative bleeding, ensure any pain is well controlled and remove surgical drains prior to discharge if safe to do so.

### **What are the Risks and Complications?**

All surgery has risks. There are general risks which apply to all operations as well as specific risks for individual procedures. General risks include:

- Bleeding
- Infection that may require treatment with antibiotics or further surgery in some cases
- Allergic reaction
- The formation of a large blood clot (haematoma) or fluid collection (seroma) that may require drainage
- Pain, bruising and swelling around the operated sites
- Keloids and hypertrophic scars that are raised, red and thickened scars over the healed incisions. These may be itchy, annoying and unsightly but are not a threat to health.
- Poor healing or wound breakdown
- Smokers are at increased risk of complications from any surgery. It is important to truthfully disclose your smoking status, including 'social' smoking.
- Short-term nausea following general anaesthesia and other risks related to anaesthesia

Specific risks and complications associated with breast lift include:

- Sensory changes to the nipple - this is usually temporary but can be permanent
- Haematoma or seroma which may require drainage
- Issues with the blood supply to the nipple leading to delayed wound healing, subtotal or complete loss of the nipple (termed necrosis)
- Excessive 'firmness' of the breasts
- Reduction in the ability to breastfeed
- Asymmetry of the breasts or nipples
- Lumps in the breast due to issues with blood supply (fat necrosis)

### **Will I have Scarring?**

Some are an inevitable part of breast reduction surgery and are usually an 'inverted T' or 'lollipop' pattern. Mr. Bunker will discuss the placement of scars with you prior to surgery. We offer a range of scar reduction products which can be purchased at the practice. Refer to your sheet titled 'Scar Advice'.

### **Where will the Surgery take place?**

Your surgery will take place in an accredited hospital facility.

### **What do I need to do Before Surgery?**

- Due to the recent cosmetic surgery reforms, all patients in Australia undergoing cosmetic surgery are required to undertake a Body Dysmorphic Disorder Questionnaire.
- You will be asked to complete a full medical history. You must list all medications you take including dietary supplements such as fish oil which increase your risk of bleeding.
- Check with your surgeon about your medications as some may need to be stopped. Any additional tests required preoperatively will be arranged by Mr. Bunker or your anaesthetist.
- If you decide to have breast reduction surgery, you will need to sign a consent form. Make sure you read the consent form carefully before signing. If you have any questions, please ask them prior to surgery.
- Avoid any strenuous activity or exercise in the week before your surgery.
- Take Vitamin C supplements 1 gram daily starting at least 4 weeks before your surgery, unless you are allergic or unable to tolerate.
- Make sure you arrange for a relative or friend to drive you to and from the hospital or clinic and that you have arranged appropriate help at home including someone to stay with you for the first 24 hours. Think about the setup at home where you will recover – you may want extra pillows, fluids and a toilet nearby and it is useful to have a telephone within reach.
- Consider work arrangements. Most patients will remain off work for 2-3 weeks after surgery. A medical certificate can be supplied to you preoperatively if required.
- Purchase postoperative garments if instructed to do so.
- You will receive detailed preoperative and postoperative instructions. Follow them carefully.

### **What do I need to do After Surgery?**

- Someone should also stay with you for the first night you are home.
- You can usually drink fluids and eat a light meal two or three hours after surgery. You may have some pain and discomfort, particularly around the incisions. You will receive medications for home (pain relief and antibiotics) as well as detailed postoperative instructions which include how to care for your surgical site, signs which warrant concern, contact information and follow-up instructions.
- No strenuous activity for 6 weeks after surgery. In particular, this involves no heavy use of the arms, no carrying heavy loads and no reaching high above the head. This can cause bleeding.
- Some bruising and swelling is normal and may take up to a few weeks to disappear.
- Dressings are to remain dry and intact until your post-operative review.
- Comply with any instructions regarding postoperative garment wear.

If you experience any of the following symptoms, notify us immediately:

- Temperature higher than 38°C or chills
- Heavy bleeding from the incisions
- Sudden swelling or dark bruising around the breast
- Changes in the colour of the nipple
- Worsening redness around the incision sites
- Increasing pain or tenderness
- Issues with the dressings (becoming dirty, wet or loose)

### Will I need Revisional Surgery?

Revisional surgery may be necessary to correct minor irregularities.

### How much does a Breast Reduction Cost?

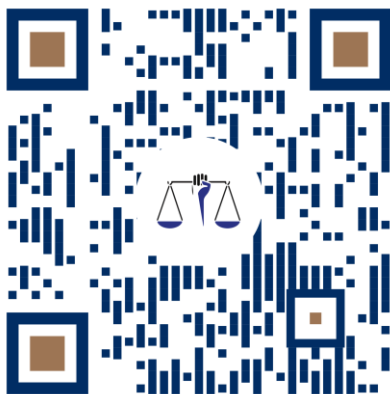
Cost is always a consideration in elective surgery and may include:

- Surgical fee
- Hospital or surgical facility costs
- Anaesthesia fees
- Prescriptions for medication
- Postsurgical garments
- Medical tests

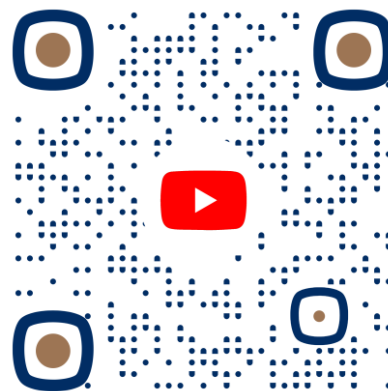
A quote for the surgical fee is provided to you prior to surgery. If you have any further questions, please contact the practice or Medibill on the information provided.

### Terms you Should Know

- **General anaesthesia:** Drugs and/or gases used during an operation to relieve pain and alter consciousness. When you are under general anaesthesia you are 'asleep'.
- **Ptois:** Drooping of the nipple-areola complex.
- **Necrosis:** Death of tissue due to a lack of blood supply.
- **Heamatoma:** A collection of blood under the skin or within the tissues which may necessitate open surgical drainage.
- **Seroma:** A collection of clear fluid.
- **Intertrigo:** Skin inflammation and breakdown caused by skin-on-skin friction, intensified by heat and moisture.
- **Inverted-T scar:** A scar which runs around the areolar, vertically down to the breast and along the breast fold.
- **Lollipop scar:** A scar which runs around the areolar and vertically down to the breast fold.



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