Breast Reduction or Mastopexy (Breast Lift)

Instructions for You Before and After Surgery

- You should arrange for a responsible adult, a loved one for example, to stay with you at least 2 weeks at home after surgery. You will need care at home and will not be able to do child-care, cooking, laundry, driving, etc. Plan to be a ‘couch-potato’ and rest for at least 2 weeks, only getting up to walk in the house, or down the block and back, with someone walking with you at all times. A fall could make you bleed and cause severe complications.

- Do not take Aspirin, aspirin-containing products, Ibuprofen (Motrin, Advil), Vitamin E, Ginkgo Biloba or any herbal supplements for 2 weeks before or after your surgery.

- An iron supplement may be suggested. This should be taken twice daily, with food, for 4 weeks. A stool softener may be added.

- Smokers are not offered surgery, no smoking; avoid second-hand smoke for 2 weeks before and after surgery.

- A bladder catheter may be placed during surgery, and is removed right after surgery. You will have at least 1 drainage tube per breast after surgery to prevent excess accumulation of blood. A nurse will teach you and your family to empty and record amounts of drainage (see Drain Care Instruction Sheet). The drains will be removed in our Clinic within 1 week after surgery, usually when drainage is less than 30 milliliters per day per drain.

- Breast discomfort is variable after surgery. Pain medication will be given to you both during your hospitalization and following discharge. Take this medication with food to prevent stomach upset.

- You can expect to feel tired or worn out during the first 10 days or more after surgery, as your body uses more stored protein and iron to heal the operated breasts. Allow yourself lots of rest and naps.

- After surgery, you will be placed in an ACE bandage wrap around the chest. This is not to be tight, only supportive to give you a sense of protection. You should plan to lie on a sofa, recliner chair, or in bed with a pillow or foam wedge 30 degrees elevation (available at medical supply or bedding supply stores), with pillows under the knees. When you are not reclined, plan to walk.

- You need to protect your fragile skin of the breasts. No driving for 7-10 days. No leaning over or lifting anything heavier than your dinner plate, no reaching above the head or behind you for 3-4 weeks. No laundry or housework for 6 weeks. These positions or activities can make you bleed, and the breast skin can be lost or badly injured by bleeding. No sports or strenuous activity for at least 6 weeks. No sexual activity for 4-6 weeks. No tanning or sun exposure for 6 months.
Keep your surgical incisions and dressings dry. At your first clinic visit we will change the dressing, and likely remove the drains. Do not shower or sit in the tub until we tell you that it is allowed. Only take sponge baths until that time. When allowed, do not let shower spray hit the breasts, but only hit the collarbones and flow down over the breasts. Be very gentle, and pat dry. You will likely have skin tapes placed at the time of surgery that will be continued for 6 weeks. Bring your soft, cotton, front-closure jogging bra that fits loose and comfortably with you to the Clinic on your first visit after surgery. We will teach you how to care for your incisions post-operatively.

Some patients like to purchase a padded seat belt protector (available at Auto Stores) to use as a passenger post-operatively.

Expect some numbness of breast, areolas and incisions for up to 2 years. Breast sensation will return in less than 1 year.

Some local areas of firmness in the breast (fat necrosis) may be felt by you or by your surgeon in Clinic. We will discuss these with you when they occur. These usually resolve over time. Only in a few patients do we need an ultrasound or recommend a tiny biopsy of these areas, to prove it is healing fat tissue.

Expect to be off work for a minimum of 3 weeks. Usually, it takes at least 3-4 weeks after this surgery to feel strong enough to drive, sit, and do your job. Ideally, plan to be off work 6 weeks, especially if your job requires more strenuous activity.

Expect clinic appointments after surgery: 1 week, 2 weeks, 4-6 weeks, 2-3 months, 6 months, and 1 year.

Occasional patients will experience vaginal burning and itching from a vaginal yeast infection, after a few days of the prescribed antibiotics. You can call your family doctor or our clinic for Mycostatin (vaginal dosepak) to be used as directed. Or you can buy some over-the-counter without a prescription.

You may be discharged home the same day of surgery. If observation is required, you will be admitted to Hospital Ambulatory Surgery (HAS overnight).

You will be placed in ACE wraps immediately after surgery, and will wear it until your first post-operative visit.

Bring a front-closing sport bra (NO underwire bra) with you to the hospital or your first post-hospital appointment. You will wear your bra 24 hours/7 days a week after the drains are removed.

For the first few days following surgery lie on your back, elevated 30° as much as possible while resting. Anticipate wearing your supportive jog or sport bra 24 hours a day, 7 days a week for 6 weeks after surgery.
✓ Avoid excessive arm extension or reaching. No heavy lifting until your suture lines are healed (approximately 4 weeks).

✓ Keep incisions dry for 4 - 5 days. You may take a tub bath, but must avoid getting incisions wet. You may take brief showers 4 - 5 days AFTER surgery, if drains are removed; dry skin GENTLY along the suture lines.

✓ Allow 4 - 6 weeks for most swelling to subside and healing to be completed. Breast shape and symmetry will continue to improve over subsequent months, up to 1 year.

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<tr>
<th><strong>Pain</strong></th>
<th>Pain begins to lessen 24 - 48 hours after surgery</th>
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<tr>
<td><strong>Swelling</strong></td>
<td>Swelling can be moderate – still persist for 3 - 4 months</td>
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<td><strong>Bleeding</strong></td>
<td>A small to moderate amount of bloody oozing along the suture line is normal for 2 – 3 days</td>
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<td><strong>Bruising</strong></td>
<td>Expect moderate to severe bruising for 2 – 3 weeks with blue, green, yellow, and brown stages. This may travel down onto upper abdomen.</td>
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<td><strong>Scabs/crusting</strong></td>
<td>A small amount of scabs along the incision lines are normal. Just leave intact to fall off on their own.</td>
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<td><strong>Nipple Numbness</strong></td>
<td>Nipple numbness is common initially, 85% regain some nipple sensation within 2 years. If free-nipple graft was done, recovery of sensation is much less likely.</td>
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<td><strong>Skin Loss</strong></td>
<td>Skin loss can occur in 50% of patients have some wound-healing problems to a lesser or greater degree with blistering, scabbing, and a small amount of skin loss.</td>
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<td><strong>Breast-feeding ability</strong></td>
<td>Variable, not possible with free-nipple grafting. We encourage patients to try after child-birth.</td>
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<td><strong>Breast Exams</strong></td>
<td>Breast self-exams and mammograms are somewhat more difficult to do. Have a post-op baseline mammogram 6 – 12 months after breast reduction surgery. It is very important you do breast self-examination on a regular basis.</td>
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<td><strong>Scarring</strong></td>
<td>Always occurs and may be significant. Return to your doctor’s office with concerns of thick, itchy or painful scars.</td>
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**For questions or concerns, such as pain, drainage or fever, contact the Plastic Surgery Clinic:**

Antioch Medical Center (925) 813-6330, after hours (925) 813-3100

Walnut Creek Medical Center (925) 295-5885, after hours (925) 295-4070