# UW Medicine UNIVERSITY OF WASHINGTON MEDICAL CENTER

## **Breast Reduction or Mastopexy**

What to expect and how to prepare

This handout explains what to expect, how to prepare, and how to plan for your recovery after breast reduction or mastopexy.

#### What is breast reduction?

Breast reduction is a surgery to make your breast lighter and smaller. This is done by removing fat, glandular breast tissue, and excess skin. Most times, this surgery is done to make your breast in better in proportion to the rest of your body.

## What is mastopexy?

Mastopexy is surgery to reposition your breast so it is higher on your chest. It is also called a "breast lift."

## **How to Prepare**

 For 1 week before your surgery, do not take any aspirin or other products that affect blood clotting. Two of these are ibuprofen (Advil, Motrin) and naproxen (Aleve, Naprosyn). See the handout "Medicines to Avoid Before Surgery."



Talk with your provider if you have any questions about how to prepare for your surgery.

- Talk with your provider about whether you may need to spend the night in the hospital after your surgery. If you go home the same day, you will need to have a responsible adult ready to take you home.
- 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.

## Mammogram

You might need a mammogram before your surgery to make sure there is no sign of cancer. If you have a mammogram before surgery, we advise that you have another one 6 to 9 months after your surgery.

The mammogram after surgery will show the scars that have formed since your surgery. Your providers will compare all future mammograms to this second mammogram.

#### **Day Before Your Surgery**

• **Arrival time:** 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 hear from them 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 nurse in the pre-surgery clinic 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, hair, or private parts. (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 clothes.

## **Surgery Day**

- **At home:** Take another shower the morning of your surgery. Follow the same instructions as you did for your shower the night before.
- **At the hospital:** One adult can stay with you while you wait to go into surgery.

## **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 legal papers or make important decisions
- Be responsible for the care of another person

## Incision Care, Drainage, and Healing

Your incisions will be around your nipple and *areola* (the ring of color around the nipple) and go down your breast to your chest.

- Wear the surgical bra that was given to you 24 hours a day (other than
  when you shower) for 4 weeks after your surgery. This bra should be
  very snug but not painful. You may find it helpful to buy 1 or 2 front-zip
  sports bras to help provide better support after surgery. You may layer
  2 bras if needed.
- Remove any outer dressing on your breast 48 hours after surgery. Do this before you shower for the first time. If you have white tape over your incisions, leave it in place until it falls off. Your provider will remove the tape if it is still on at the time of your first clinic visit.
- Some drainage is normal. If you have any drainage from your incisions, you can cover the area with dry gauze or a panty liner. Wear a bra over the gauze to hold it in place.
- Your nipple and breast may feel numb for 4 weeks or longer. Your breast tissue may also be bruised.

#### **Drains**

If you have drains placed at the time of surgery, we will teach you how to care for them before you leave the hospital. Please read the handout "Closed Bulb Drain Care: For a Jackson-Pratt (JP) or Blake drain" to learn more.

#### **Shower**

- You may shower 48 hours after your surgery.
- Do not take a bath, sit in a hot tub, or go swimming until all your incisions are healed.

#### **Pain Control**

You can expect to have some discomfort after surgery, even if you use the pain medicine you received. If you still have a lot of discomfort after taking your pain medicine, call the clinic and ask to talk with a nurse.

Please read the handout "Pain Control After Reconstructive Surgery" to learn more.

#### **Activity and Return to Work**

- Most women stay overnight in the hospital after this surgery. The nurses will watch to make sure there are no problems and that your pain is under control.
- After you leave the hospital, make sure to walk a few times every day. Moving helps keep blood clots from forming in your veins.
- Walking is the best exercise to do during your recovery. For 4 weeks
  after surgery, avoid running or any other exercise that causes impact
  on your body.

- For 4 weeks after surgery, do **not** lift anything that weighs more than 10 pounds. (A gallon of milk weighs more than 8 pounds.)
- Most women take 2 weeks off school or work to recover from surgery.
  If your job requires you to lift heavy objects every day, you may need
  to take longer before going back to work, or ask for lighter tasks
  during your recovery.

#### When to Call

Call the clinic or your provider 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 your surgeon to be paged.