# UW Medicine UNIVERSITY OF WASHINGTON MEDICAL CENTER

## **Latissimus Flap Breast Reconstruction**

What to expect and how to prepare

This handout explains latissimus flap breast reconstruction. It includes how to prepare, what to expect, care instructions for recovery, and when to call your doctor or nurse.

#### What is the latissimus muscle?

The *latissumus* muscle is on your upper back. It is the muscle that allows you to push your arm down. You use it when swimming, cross-country skiing, and other activities.

The latissimus muscle is often used along with a breast implant for breast reconstruction. If you have had radiation, some of your radiated skin will be removed and replaced with the skin that is moved from your back.

## **Breast Reconstruction Steps**

- Your latissimus muscle is moved to the breast area and your breast implant is placed beneath the latissimus flap.
- About 2 weeks after your surgery, your expander/ implant will be filled with saline at an office visit.
   When it is full, your skin will be allowed to stretch over it for 3 months.



Be sure to ask your doctor any questions you have about what will happen during your breast reconstruction surgery.

- After about 3 months, you your breast reconstruction surgery. will be ready to have your expander replaced with your final implant. During this surgery, a nipple is made from other tissue in the area. You will also have any procedures done on your opposite breast to make your breasts equal size, if needed.
- About 6 weeks to 2 months later, you will be ready to have your nipple tattooed. This will be done in your doctor's office.

## **How to Prepare**

#### Things to Remember

- Do **not** take any aspirin or other products that affect blood clotting for 1 week before your surgery. Two of these are ibuprofen (Advil, Motrin, and other brands) and naproxen (Aleve, Naprosyn, and other brands). See attached sheet for more information.
- Do not shave any part of your body that you do not already shave every day. If you normally shave near your surgical site, do **not** shave that area for 2 days (48 hours) before your surgery.
- You will stay in the hospital for 3 to 5 days after your surgery. When
  you go home, you will need someone to help you prepare food and do
  household chores for 1 week.

## 24 Hours Before Surgery

#### At Home

- Take 2 showers: Take 1 shower the night before, and a 2nd shower
  the morning of your surgery. Use the antibacterial soap your nurse
  gave you to wash your body.
  - Do **not** use the antibacterial soap on your face and hair. (See directions that came with the soap.) Use your own soap and shampoo on your face and hair. Use clean towels to dry off, and put on clean clothing.
- **Arrival time:** The pre-surgery nurse will call you by 5 p.m. the night before your surgery. If you are having surgery on a Monday, the nurse will call you the Friday before. If you do not hear from the pre-surgery nurse by 5 p.m., please call 206.598.6334.
- The pre-surgery nurse will tell you when to come to the hospital and will remind you:
- Not to eat or drink after a certain time
- Which of your regular medicines to take or not take
- To sip only enough water to swallow your pills

#### At the Hospital

Heating blanket: To reduce your risk of infection, we will cover you
with a heating blanket to warm your body while you wait to go into the
operating room. Please ask for a heating blanket if you do not receive
one.

## **After Surgery**

#### **Waking Up**

You will wake up in the recovery room. You will feel sleepy. You will have:

- An *intravenous* (IV) line in your vein. This flexible tube will be used to give you medicine for pain and nausea.
- Sequential compression devices (SCDs) on your legs. These are inflatable stockings that help with blood flow to keep blood clots from forming.
- Several **drains** (tubes) in your incisions.

You may also have:

• A catheter tube inserted into your bladder to drain your urine.

## **Recovering in Your Hospital Room**

#### **Incisions**

- The type of chest incision you have will depend on the type of mastectomy you had.
- Your back incision will be on the same side as your breast reconstruction.
   It will be about 6 to 8 inches long.
- After your surgery, all of your incisions will be covered with white surgical tape and gauze.

#### **Pain Management**

You will probably have a pain-medicine pump called a *patient-controlled* analgesia (PCA) for 1 to 4 days after your surgery. This will allow you to get pain medicine when you need it.

## **Going Home**

#### **Medicines**

- Use extra-strength acetaminophen (Extra Strength Tylenol) according to the dosage instructions on the container. Or, use the pain medicine your doctor prescribed for you. It is important to take pain medicine before your pain is severe. (See the handout "Pain Management" for more information.)
- Take antibiotics as prescribed by your doctor.

#### **Drain Care**

You will have small drains under your skin in the areas of your back and breast reconstruction. You will go home with the back drains in place. Your nurses will teach you how to care for them.

You will need to measure and record the amount of drainage every day. When the output is less than 30 cc in 24 hours for 2 days in a row, your drains can be removed. This can be done at your follow-up visit, or you can schedule a visit with a nurse to have them removed.

Call 206.598.1217 to make this appointment.

#### **Incision Care**

- You will have white surgical tape called Steri-Strips over your incisions. This tape will fall off on its own, or can be removed after 2 weeks.
- Replace your dressing as needed. Panty liners work great as a dressing (bandage).

#### Bra

- In general, you will not wear a bra for the first 3 weeks after your surgery.
- Surgical camisoles offer breast support and have removable pockets for drains. Regular camisoles or conforming tank tops also work. You may use anything that is supportive but not constrictive.
- Do not wear underwire garments until all of your incisions are fully healed.

#### **Activity**

Your surgeon will place your implant underneath your muscle. Moving your arms too much can make your implant shift out of place. This will affect the shape and position of your breast.

To allow your implant to heal in place:

- Do **not** push, pull, or lift anything heavier than 5 pounds for 6 weeks after your surgery. (A half gallon of milk weighs 4 pounds.)
- Do **not** do any running or jumping activities during this 6-week recovery time.
- You can walk for exercise.

## **Breast Implant Expansion**

If you have an expander placed, you will have your first expansion 3 weeks after your surgery. For the expansion:

- A needle will be inserted into the filling port of your breast implant.
   When the fluid is injected, it might feel like there is a tight band around your chest.
- The number of expansions you have will depend on the size your breast will be after reconstruction.

- Take your pain medicine as needed. This tight feeling from the expansion procedure will last 1 to 2 days.
- When your expander is full, your skin will be allowed to stretch and relax over it for 3 months. Then you may have your expander replaced with the final implant. Your nipple can be reconstructed after this.

#### When to Call

Call your doctor or nurse if you have:

- Bleeding or drainage that soaks your dressing
- A fever higher than 100.5°F (38°C)
- Shaking and chills
- Any sign of infection in your incision:
  - Redness
  - Increasing pain
  - Swelling
  - Bad-smelling drainage
  - A change in the type or amount of drainage
- Nausea or vomiting, or both
- Concerns that cannot wait until your follow-up visit

#### Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

Weekdays from 8 a.m. to 5 p.m., call the Center for Reconstructive Surgery at 206.598.1217 and press 8.

After hours and on weekends and holidays, call 206.598.6190 and ask for the resident on call for Plastic Surgery to be paged.