



DIEP 皮瓣式乳房重建术

其过程及如何做准备

本讲义解释了 DIEP 皮瓣式乳房重建手术的过程、如何为手术做准备、以及如何计划恢复。

什么是 DIEP 皮瓣乳房重建术？

DIEP 是指下腹深部穿支肌 (*deep inferior epigastric perforator*) 的缩写。在这个手术中、外科医生将使用腹部的皮瓣（皮肤和脂肪）来重建乳房。胃部的肌肉只受到轻微影响。

首先、将腹部的皮瓣移到乳房的部位。然后、将皮瓣中的血管缝入胸壁的血管中、以保持皮瓣的活力。这个皮瓣就成了新的乳房。

我如何为此手术做准备？

- 在手术前 1 周内、请勿服用任何阿司匹林 (aspirin) 或其他影响血液凝固的产品。其中两种是布洛芬 (ibuprofen - Advil、Motrin) 和萘普生 (naproxen - Aleve、Naprosyn) 更多信息请参见附件。
- 如非每天都要剃身体任何部位的体毛、则请勿剃体毛。如平常会剃手术部位附近的体毛、请在手术前 2 天 (48 小时) 内不要剃该部位的体毛。
- 手术后计划在医院住 3 至 5 天。
- 回家后 1 至 2 周内、需要有人帮助您准备膳食、自我护理及日常活动



手术后计划在医院住 3 至 5 天。

手术前一天

- **饮食:**手术前一天、请吃量少且容易消化的饮食。
- **淋浴:**手术前一晚请淋浴并且：
 - 用护士给您的抗菌皂液清洗身体
 - 请勿用抗菌皂液洗脸和洗头。用自己惯用的肥皂和洗发液洗脸和头发。
 - 淋浴后用清洁的毛巾擦干、穿上清洁的衣服。
- **报到时间:**麻醉预科的护士会在手术前一天下午 5 点前给您打电话。如您是在星期一做手术、则护士会在前一个星期五给您打电话。如您在下午 5 点之前没有收到护士的电话、则请拨打 206.598.6334。

护士会告诉您何时来医院、并提醒您：

 - 过了什么时间不要吃喝
 - 那些常规药物应该服用或者不要服用
 - 仅喝一小口水来送服药物

手术的当天

在家中

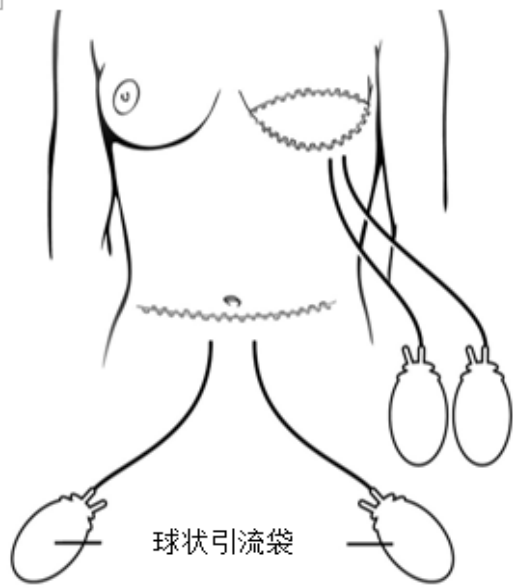
- **饮食:**手术当天请勿吃喝任何东西、包括口香糖和薄荷糖。
- **淋浴:**用抗菌皂液再次淋浴。按照前一天晚上洗澡时的步骤淋浴。
- **服药:**遵照麻醉预科护士给您的说明服用或不服用某些药物。仅以一小口水来送服药物。

在医院

- **加热毯:**在等待进入手术室的时候会给您盖上加热毯、使您的身体暖和。这有助于降低感染的风险。如您没有得到加热毯、请向我们索取。

手术后

会在恢复室醒来、您会感到困倦。您会有：



DIEP 皮瓣式乳房重建的切口及引流

- 手臂上有一根很细的**静脉导管(IV)** 我们会用此导管给您输止痛止吐的药物。
- 有一**导尿管**插入膀胱以排出尿液。是在手术室您睡着后安置的。
- **腿部间歇性压缩套 (SCDs)**。您会感觉到这些腿套不时地充气。这种压力有助于腿部静脉中血液的流动。当您躺在床上、不如平时那样活动时、腿上的间歇性压缩套 (SCD) 有助于预防血栓。
- **闭合式球状引流袋 (closed bulb drains)** 从切口伸出 (见左图)。请阅读讲义 "护理闭合式球状引流袋" 来了解更多关于这些引流袋的资讯。
- 在您的皮瓣中连接血管的地方有一小导线、称为**多普勒线 (Doppler wire)**。这导线可以帮助护士观察血液流向瓣膜的情况。在手术后的 2 至 3 周后、在您的第一次或第二次复诊时、会移除这导线。

住院恢复期间

手术后您将在医院停留 3 至 5 天。前 24 至 48 小时会在重症监护室 (ICU)。当手术团队认为流向皮瓣的血流保持强劲时、他们就把您转移到医院常规护理单元的病房。

卧床休息

手术后您将在床上休息。床头会稍微抬高以减轻腹部的压力。当您休息时：

- 会在您身上盖上一条温暖的毯子以帮助血液流动。
- 您会不时地感觉到间歇性压缩套 (SCDs) 轻轻地挤压您的双腿。
- 在最初的 24 小时内、护士会经常检查血液流向皮瓣的情况。

切口

手术后会用纱布覆盖所有的切口。

- **腹部切口**是在耻毛际线上方，横跨向臀部。
- **胸部的切口**取决于乳房切除术的类型。

饮食

大多数患者在手术后 24 小时内不能吃或喝任何东西。在这期间、是通过静脉输液接受液体和营养物质。

呼吸练习

护士会在您清醒的时候、每隔 1 到 2 小时帮您做一次呼吸和咳嗽的锻炼。这些锻炼可使肺部保持通畅，有助于预防肺炎（肺部感染）。

控制疼痛

在手术后的 1 至 2 天内使用称为*患者自我控制镇痛泵*（PCA）给自己输送止痛药。需要时按一下按钮就能通过静脉导管（IV）输送止痛药、这样就会保持舒适。

如回家后需要止痛药、请服用医生为您开的止痛药。

导尿管

膀胱内的导尿管会留置 1 至 2 天。如此可以让您在床上休息。也会减轻腹部的压力。

引流袋

护士会给你一份名为“球状引流袋护理须知（Caring for Your Closed Bulb Drain.）”的讲义。请仔细阅读。如有任何疑问请咨询护士。

腹部和乳房重建的区域安置了引流管（见第 3 页的插图）。您将带着这些引流管回家。

离开医院之前护士会教您如何护理这些引流管。护士会教您以下的事项：

- 每隔 8 小时要把它们用手刮平以免堵塞。
- 把它们倒空
- 记录收集的排液量

当 **DIEP 皮瓣引流袋**、连续 **2 天每天 24 小时** 的总引流量少于 **30cc** 时、引流管就可以移除。您可以等到复诊、或拨打 206.598.1217 与护士预约取出引流管。

在家的预防和自我保健措施

乳房支持

- 手术后 3 周内不要戴胸罩。可穿一些既有支撑性又不会约束乳房的衣服。
- 您可以穿手术后的胸衣（surgical camisole）来支撑乳房。这些胸衣有可打开的口袋以便于排液。普通的胸衣和背心也是可以的
- 在乳房切口完全愈合之前、请勿戴有钢圈的胸罩。

腹部的支撑

手术后的 3、4 周内、我们建议您穿下列的裤子：

- 骑脚踏车穿的高腰短裤或
- 束身内裤

这些裤子可以支持腹部、给腹部轻微、均匀的压力。有助于防止液体聚集在腹部。短裤可以在体育用品或其他商店购买、内裤可在服装店购买。

淋浴

- 在使用引流袋期间可以淋浴。
- 请勿泡澡、坐在热水池里、或游泳。直到：
 - 引流袋以取出。
 - 伤口已痊愈；没有任何结痂、流液、或伤口裂开。

活动限制

- 手术后 4 周内、不要提拿任何重量超过 5 磅的东西。（一瓶 2 公升的水约有 5 磅重）。
- 在手术后的 4 至 6 周内、不要做任何园艺、吸尘、有氧运动或其他任何会拉动伤口的活动。
- 以短距离的散步来锻炼身体、可保持血液循环。
- 在手术后 4 至 6 周内腹部伤口愈合期间、您将无法站直。这可能会给您的背部带来压力。如过去有背部问题、可在这段时间内用拐杖或其他支撑物走路。

恢复工作

请假多长时间要看工作的性质。大多数人需要休息 1 到 2 个月才能恢复。

复诊

第一次复诊

在手术后 2 至 3 周内看外科医生。在这次门诊中：

- 如引流量减少了 我们可能会取出引流管。
- 会询问疼痛情况以及在家情况。
- 如可以、我们可能会移除多普勒导线。

第二次复诊

在手术后 5 到 6 周的第二次复诊时：

- 如引流量已经足够地减少、我们会取出剩下的引流管。
- 我们会询问在家的情况、疼痛程度、以及目前服用止痛药的剂量。
- 如多普勒导线在第一次复诊时没有取出、如目前已经可以、我们会在这次复诊时拆除

何时应该与医生联系

如有下列情况、请与护士或医生联系：

- 出血或引流液渗透了敷料。
- 体温超过 38° C (100.5° F)。
- 颤抖和发冷
- 伤口有任何感染的迹象：
 - 发红或肿胀
 - 疼痛加剧
 - 引流液有异味或形态、流量有了变化
- 恶心、呕吐或两者兼有
- 有疑虑或问题不能等到复诊时才提出的。

与谁联系

请参看本页 左边 "您有疑问吗？" 栏中的电话号码。

您有疑问吗？

我们很重视您的提问。如您有任何疑问或顾虑、请与您的医生或医疗提供者联系

周间上班时间上午 8 点至下午 5 点：请致电整形重建外科中心：206.598.1217.

下班后、周末、假日：请致电 206.598.6190、传呼当值住院医师联系您的外科医生。

DIEP Flap Breast Reconstruction

What to expect and how to prepare

This handout explains what to expect from DIEP flap breast reconstruction, how to prepare for your surgery, and how to plan for your recovery.

What is DIEP flap breast surgery?

DIEP stands for *deep inferior epigastric perforator*. In this surgery, your surgeon will use a *flap* (skin and fat) from your lower belly to rebuild your breast. Your stomach muscle is only slightly affected.

First, the flap from your belly is moved to your breast area. The blood vessels in the flap are then sewn into blood vessels in your chest wall to keep the flap alive. This flap becomes your new breast.

How do I prepare for surgery?

- 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 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.
- Plan to stay in the hospital for 3 to 5 days after your surgery.
- When you go home, you will need someone to help you with meals, self-care, and daily activities for 1 to 2 weeks.



You will be recovering in the hospital for 3 to 5 days after your surgery.

Day Before Surgery

- **Meals:** The day before your surgery, eat only light foods that you can digest easily.
- **Shower:** Take 1 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. 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 this nurse by 5 p.m., please call 206.598.6334.

The nurse will tell you when to come to the hospital and 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

Day of Surgery

At Home

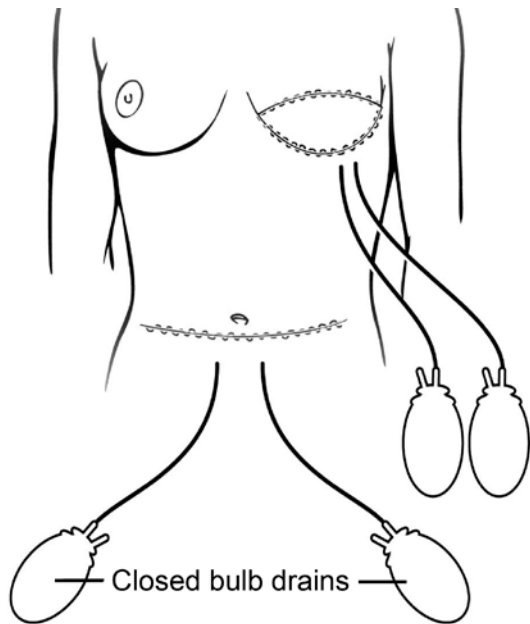
- **Food and drink:** Do **not** eat or drink anything on the day of surgery. This includes gum and mints.
- **Shower:** Take another shower with the antibacterial soap. Follow the same steps as you did for your shower the night before.
- **Medicines:** Follow the instructions the pre-surgery nurse gave you about what medicines to take or not take. Remember to sip only enough water to swallow your pills.

At the Hospital

- **Heating blanket:** We will cover you with a heating blanket to warm your body while you wait to go into the operating room (OR). This helps reduce your risk of infection. Ask for a heating blanket if you do not receive one.

After Surgery

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



DIEP flap breast reconstruction incisions and drains.

- A thin **intravenous tube** (IV) in your arm. We will use the IV to give you medicine for pain and nausea.
- A **catheter tube** inserted into your bladder to drain your urine. This tube was put in place while you are asleep in the OR.
- **Sequential compression devices** (SCDs) on your legs. You will feel these leg wraps fill with air from time to time. This pressure helps blood move through your leg veins. SCDs help prevent blood clots while you are in bed and not as active as usual.
- Some **closed bulb drains** coming from your incisions (see drawing at left). Please read the handout “Caring for Your Closed Bulb Drain” to learn more about these drains.
- A small wire called a **Doppler wire** in your flap where the blood vessels are attached. This wire helps the nurses watch the blood flow to your flap. The wire will be removed 2 to 3 weeks after your surgery, at your 1st or 2nd follow-up visit.

Recovering in the Hospital

You will stay in the hospital for 3 to 5 days after your surgery. The first 24 to 48 hours, you will be in the Intensive Care Unit (ICU). When your surgical team sees that the blood flow to your flap is staying strong, they will move you to a bed in a regular care unit in the hospital.

Bed Rest

You will rest in bed the day after your surgery. The head of the bed will be slightly raised to lessen the strain on your abdomen. While you rest:

- A warm blanket will be placed over you to help with blood flow.
- From time to time, you will feel the SCDs gently squeezing your legs.
- Your nurses will check the blood flow to your flap often in the first 24 hours.

Incisions

All of your incisions will be covered with gauze right after your surgery.

- Your **abdominal incision** will be above your pubic hairline. It will go from hip to hip.
- Where your **chest incision** depends on the type of mastectomy you had.

Diet

Most patients cannot eat or drink anything by mouth for 24 hours after surgery. You will receive fluids and nutrients through your IV during this time.

Breathing Exercises

Your nurse will help you do breathing and coughing exercises every 1 to 2 hours while you are awake. These exercises will keep your lungs clear and help prevent *pneumonia* (lung infection).

Pain Control

You will use a pump called *patient-controlled analgesia* (PCA) to give yourself pain medicine for 1 to 2 days after your surgery. You will push a button to get pain medicine through your IV when you need it so that you stay comfortable.

If you need pain medicine after you go home, take the pain medicine your doctor prescribed for you.

Bladder Catheter

You will have a catheter in your bladder for 1 to 2 days. This will allow you to rest in bed. It will also lessen the strain on your belly.

Drains

Your nurse will give you a handout called “Caring for Your Closed Bulb Drain.” Please read it carefully. Ask your nurse any questions you have.

You will have drains in your belly and in the area of your breast reconstruction (see the drawing on page 3). You will go home with these drains in place.

Before you leave the hospital, your nurse will teach you how to take care of your drains. You will be taught to:

- Strip them every 8 hours so that they do not clog
- Empty them
- Record the amount of drainage that collects

When drainage from your DIEP flap drains is less than 30 cc in 24 hours for 2 days in a row, your drains can be removed. You can wait until your follow-up visit to have this done, or you can schedule a visit with a nurse to have them removed. Call 206.598.1217 to make an appointment with a nurse.

Precautions and Self-care at Home

Breast Support

- Do **not** wear a bra for 3 weeks after surgery. Wear something that is supportive that does not constrict your breasts.
- You may wear a surgical camisole for breast support. These have removable pockets for drains. Regular camisoles and tank tops are OK, too.
- Do not wear an underwire bra until your breast incisions are fully healed.

Belly Support

For 3 to 4 weeks after surgery, we advise you to wear either:

- High-waisted bike shorts or
- Compression panties

These will support your belly with light, even pressure. This helps keep fluid from collecting in your belly. You can buy the shorts at sporting goods or other stores, and the panties at clothing stores.

Shower

- You may shower with your drains in.
- Do **not** take a bath, sit in a hot tub, or go swimming until:
 - Your drains are removed.
 - Your incisions are fully healed without any scabs, drainage, or incision openings.

Activity Limits

- For 4 weeks after surgery, do **not** lift anything that weighs more than 5 pounds. (A 2-liter bottle of water weighs almost 5 pounds.)
- For 4 to 6 weeks after surgery, do not do any gardening, vacuuming, aerobic activities, or anything else that pulls on your incision.
- Take short walks for exercise and to keep your blood moving.
- For 4 to 6 weeks, while the incision in your belly is healing, you will not be able to stand up straight. This can put stress on your back. If you have had back problems in the past, you may want to walk with a cane or other support during this time.

Return to Work

How much time you take off work depends on what you do for a living. Most people take 1 to 2 months off to recover.

Follow-up Visits

1st Follow-up Visit

You will visit your surgeon 2 to 3 weeks after surgery. At this visit:

- We may remove your drains if drainage has decreased enough.
- We will ask how your pain is and how you are doing at home.
- We may remove your Doppler wire(s), if ready.

2nd Follow-up Visit

At your 2nd visit, 5 to 6 weeks after surgery:

- We will remove the rest of your drains if drainage has decreased enough.
- We will ask how you are doing at home, what your pain level is, and how much pain medicine you are taking.
- If your Doppler wire was not removed at your 1st follow-up visit, we may remove it at this visit, if ready.

When to Call

Call your nurse or 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 or swelling
 - Increasing pain
 - Bad-smelling drainage, or a change in the type or amount of drainage
- Nausea, vomiting, or both
- Concerns or questions 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.

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

Who to Call

Please see phone numbers in the “Questions” box on this page.