

Therapeutic mammoplasty

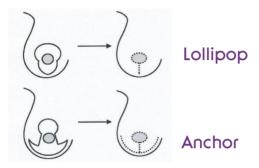
Breast reconstruction





Therapeutic mammoplasty is an operation that combines a wide local excision (also known as a lumpectomy) with a breast reduction technique resulting in a smaller, uplifted and better shaped breast.

This means that the lump can be removed with a wide rim of healthy tissue. The nipple and areola are preserved with their blood supply intact and the remaining breast tissue is repositioned to allow reshaping of the breast. The scars are either in the shape of a lollipop or an anchor.



Bleeding - You are likely to be bruised after surgery. This will settle after a few weeks. Very rarely surgery is needed if bleeding persists (two per cent risk).

Infection - All surgery carries a risk of developing an infection. If this happens antibiotics will be prescribed. The risk of infection is higher in smokers, diabetics and obese patients. If you feel unwell with a temperature or redness of the skin you should contact your GP or the breast care nurse (in working hours).

Seroma - Sometimes, surgery causes the wound to produce fluid under the scar and can cause swelling. This is called a seroma. It is common following surgery and is not harmful in any way. A seroma can be drained by the Breast Care Nurse if it becomes uncomfortable for you.

Wound breakdown - Up to five per cent of patients can have breakdown of the wound commonly at the T-junction in patients

with an anchor shape scar. This leads to a delay in wound healing but usually heals on its own. This is more common in smokers and people with large breasts with thin skin.

Inadequate blood supply - There is a small risk that the skin of the nipple or areola may partially or completely "die off" (less than one per cent of patients) due to inadequate blood supply.

Loss of nipple sensation - Numbness of the nipple and the surrounding skin is not uncommon, although sensation returns in the majority of patients. Some patients experience increased sensation, which can last for two to three months.

Cosmetic results - Initially your scars will be red and raised but this is unlikely to be permanent. Your surgeon will try to create an acceptable shape and symmetry between the breasts but sometimes some asymmetry remains.

Post-surgery and follow up

You will normally stay in hospital for one night and be discharged the following morning. The breast care nurse will come and see you and go over post-operative complications.

The breast care nurse will phone you during the week to ensure all is well, however if you have a problem then you can always contact them.

The surgeon or the breast care nurse will see you ten days after the operation to give you your results, check the wound and discuss further treatment.

If you would like this leaflet in another format or in a different language, please ask a member of staff.

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