

Liposuction and Fat Grafting for Breast Reconstruction

What to expect and how to prepare

This handout explains liposuction and fat grafting when used in breast reconstruction. It includes what to expect, how to prepare, and answers to common questions.

What are liposuction and fat grafting?

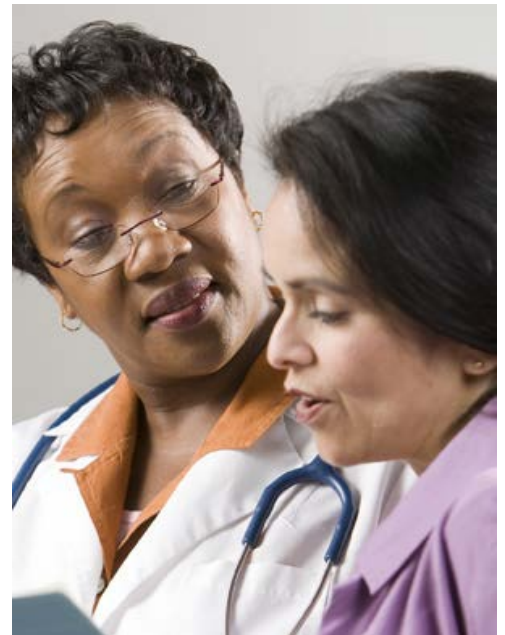
Liposuction and fat grafting are part of breast reconstruction surgery. They are often done at the *breast revision* stage of surgery.

- In liposuction, your surgeon removes fat from an area of your body. This area may be the front of your abdomen, the sides of your hips or abdomen (flanks), or your inner and outer thigh.
- This fat is then injected into your breast. This step is called fat grafting.

This surgery is done with *general anesthesia* (medicine that makes you sleep). Most patients are able to go home the same day, after the anesthesia wears off.

How do I prepare?

- **Medicines:** For 1 week before your surgery, do **not** take any aspirin or other products that affect blood clotting. These include ibuprofen (Advil, Motrin) and naproxen (Aleve, Naprosyn). To learn more, read the handout “Medicines to Avoid Before Surgery.”
- **Shaving:** 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.



Ask your doctor if you have any questions about how to prepare for your surgery.

- **Compression garment:** We will ask you to buy a compression garment before surgery. This garment should cover the areas of your body where your surgeon plans to remove fat. You may be able to buy shaper garments from a local store, but we may suggest that you buy a certain garment from a medical garment company. We will give you these instructions before the day of surgery.

Day Before Surgery

Reminder Call

A staff person from the pre-surgery clinic will call you by 5 p.m. the night before your surgery. If you are having surgery on a Monday, they will call you the Friday before. If you do not receive this call by 5 p.m., please call 206.598.6334.

The staff person will tell you when to come to the hospital and remind you how to prepare for your surgery. If you have questions, they may forward your call to a pre-surgery nurse or ask you to call your surgeon's nurse.

Shower

Take a shower the night before 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. (Read the 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.

Day of Surgery

At Home

- **Shower:** Take another shower on the morning of your surgery. Use the antibacterial soap and follow the same instructions as you did for your shower the night before.
- **Medicines:** Follow the instructions you received about what medicines to take and not take before surgery. If you need to take medicines, take them with **only** a small sip of water.
- **Eating:** Follow the instructions you received about what you can eat and drink before surgery.

At the Hospital

- **Heating blanket:** To lower your risk of infection, you will be covered 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.

Self-care After Surgery

For Your Safety

Medicine given during and after your surgery will affect you. For 24 hours after your surgery, do **not**:

- Drive, or travel alone
- Use machinery
- Drink alcohol
- Sign any legal papers, or be responsible for the care of another person

Shower

- You may shower 48 hours after your surgery.
- Do **not** take a bath, sit in a hot tub, or go swimming until your surgeon says it is OK.

Pain Control

- Read the “Pain Control after Surgery” handout.
- **Starting the day after surgery:** For general soreness from the liposuction, you may find it helpful to take either:
 - 600 mg ibuprofen (Advil, Motrin) every 6 hours
 - OR
 - 220 mg to 500 mg naproxen (Aleve, Naprosyn) 2 times a day
- You may apply a cold pack to the areas where you have had liposuction, if this improves your comfort. Do **not** put ice directly on your skin. Place a clean towel between the cold pack and your skin.

Activities

- Return to work when you are comfortable doing so. Most people take 1 to 3 weeks off work to recover after this surgery.
- You can resume all your usual activities, including aerobic exercise, about 4 weeks after surgery.

What to Expect

Liposuction Area

- You will have small skin punctures where the liposuction device was passed beneath your skin. Each one may be closed with a small stitch that will dissolve on its own. The punctures may be covered by strips of white tape (Steri-strips).

- Some bloody fluid may drain from these punctures for 24 to 72 hours. You may need to change the dressing over these punctures 2 to 3 times a day until they stop draining.
- Bruises may form at the sites near where you had liposuction. These bruises may be deep in color and take a long time to go away.

Fat Grafting Area

- You may have bruises and swelling around your breast where the fat was injected.
- You will have many small scabs across your chest at the injection sites.
- About 50% of the injected fat will still remain after a few months. The rest will be absorbed by your body.
- Some drainage is normal. Place dry gauze over the area to protect your clothing. Call the clinic if you have concerns.

Common Questions After Liposuction

I have bruising on my back and ankles. Is this normal?

Liposuction bruising often settles to nearby areas. It usually goes away in about 4 to 6 weeks.

I had liposuction from my legs and now I have swelling of both my lower legs. Is this normal?

Some leg swelling can be normal. Swelling is likely if you have had vein surgeries or problems with leg swelling in the past. Swelling should slowly lessen over 4 to 6 weeks after surgery.

For when to report leg swelling, see “When to Call” on page 5.

How can I ease the swelling?

To help ease swelling:

- Keep your legs raised when you are sitting or lying down.
- Wear knee-high or thigh-high compression stockings or hose. You can buy compression garments at a medical supply store. If needed, our clinic can write you a prescription.

The compression garment I am wearing on my lower body is very tight. Is this OK?

Compression garments must be tight to work well. But, if there is a band or crease that is causing discomfort in a certain area, try smoothing it out or modifying the edges of the garment. You can cut the band with scissors to make it a little looser.

To learn more, please read the handout “Compression Garments After Surgery.”

When to Call

Leg Swelling

Some types of leg swelling can mean there is a blood clot in the deep veins of your leg. These blood clots can move to your lungs and cause life-threatening breathing problems.

Call the clinic if:

- There is a lot more swelling and redness in one leg than the other.
- Pain in one leg is getting worse, you have a fever higher than 100.5°F (38°C), and you feel very tired.

Call 911 or go to the emergency room right away if:

- You have trouble breathing.

Other Concerns

Call the clinic or your doctor 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
 - Drainage that smells bad
 - 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 your surgeon to be paged.